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A Journal for those who live or work with
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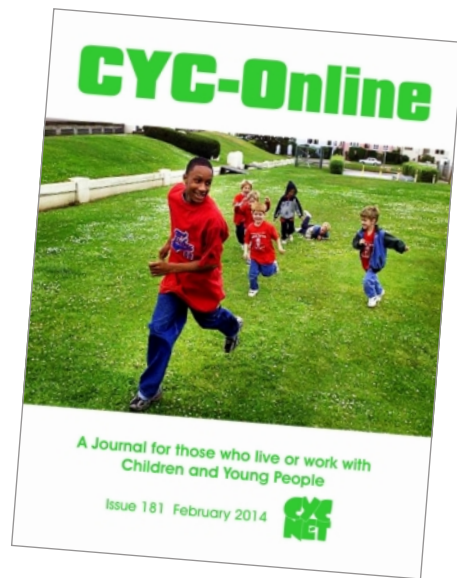
CYC NET

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Country Closed

Canada was closed for a few hours on a few different days during the recent Olympics. A friend sent me the picture alongside which accurately captured the situation.

Someone posted a series of photos and videos from across the country - whole schools gathered in auditoriums watching the

hockey games - and wasn't that women's hockey just the best of Olympic team sports - offices closed for a few hours (although unofficially); bars full of cheering patrons; individuals, couples, families and friends gathered in their homes - a friend posted a photo from Mexico with people gathered in sunscreen watching the games; a South African friend found himself caught up in the moment; people weren't answering the phone; emails went unanswered, although tweets were rampant - really, the country just shut down as people from coast to coast to coast gathered in front of screens, large and small, focused on 'the game'.

People who did not know each other, people of different cultures, genders, ages, orientations, beliefs, all huddled together, although in separate places, focused on the one thing they all had to share in this moment – the game! Connected, engaged in a common desire, sharing an experience that spoke of belonging - in this case, belonging as a Canadian cheering on the team.

It was awesome! It doesn't happen often, but when it does, we feel like we are all connected. And when it is over we get back to our business - re-open the country so to speak. But the memory of belonging lingers.

Now, Canada is a country with many struggles - inequality, economic stress, rankism of all kinds, etc., etc., etc. And we need to deal with these. But sometimes, I think, if we can just shut down and focus on something that unites us; perhaps we can build the foundation which will let us deal with the other issues. At least for these few moments (or hours) we become 'us' focused on a common dream.

And that has to be helpful.

Can we do that with the young people in our programs, schools, clubs? Can we, some days, even for just a few hours, shut down the focus on concerns, and focus on what connects us? Can we just enjoy our belonging?

Darn, you just gotta love hockey - well, at least if you are a Canadian. So, thank you to all those teams - and it was not just hockey - all those athletes who, for a few hours, let us refocus on what connects us rather than what separates us. Like the bobsleders, and the curlers, and the…

well, to all of those people who did so much for Canada in the Olympics - thanks for the sport – but more important, thanks for giving us the opportunity to connect together as Canadians – it is always a rare and valuable experience to be in connectedness – and now we will all get back to work ☺ Okay, Ottawa, you can reopen the country.

Money well spent, I say.

Thom

Boredom will always remain the greatest enemy of school disciplines. If we remember that children are bored, not only when they don't happen to be interested in the subject or when the teacher doesn't make it interesting, but also when certain working conditions are out of focus with their basic needs, then we can realize what a great contributor to discipline problems boredom really is. Research has shown that boredom is closely related to frustration and that the effect of too much frustration is invariably irritability, withdrawal, rebellious opposition or aggressive rejection of the whole show.   — **Fritz Redl**

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Complex Children

Kiaras Gharabaghi

It is almost impossible these days to walk into any service setting, and especially any residential service setting, without being told that the children and youth there are 'more complex than ever', or 'the most complex kids in the system'. I am a little perturbed by this linguistic development, in particular because there are a number of obvious implications. First, it would appear that the young people I worked with twenty years ago were really of the simple kind, the sort of one-dimensional type with easy to read and easy to use instruction manuals on how to get better. It didn't seem that way to me, but alas, perhaps I was just too inept. Second, it suggests that childhood and adolescence are not in themselves complex; it is just these 'crazy' kids in our various services that are complex; you know, because they are in our services after all. And third, it seems that once someone claims to be serving complex children and youth, other service providers have to follow suit, whether or not they want to. After all, it would be potentially difficult for a service provider to announce that it only served the 'simple kids'; this just doesn't seem all that advantageous from a marketing perspective.

I have tried hard to determine what exactly it means when a child or young person is labeled as 'complex'. To be fair, there would appear to be some relatively reasonable explanations. Young people are 'complex' when they are impacted by dual diagnoses, co-morbid conditions, concurrent disorders, or a host of other unfortunate circumstances that require either hyphenated descriptors or acronyms to do them justice. The increasing prevalence of FASD, ASD, PDD, PTSD and a range of other issues thus requires responses of similar impressive acronym-stature, like DBD, MST, CBT, SNAP, DBT, etc. All of this, quite frankly, makes me LOL, LMFAO, or simply just ☹.

I do have at least some respect for the clinical language and knowledge that inform working with (or 'on') children and youth facing adversity (I really don't, but it seems rude to just say so). I am just not sure why the burden of clinical self-aggrandizement has to be shouldered by children and youth. Sure, I can support the development of psychiatric and pseudo-psychiatric industries to ensure that the royalty of psychiatric and pharmacological empires don't go hungry (I have empathy), and I can validate the deeply hidden feelings of inadequacy of clinically-minded managerial types who just couldn't get into med school (more evidence of my empathy); in fact, I can even

understand the rational business types seeking to add value to their enterprise by rendering their chosen commodity (children and youth) more precious and delicate (ie: complex); but I am having a very hard time with simply hiding behind the mountains of complexity embodied in these poor, damaged, utterly traumatized and fundamentally dependent children and youth.

Complexity is indeed all around us. Our helping systems are hopelessly complex, so that families can barely navigate them. Our hierarchies are complex and wondrous symptoms of power and narcissism; families are complex after having their simple bonds 'treated' by the expert systems for several generations. Indeed, the very notion of 'expertise' is complex. I suppose it is fair to say that humanity is complex, as are all the stages of and transitions within human development from infancy to childhood to adolescence, to emergent adult, to mid-life (where is my Porsche?), to pre-senior status (what happened to my hair?) to that lovingly ignored, often abused and largely dismissed stage of 'being elderly'.

Young people, however, are not complex, or at least not more so just because our capacity to articulate complexity has increased. The extent or complexity of our 'not knowing' may have increased; certainly the complexity of funding ar-

rangements, community and service collaborations, and multidisciplinary mantras has skyrocketed. The challenge we encounter when trying to readjust ourselves for a different relational experience, the controversies as we argue and debate with our professional colleagues from other disciplines, and our fears about being exposed as experts of only what is not useful in the moment – these may all have become more complex over the years. But the child is still just that; a youngster living in a world of her or his imagination, hopes and dreams, fears and nightmares. Just because we know more about the brain, and how it is impacted by trauma, and just because we know that alcohol and drugs during pregnancy alter the chemistry and neurological activity within the young person's brain, doesn't mean that the child is now complex. It does mean that the challenge for us is to break free from our self-imposed shackles of complexity-labeling, and return to our roots as caring people seeking to explore the lifespace of young people together, with them, guided by their stories, their 'normal' and their path. In my experience, following the path of a young person is not at all complex, so long as we take the time to see it and worry less about not knowing where it might lead us.

Breaking the Rules:
The Question of Boundaries and Encounters

Hans Skott-Myhre

Early in my career I worked in a day treatment program in an inner city mental health center. The program served young people who were referred to as having "had their first psychotic break." The experience that they had with us was, in most cases, their first encounter with institutional psychiatry and madness. This was in the early days of deinstitutionalization and the mental health center had limited funds and relied heavily on volunteers to run its programs. We had Jesuit Volunteers, Catholic Worker Volunteers, Mennonite Volunteers, Graduate Students and Community Volunteers. I fit into the latter category having never had any training or coursework in psychiatry or psychology (much less youth work). Instead, my undergraduate degree was in literature and my sole training to work with psychosis was in the trenches of drug-induced madness that constituted my social milieu throughout the late 60's. There were a couple of nurses and a visiting psychiatrist, but largely we were a very young, untrained but well intentioned group intent on doing some good in the world. Our job (rather daunting in retrospect) was to do whatever was possible to mediate the effects of the fist brush with madness in such a way as to bring it to a close and prevent another episode that would result in re-hospitalization and the possibility of chronic recurrences.

While there is a great deal to recount and reflect upon from my experiences in that program, I want to focus on one incident in particular that may have some implications for the practice and theory in child and youth care/youth work.

The situation pertains to a young man given over to my care whose first encounter with madness had left him largely catatonic. He was able to move about and make it into the day treatment center unaided from the residential facility where he lived across the street, but he often got stuck in odd physical postures and found that he was unable to speak for extended periods of time. As we came to know each other these incidents became less

frequent and he was able to interact with other folks in the program with quite a bit of charm and humor. He became quite friendly with the staff and a bit of a leader in the community of his peers within the program and at the facility where he lived.

Unfortunately, one day his madness returned with significant force and all of the odd postures and inability to speak escalated until there was talk of re-hospitalizing him. I had noticed that he was less agitated and more functional when others were around and suggested that perhaps, if we could rotate our time with him both at the center and at the house, he might pass through the crisis without hospitalization. We put this plan into operation using both staff and clients with what appeared to be a good result. However, as the days went by, people became tired of the continual need to be with him in order to keep him reasonably stable.

One night I got a phone call at home indicating that he was deteriorating and that there was no one willing to keep him company at the house. The staff at the house was ready to have him hospitalized. I told them to wait and that I would be there shortly. I went to the house and joined him in his room where I stayed until the next shift in the morning. By then, things had gotten better and he and I walked over to the day treatment program where he had quite a good day.

While the intervention seemed to have been successful and I was quite prepared to do it again if necessary, my supervisor was horrified at what I had done. It was, in her view an irresponsible breaching of boundaries in which I had both violated the authority of the staff at the house who had wanted to hospitalize him and her authority in not consulting her as my supervisor before taking action. This was worse because I was a community volunteer and hence at greater liability if anything had gone wrong. In my view, at the time and even now, what was missed was the fact that what I did was helpful to another human being in distress.

I was reminded of this when watching a wonderful documentary on Milton Erickson "Wizard of the Desert." Erickson was without a doubt a clinician without peer, but his hypnotherapeutic approach was unorthodox to say the least. He got astonishing results in assisting the people who came to see him access their own internal resources to resolve apparently intractable difficulties, but the way he went about it was both complex and well outside traditional psychological theory or practice.

Among his unorthodox approaches was his notion, as stated in the documentary, that the people he saw were human beings, not patients; not clients, but people. He had his practice in his home and, as a result of the fact that he didn't see the people who sought him out for help as subjects for treatment, but instead as people visiting his home, he kept his door open during sessions. His children report that they comfortably went in and out of the room during sessions and were at times recruited to help him in his work. In one instance noted in the film, his daughter was asked to give someone he was seeing insights into how a child would perceive the situation. In another incident, his

son was employed to go to the house of a woman who was struggling with drinking, to search it for hidden caches of alcohol. His neighbors were also involved at times with his interventions, being asked to do things with people seeking Erickson's help. One man, who had sought assistance with learning the skills to live on his own, lived nearby and reported that he and Erickson often went out to eat together, to the movies and to get their hair cut. People who came to see him from far away could stay at the house with Erickson's family during the course of the work. In short, Erickson made no significant distinction socially between friends, family and people seeking his help.

Erickson's non-hierarchical and humanistic approach to working with others reminded me of the work done by Franco Basaglia, R.D. Laing and Felix Guattari in far more institutional settings. Basaglia did his work in the large asylums in North Italy in the late 20th century. As the head psychiatrist and director of the asylum, he unlocked all the wards, made all treatment voluntary and held large open meetings with both staff and patients in which all voices were heard equally without any preference given to professional vs "mad" voices. Like Erickson, he saw the people in his care, not as diagnostic categories but as fellow human beings struggling, like all of us, with the effects of a dysfunctional society and in need being treated with dignity in that struggle. When Basgalia found that the inmates would not leave the asylum, even though the doors were open, he brought the community in. He brought labour leaders, students, artists and other volunteers into the asylum to work with staff and the inmates to create a new form of sociality in which liberating both the staff and the patients from the domination of the institution became the primary focus.

R.D. Laing, like Basaglia, refused to see madness as a diagnostic set of categories. Instead, he also saw it as an effect of living in a dysfunctional society. In fact, he suggested that those who successfully adapt to such a mad and brutal society are the truly dangerously crazy ones. Rather than work within the asylums, he provided spaces of sanctuary where psychiatrists, artists, activists and people designated as mad could live together and work through madness in a safe environment that was not afraid of differences in consciousness and apperception. Kingsley Hall was his most famous project, where the boundaries between staff and patients was eroded and challenged on a daily basis. Living together was not premised in a hierarchical structure where the staff dictated the terms of healing. Decision making was communal as were the distribution of household chores and facility maintenance.

Similarly, the Lacanian psychoanalyst, political activist and father of schizoanalysis, Felix Guattari ran an alternative clinic for those designated as mad called La Borde. This clinic was similarly run as a collective with a focus on building a common mode of sociality in which the healing was rooted in the non-hierarchical social relations between staff and patients. The fundamental work was focused on finding mutual ways to be creative that could be

accomplished together to the betterment of all concerned. This meant staff and patients working together in the garden, the kitchen, on art projects, film projects and facility management. Interestingly enough, it could reasonably be assumed that Guattari derived much of this model from his early experiences with socialist youth groups that provided a kind of child and youth care/youth work to him and his peers growing up.

I find three things compelling in all these examples: 1.) The belief that there is no significant hierarchical distinction between those who wish to be helpful and those seeking assistance; 2.) that the current mania for boundaries may actually interfere with our capacity to do our work as truly relational practitioners; and 3.) that as Alice discovered, perhaps we are all mad here.

If so, then perhaps we might want to re-think, at a minimum, how we conceive of boundaries in our work and why we imagine they are necessary. Who is being protected and why, may be a significantly troubling question that deserves more reflection and conversation. Each of the practitioners above took the question of our humanity seriously as a political question of power relations that required unorthodox approaches to how they structured their workplaces. Perhaps, we might want to review our own workplaces with similar seriousness and integrity.

Finally, each of these practitioners was not afraid to be involved with the people they worked with as friends, future colleagues, fellow activists, neighbors,

students and teachers. In many cases they formed relationships with their "patients" that went well beyond the borders of the institution and far into their personal lives. In some cases, these became lifelong friendships. Similarly, they did not see the border between the community and the institution as anything other than an unnecessary hindrance. They were quite happy to violate this border and let the community in and the incarcerated out. Of course, this takes a good deal of courage. I wonder whether we, as relational practitioners have even a small fraction of such courage?

In closing this month's column, I want tell one last story that was told to me when I was very much a novice youth worker. There was a quite famous woman who had run youth shelters for many years and who was very well thought of by her peers. She always carried herself with a good deal of dignity and reserve and so I was quite surprised to learn that she had a powerful socially deviant side as well. The story that was told, was that in her earliest shelter, which she set up in her home for runaway and homeless youth, she was once raided by the police looking for a particular young person. As the police came in the front door she grabbed the young person in question and ran out the back door and down the alleyway making a clean escape. The moral of the story as told to me, was that you always put the young person first no matter what the risk to you personally. I wonder what our institutional risk assessment people would make of that?

Organizational Accreditation: How Training on the Therapeutic Use of Daily Life Events Meets Behavior Support Standards and Promotes Relational Practice

James Freeman

Accreditation processes for child and youth serving organizations typically require compliance with Behavior Support and Management (BSM) standards. A substantial component of these standards is related to practitioner training. This article explores ways in which training on the Therapeutic Use of Daily Life Events (DLE) supports such standards while promoting relational child and youth care practice.

Key words: *relational child and youth care, organizational development, accreditation standards, behavior support and management, daily life events*

The process of accreditation can be a meaningful experience for a child serving organization, especially one committed to improving and demonstrating certain levels of service quality. The process typically includes organizational self-studies, site visits and feedback from peer reviewers, periodic reporting and annual maintenance requirements. Although it is possible to comply with accreditation standards without a respect for and commitment to relational child and youth care, it is a tangible way for an organization to demonstrate a commitment to quality care beyond what is required by legislative or licensing bodies.

Sources of accreditation standards and processes

One widely recognized accrediting body is the Council on Accreditation, which provides an evaluation process for a range of human service programs includ-

ing group homes, foster family and adoption programs, afterschool, child protective services, out of school time, shelter and transitional living, and family advocacy programs. It was founded in 1977 by the Child Welfare League of America and the Alliance for Children and Families, and claims to have accredited over 2,000 programs around the world (COA, 2014a).

This examination of standards uses those provided by the Council on Accreditation. The same process, however, could be used to examine standards provided by other accrediting bodies such as the National Association for the Education of Young Children (NAEYC) formed in 1985 or the Commission on Accreditation of Rehabilitation Facilities (CARF), formed in 1966 which, with a historical focus on medical rehabilitation, now also serves behavioral health, child and youth services, and community services among others.

It is noteworthy to mention that the Child and Youth Care Education Accreditation Board, which was incorporated in 2012, is developing an accreditation process for postsecondary child and youth care education programs (CYCEAB, 2014). Although different from accrediting programs which directly engage young people and families, improving the quality of child and youth care education will have a significant impact on our field.

Standards for behavior support

One of the standards evaluated by the Council on Accreditation is behavior support and management, which includes the following three standards related to general practice: philosophy and organization policy, behavior support and management practices, and safety training.

Organizations that use restrictive behavior management interventions such as restraint or seclusion are also required to meet an additional three standards. These include training in restrictive interventions, the protection of safety and well-being, and procedures for documentation and debriefing. Best practices, research, and prevention related to the use of restrictive interventions have been and continue to be discussed in the child and youth care literature (Davidson, McCullough, Steckley & Warren, 2005; Flavin, Freeman & Reyes, 2009; Steckley, 2012).

The remainder of this discussion focuses on how training on the Therapeutic Use of Daily Life Events (DLE), a curriculum of TransformAction International (www.transformaction.com), relates to the first three behavior support and management standards.

Organizational philosophy and policy

The first topic in the behavior support and management standard relates to the overall philosophy and policies of the organization. It explains that "effective behavior support and management practices begin with support from leadership that encourages an environment in which the need for restrictive interventions is minimized to the greatest extent possible". It continues by affirming that "training for personnel and foster parents is an essential component of maintaining a safe work and [care] environment" (COA, 2014b, p. 1).

This vision implies a proactive and intentional approach to shaping the culture of the organization. In practice this requires the ability of the practitioner to position oneself proactively in relationship with colleagues and youth. It supports the idea that the practitioner is in the most influential role in a young person's daily life.

It is here that the DLE approach begins and equips practitioners with knowledge, perspective, and skills to provide effective support. The training spans a range of integrated topics including an awareness of moments in daily life, an introduction to the characteristics of a relational child and youth care practice (Garfat & Fulcher, 2012), looking beyond behavior and an awareness of basic human needs. Practitioners are also exposed to the process of change and elements of intervention, two areas that boost one's ability effectively to use moments in daily life as meaningful opportunities for support and growth of the young person.

Those who complete the course frequently describe an increase in personal effectiveness and are able to observe positive behavior change in those they work with (Freeman, 2014). The DLE approach, and its outcomes, is one that supports an organizational philosophy and provides guidance for specific practices within the organization.

Behavior support practices

The second topic in the behavior support and management standard relates to practices used in the organization. The standard envisions a "culture…within every facility and foster home that pro-motes respect, healing, and positive behavior and prevents the need for restrictive behavior management interventions" (COA, 2014b, p 6).

Far too often management of challenging behaviors is provided by coercion (e.g. extensive reward and punishment, over emphasis on compliance). Meaningful behavior support is more than "teaching social skills and encouraging situational compliance…it is what happens between the adult and the child that is critical" (Fewster, 1992). Stein observes that:

> *The growing popularity of behaviorism today is leading parents, teachers, and others who work with children to rely increasingly on behavioral interventions, especially on punishment, to the exclusion of other things that have proven more successful over the years in teaching children self-control and responsibility…[and] they seem to be relying on it even more, talking with children less and less.* (Stein, 2007)

The DLE approach provides a contrasting focus on relational care and intervention that is guided, moment to moment, by the needs of the young person. It meets the three specific areas described in the behavior support practice standard: (a) development of positive relationships, (b) building and strengths and reinforcing positive behavior, and (c) responding consistently to all incidents of harassment or violence.

The development of positive relationships is emphasized through a focus on a particular way of being with a young per-

son, anchored by the characteristic of connection and engagement. Relationship is understood in this context not as a means to an end, but rather the building and developing of relationship as the healing work itself. Building on strengths and reinforcing positive behavior is addressed through a focus on ongoing interpretation, which includes the concept of meaning making and a strength-based and resiliency focus. Responding consistently to all incidents of harassment or violence is addressed through the elements of intervention, which provide a four-part framework for approaching an incident, or moment, and using observation and analysis skills to prepare and intervene. The four components provide a standardized approach to intervention that is flexible to the child, the present circumstances, and specific choice of intervention.

Safety Training

The third topic in the behavior support and management standard relates to safety training. The standard requires that "personnel and foster parents receive ... training that promotes a safe work and service environment, and a reduction in emergency situations" (COA, 2014, p 11). The DLE approach provides a thoughtful and proactive way to support an individual at any stage of escalation.

Practitioners in some settings work with individuals who can be assaultive or engage in self-harm – and we must know what to do to keep ourselves and others safe in such situations. For example, in a residential care facility a young woman is hospitalized after a significant self-harming

incident. As she leaves in the ambulance, a critical moment occurs when the other youth and adults begin to gather back inside the home. The practitioner's ability to recognize and respond to the emotions, dialogue, and interactions of the group can create or hinder the maintenance of a safe and stable environment. The DLE approach guides the practitioner in reflecting on how the hospitalization of the young girl might have been prevented. It also guides – as part of our way of being with a young person – the offering of respect and dignity in the process of hospitalization if it could not have been avoided.

The safety standard requires training that equips practitioners in three specific areas related to safety. The following examples provide some of the ways the DLE approach relates to each one.

(1) Recognizing and responding to behavior, including contributing factors. In the DLE approach, all behavior is interpreted as a means to meet our basic human needs – and this is often the primary contributing factor which drives our behavior. Understanding the process of change, another component of the DLE approach, also guides how we respond to behavior. Is the child experiencing a safe relationship? Do they have a growing awareness of their own needs? Is there risk that needs to be mitigated or introduced into their daily life? These are questions that the process of change equips the practitioner to reflect on and ask in their work. Working in the now and being

emotionally present also enhance this ability to recognize and respond to behaviors as they are occurring.

(2) *Understanding how adult behavior can influence the behavior of the child.* The impact of adult behavior on the behavior of the young person is a recurring and central theme in the DLE approach. In every interaction there is an element of interpretation and action from both the child and practitioner. This is highlighted in characteristics such as meaning making, reflection, and examining context. The DLE approach moves beyond a passive understanding and promotes an active developmental responsiveness from the practitioner to the young person. This positions the practitioner to be looking for and considering the next step of the child's development – often a micro step – and proactively shaping the relationship and environment to promote growth.

(3) *Methods for de-escalation.* Behavioral and emotional escalation can occur in all of us, sometimes quickly, so it is important to know effective strategies that can help a young person or family member regain a sense of calm and self-control. First, the DLE approach prepares practitioners to recognize the various types of moments that make up daily living. It is in these moments that escalation occurs and this awareness prepares the practitioner to provide individualized and in-the-moment support. Second, the DLE approach equips practitioners

with a unique way of being with the young person in those moments. They have a pre-determined commitment to hang in when a child escalates, an understanding of working in the now and counseling on the go which allows the practitioner and child to learn from the events that are unfolding and contributing to the escalation. Thirdly, the DLE approach promotes skills especially relevant to de-escalation including being emotionally present, and rhythmicity.

Finally, in examining the elements of intervention described earlier, practitioners learn to ask questions that inform on-the-spot responses to escalated behaviors. What is actually happening in this moment? What potential or opportunity might be available? What do I know about this individual that relates to this moment? How might this person interpret my actions? What feedback is being given as I approach? These questions and others form the four elements of intervention that prepare us in advance to support young people dealing with anxiety, stress, or any other factor causing behavioral escalation.

Conclusion

Accreditation standards for behavior support and management are best met by an individual who is aware of the moment, the potential of the opportunity that is unfolding and presenting itself in that moment, and is attuned to the needs of young person. Fewster explains:

Whatever their particular level or form of professional training and experience, it is the personal qualities of [adults who work with young people] that most profoundly influence the life of the child. Whatever theories they carry and whatever techniques they have picked up along the way, the most critical issue is who they are and not what they are. [It is the role of the organization] to create an environment in which practitioners are encouraged to examine themselves in their

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Reflection and discussion questions for going deeper

1. *What are the benefits of accreditation for a child and youth care organization? What might be some drawbacks?*

2. *What are some ways coercive methods of behavior support might be able to achieve compliance with accreditation standards?*

3. *What does the DLE approach offer in contrast to these coercive approaches?*

4. *If you were in a position to create an accreditation standard related to behavior support, what would you include in your statement?*

relationships with children and teach them to understand that it is the child who must determine the process of change and not their so-called "interventions." (Fewster, 1992)

Meeting accreditation standards on the topic of behavior support and management does not need to be excessively behavioral or scientific. Training in the DLE approach, with its foundation in the characteristics of relational child and youth care, is a vital component of meeting accreditation standards for behavior support and equips practitioners to carry out relational, caring, and effective practice with young people and families.

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Expectations & Outcomes

Maxwell Smart and John Digney

Suspense is worse than disappointment.
Robert Burns – Scottish poet, novelist and playwright

Ambition is the last refuge of failure.
Oscar Wilde – Irish poet, novelist and playwright

When we speak of expectations, the inference is that we are referring to a future event and that we are engaged in a process of 'waiting' or are in a state of 'anticipation. When we apply the term to our work life, we then come to think in terms of, 'what is it that I am supposed to be doing or delivering anyway?'

Unless we are clear on not only ours and others 'expectations' but also: (i) an agreed method of identifying when they have been realised' and (ii) knowing what to do next, we will live in a constant state of suspense, making our way to a destination that lies in a darkened room, below a bottomless pit, on a planet that has yet to be discovered. In effect, if we are unclear on any of these elements our future will be prone to 'movement of goal posts', ambiguous subjective interpretation and a sense of never achieving the target.

Eh?

The point that we are hoping to make here starts with the fact that, in our daily lives, in the work that we do, we are living with and dealing with young people who have complex needs, who have ended up in a particular place (emotionally and physically) and quite often not through their own actions. These young people are subject to many processes and have many 'stakeholders' involved in their lives. Each of these stakeholders (social workers, programme managers, politicians, policy makers, etc.) has different 'expectations'. Their 'expectations' are often poorly articulated and usually in conflict with other stakeholders expectations . Also, these expectations may be somewhat transient or downright impossible to achieve. So, what to do?

No Surprises – a Real Assessment of Needs

A close friend and colleague of the

writers once indicated that in working with youth in difficulty, that "there should be no great surprises". What our colleague meant by this statement was that we, as carers and important adults in the young peoples lives, should create a climate of predictability for them; predictability in emotion, predictability of reflection and to a degree a predictability of action.

It is critical that we understand that the idea of predictability, like that of consistency, does not mean "uniformity". It does not mean a "one size fits all approach to the work we do. What it does mean is that we are emotionally congruent; that we do not pull something on a kid, in assessment or in meetings, that is entirely left field. At the same time this does not mean that we avoid issues; we should tackle behaviours and emotions that are self defeating and self destructive. If we do, as part of our day to day interactions with youth, then the issues and challenges become predictable. Similarly, the expectations and outcomes are also more likely to become predictable.

Assessing right allows for 'doing right'

To better understand expectations and possible outcomes, we must do an assessment, that's got to be the answer, right?

When a young person is referred to most programmes, there are usually forms to 'fill out', reports to forward and meetings to attend. During the course of this information exchange there is talk of things such as 'placement goals' or 'desired outcomes'; with each person present putting forward their own set of

desired wishes (expectations) for the placement – all based of course on their own individual set of values, beliefs and assessment of all and sundry.

All this talk of 'assessment' is extraordinary – in fact we are finding, almost on a daily basis, that we are bombarded with manuscripts such as: 'service policies', 'models of care', 'therapeutic approaches' and other such documents which speak about assessment for the purposes of (i) identifying, (ii) measuring and (iii) planning for the 'needs' of young people. Indeed, scanning through a document submitted to one of the authors reveals the following reference to assessment:

- Recovery assessment
- Assessment outline
- Assessment Process
- Assessment Categories
- Quality Assessment
- Referral Assessment
- Developmental Assessment
- Individual Assessment
- In-Depth Assessment
- 'What Works' Assessment
- Assessment of the Young Person.

Whilst we recognise the requirement to have as much information as is necessary, we begin to wonder, how often the proposed 'goals or hoped for outcomes' which are gleaned from these assessments are engineered to fit the expectations of the adult stakeholders as opposed to the true needs of the kids. We also ascribe to the maxim: 'Rubbish in – Rubbish out'.

Voice of the kid: from Starting Point to Outcomes

If anything is self evident in this discussion it is that there are a wide and diverse range of influences on outcomes. Adult stakeholders influence outcomes in their interventions and in decision making processes. Young people may influence outcomes by virtue of whether or not they choose to cooperate with adults working with them. However as Roderick Durkin once posited, if what we are doing with kids is so good, why do they fight us so much?

When a group of young people in care were recently asked by one of the authors, 'what are your expectations of the future'? The following were some of the responses:

'I expect to be allowed home in a few months … so long as my mum gets her shit together. She has to prove she is off the gear and able to look after us. In any case if they don't let me home, I'll just run away'.

'I expect that I won't live very long – lots of my mates are dead already from cars (accidents whilst 'joyriding') or drugs'.

'I don't know what to expect – I don't think it will be good anyway, but I can't help but hope something nice will happen to me – I think I deserve It'.

'I expect the unexpected (laughs').

We don't know for sure, but suspect these remarks are quite similar to what many kids in care might say. We wonder, what does this say about all our assessment and planning?

Outcomes do matter

There is much contemporary writing on the requirements for effective and efficient outcomes and there are many proposed systems to measure these. Who could disagree with the need for positive outcomes? After all, we all wish the best for our kids, we plan for the best possible outcomes and we hope we are successful in our shepherding of them. Despite the expectations some kids might have for their futures (and the expectations of others), we must of course strive for outcomes that really do matter. But what are these?

Some say that merely 'getting a young person to 18 years of age, in one piece,' is an achievement and a good outcome that helping adults should welcome. Others say that 18 years is a mirage if the outcomes in adulthood are just as undesirable as they were in the young person's childhood. As writers and practitioners we agree that we must get all our kids to adulthood but also take the later position that we need to help mold young people who can have their needs met and can contribute to society without destructive consequences for them, their families or communities. This doesn't happen on it's own and certainly does not just happen overnight. We need to be able to find a way to reinforce the small steps through a focus on this right set of expectations, seeking the right outcomes.

Small Victories

Those of us who have worked and lived on the coalface understand the importance of 'small victories'. We know we need to identify and draw attention to the small developmental advances that young people achieve on a frequent basis (daily or weekly). By identifying the right 'outcomes' and through constant positive reinforcement, when young people achieve these, we can hugely impact on the expectation of youth.

One such approach is the 'Outcome that Matter' Achievement Profile© which can assist in the much needed monitoring of young peoples achievements. It also provides an approach which can deliver information capable of enhancing care-planning and care provision. Not only does the instrument measure, in our opinion, 'the right outcomes' but the collaborative process of completing the instrument is designed to reinforce the 'small victories' to the young person (and indeed the other stakeholders). See here for more details:

http://transformaction.com/otm-training.html

Expectations and outcomes aren't something to aspire to reach at the end of a long and arduous journey – they are part of the daily routine and as with all things to be considered when dealing with people, they are dynamic.

Maxie and Digs

Common Sense Relational Approaches

Jack Phelan

Common Sense relational approaches have been the norm in CYC practice for too long. For almost twenty years there has been CYC literature based on relational practice which has moved us beyond behavioral methods of relational work, yet the pull of common sense thinking has been hard to counter-act.

Relationship work that focused on becoming a desirable role model for youth, described very well in 1969 in *The other 23 hours* has continued to be standard practice. Basically a youth would be attracted to an adult and want to imitate his/her behavior, and thus would acquire better living skills. The main task for the CYC staff is to be both a positive role model and a person whom the youth sees as interesting and attractive. This led to many CYC practitioners vying with each other to have the most "relationships" with youth, because it meant that you were being effective. Being a youth's favorite CYC worker was a clear goal. Another contradictory issue that arose naturally from this misguided focus on attractiveness was the need for all workers to be "consistent" and not play favorites, which resulted in CYC practitioners acting like nameless/faceless staff who all reacted exactly the same and thus avoided having individual relational connections. Common sense thinking resulted in a shift from seeing youth as individuals with relational needs to a behavioral approach which tried to neutralize relational energy and standardize

relational interactions.

So CYC practitioners are advised to be consistent, which results in every adult avoiding treating any youth differently, or being different from the other CYC adults. In this kind of approach it makes sense to follow up on an incident which happened earlier with a different adult, by treating the youth as if it had happened with you. The result for the youth is disastrous, because it negates any relational connection that exists between yourselves.

Since the 1990's there has been a clear description of the value of connection and the need for less control (Leaf, 1994). Unfortunately, it is not a common sense idea, and so the CYC field has been slow to change. When theory is ignored and each person is left to use their own common sense to guide their practice, we end up with a very frustrating situation for the
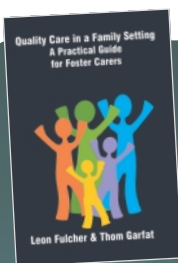

youth we claim to be helping.

I encourage the readers to investigate the recent CYC literature on relational approaches, since it is too complex to summarize here. Basically, we still need to be role-models, but we also need to individualize our approaches and channel our relational energy and genuine self as we use the life space to challenge youths to increase their attachment with us. As we create a safe mutual space to interact, our relationship will give us an opportunity to share life logic and compare beliefs.

So, common sense tells us (if we share some common sense logic) that youth will want to change because they like us and want to be similar to us. Unfortunately, the actual results for abused and neglected youth do not support this idea. They will indeed like us, sometimes for things that we did not intend, and then return to their own logic about the world which we have not come even close to challenging.

Free for a Moment

Gerry Fewster

The decision to create the journal *Relational Child and Youth Care Practice* came after twenty years of reviewing material led us to the conclusion that 'relationships' and 'direct involvement' are the core elements of child and youth care that needed to be fleshed out and translated into practice. If we are serious about the continued development of this profession, such introspection is the key to collective consciousness, critical analysis and responsible action. What a wonderful challenge for any research minded nomad looking for a project, thesis or bestseller. It doesn't have to take twenty years.

If you take a quick glance at our 'contents' page, you may judge this to be an impossible task. But if you sit back and peruse the entire journal from cover to cover you will find that, beneath the word-surface, lies an intricate network of values, assumptions, beliefs, interests and aspirations waiting to be discovered. Editing this issue, for example, I constantly found myself speculating around each contributor's tacit beliefs about 'freedom,' even though the word was seldom used and the concept never defined.

Freedom is one of those terms, like love, justice and morality, that can be used to define almost any favored condition and adapted to promote any form of self-interest. For example, it is difficult to find any thread of commonality among the visions of Karl Marx, Nelson Mandela, Che Guevara, Adolf Hitler, Mahatma Gandhi and George W. Bush, to say nothing of their diverse and conflicting strategies. But what does freedom mean in the realm of child and youth care, and in what ways are our thoughts and actions influenced by the answer?

From the outset, there's nothing tacit about the notion of freedom spelled out by Moen, Little and Burnett in their radical version of child and youth care. Their bold assertion that the planet is dying from global consumerism, and that children are being are being systematically prepared to

become fodder for the power and profit seeking agenda of the multinational corporations, is there for all to see. And I agree with them wholeheartedly. But is this diabolical state of affairs the product of repression, or could it be the unfortunate outcome of the freedom to consume, the freedom to amass wealth and power, and the freedom of association? I'm sure Messrs. Bush, Cheney and Rumsfeld would argue that all of this is preferable to the restrictions imposed by large bureaucratic governments and the tyranny of religious, ideological and political dictatorships.

The 'Radical CYC' response is to "arm the youth", not with weapons of mass destruction but with the power to use their collective voice to speak back. And why not? Kids are not our future – the future is theirs. But arms belong to armies, armies go to war, wars require leaders (on and off the battlefield), and leaders are there to "win". Some of you may remember the foreboding scene from the movie Cabaret in which a group of clean cut, bright eyed young men sing "Tomorrow Belongs to Me" while a bunch of Nazi henchmen lurk in the background.

The idea that young people should be encouraged to become active in re-shaping this sorry world is also the overt theme in Ali Raza Khan's model of youth participation in Pakistan. His contention that the 'mobilization' of youth energy "will bring about a complete social, economic, cultural and ideological revolution in the country" may well be so, but what would such a revolution actually look like? Given a choice, would the newly enfranchised youth of Pakistan further the

americanization of the planet by demanding equal access to skateboards and the latest video games, or would they draw from different values – ones that strengthen our connection to each other and our neglected planet? And who will guide them? … revolutionaries? counter-revolutionaries? religious leaders? humanistic facilitators? marketing agents? personal growth counselors? child and youth care workers?

While my heart stands firmly with Ali Raza Khan and the Mayhem Group, my restless mind responds as a cautious observer. By the time kids are ready to join hands and speak back to the world, they are already entrenched in the values and prescriptions of their respective families, communities and cultures. For the most part, those who have found a place for themselves are unlikely to call for a revolution and those who struggle to find an identity and location are generally preoccupied with their own unmet needs. Does this mean that we would be left with an elite group of idealists supported by an army of freedom fighters? If this is so, then the collective voice of youth is unlikely to be that much different from the collective voice of adults, echoing across the ever-widening chasm between those who have and those who have not.

Please don't misunderstand me. I am all in favor of bringing the voice of youth forward, particularly if it means shaking the power hierarchy down to its foundations. But freedom of expression and action can never be tied to some preconceived ideal or outcome. We must be prepared to listen and respond, even if that voice

supports the status quo or promotes a set of values and prescriptions we find even more abhorrent than those contained within the prevailing morality. But will we, the initiators of youth participation, be satisfied with such outcomes, or will we feel let down by the kids we hoped might change the world? Unless we are prepared to let the chips fall where they may, we might well stand accused of using young people to serve our own agenda, to create what we have failed to accomplish – a more caring, compassionate and connected world.

At the other end of the continuum, Debra Palmer exposes one essential condition for personal freedom – the state of being aware, or "awake". Her wake-up call is clear and profound: to the degree that we are disconnected from our senses and unaware of what is taking place around us, we blindly recycle the old routines and parrot the old prescriptions, fearful of change and dependent upon those who presume to look after us. Palmer is not out to change the world. Her focus is distinctly personal but the obvious message for child and youth care is that we cannot invite kids to wake-up if we are half-asleep ourselves.

But is this the full story, or is being awake simply the point of departure for a more conscious brand of freedom? If this is the case, then perhaps we should consider where such freedom might lead and what limitations, if any, might need to be imposed for the common good. In other words, our new-found sensitivity may also be used to gain a greater understanding of our nature and carefully reconsider the notion of self-responsibility.

Within the broader picture, there is little doubt that young people who remain cut-off from themselves and unaware of their circumstances will become the pawns of the power-brokers, waiting to be numbed out and dumbed down even further by the assaults of mass media, pre-

scription drugs and corporate education. Increased awareness and social consciousness will certainly create a climate for action even if the vision, in terms of personal and collective freedom, remains unclear. The three articles discussed thus far take us from the global to the personal but their underlying notion of freedom seems remarkably similar and their call for action is clear - wake-up and smell the roses … before they die.

As we all know, however, waking-up requires more than an alarm clock. In her "Missing Link" article, Lorna McPherson delves deeper into our nature as she travels through her own childhood in search of the "inhibitors" and "promoters" of growth and change. Her focus is the developmental interpersonal arena where, once again, we find freedom expressed as an individuals' ability to throw off the shackles of external agenda to become the primary author in his or her own life. This is not a blind act of rebellion, although this is usually a significant step along the way; it is a conscious process of sifting through experience to determine what fits and what does not. The angry rebel is no more free than the blind conformist.

What Lorna's story reveals is that the pathway to personal autonomy can be intricate, laborious and, at times, profoundly painful. Many of us can relate to this through our own life experience, and all who practice child and youth care will recognize the challenges and complexities in the lives of the young people with whom we work. The underlying and undeniable message is that the quest for personal freedom is no stroll in the park; it is an

epic personal odyssey that demands courage, caution, clarity, commitment and, above all, compassion. As practitioners, we may share part of that journey with our 'clients' but if we use our influence to direct them along a particular route, anesthetize their troubles, or urge them to walk in our footsteps, we cast their freedom to the wind.

In the articles cited thus far, we can identify two related dimensions of freedom: the freedom to be oneself and the freedom to act purposefully on one's environment. Now there's nothing in this observation that is unique or specific to child and youth care. But if we dig a little deeper and examine the values and assumptions that link these two elements, the picture becomes more distinctive.

Unlike many that sound the clarion call for freedom, these authors do not throw around terms like "empowerment," "human rights" and "justice" to articulate their position. Their common stance seems to be that freedom is a developmental process through which individuals become the active and creative agents within their own lives and, thereby, contributors to the well being of the whole. It is not something that is granted by authority or earned through devotion to an ideal. At a deeper level, this seems to be founded upon an existential belief that, in the full expression of our humanness, we are essentially curious, caring and compassionate beings seeking to connect with our Selves, each Other, and our Planet. In other words, we are relational

And isn't this what David Osborne's paper on restorative justice is all about? In

sharp contrast to the adversarial guilt and punishment mentality of the criminal justice system, Osborne's position is fundamentally about relationships. In his model, the imposition of depersonalized authority and order from 'above' (wherever that is), is replaced by the personal face-to-face interaction of people who continue to be actively engaged in the social process. The underlying belief seems to be that when people come together and recognize each other as human beings, rather than as objects to be tagged as 'victims,' 'villains,' or 'deviants,' a very different process emerges – one in which freedom and personal responsibility are integrated within the same equation. In other words, freedom is a shared creation. Sounds like child and youth care to me.

For me, the article that most clearly suggests a distinctive child and youth care perspective on freedom is Cathy Richardson's heartfelt description of the struggles of the Metis people of Canada. If any issue can evoke the victim-villain mentality it is the repression of ethnic minority groups within a dominant culture. But Cathy does not shake her fist to demand justice and retribution, although she could be excused for doing so. Instead, she delicately introduces us to the Metis people through their stories, their search for identity and dignity, and their long-standing quest for a legitimate place in social mosaic. What she asks for is not atonement or compensation but a simple human response from people who are free to access their own humanity. And this, again, is child and youth care – personal, empathic, compassionate, relational and spiritual.

Of course, this is all speculation on my part, but if my interpretations are valid, then child and youth care does indeed embrace a notion of freedom that might be clearly distinguished from the positions so often advocated by political activists, academic liberals, moral philanthropists and perhaps even social workers, radical or otherwise. The implications seem to be that, if we are to nurture any sense of freedom in others, it can only come from our own sense of being fully awake, aware of our options and responsible for the choices we make. As practitioners our task is not simply to remove the obstacles that seem to stand in the way of our clients, but to draw out the resources that lie within and guide each spirit toward its own unique adventure. The radical nature of our role is not to ensure accountability to some prescribed standard but to promote the more complex and demanding principle of self-responsibility. Beyond this, we can make no claim on the outcomes.

"For to be free is not merely to cast off one's chains, but to live in a way that respects and enhances the freedom of others."

— Nelson Mandela

Child and Youth Care Workers: Who Needs Them?

Thomas E. Linton and Michael Forster

Consider three brief vignettes of contemporary child and youth care workers drawn from the authors' personal experiences:

1. Jan C. is a live-in worker for a Chicago-area group home for adolescent girls, a position she took six months ago after a year of full-time shift work (forty hours per week) in the same program. The live-in position, offered to Jan because of her demonstrated gift for working with her emotionally troubled clients, is extraordinarily demanding. She is present in the home over 100 hours per week, rarely is able to take vacation and has not spent a major holiday away from 'the kids' since beginning work with the program eighteen months ago. Her friendship circle is largely confined to her co-workers in the program and her love life is, as she puts it, 'on the back burner.' Despite the enormous constraints and pressures on her work, she finds it deeply satisfying, both 'exhausting and exhilarating.' Jan wants to stay in child care work

long-term, but is painfully aware that pay is low and the opportunities for advancement few.

2. John and Mary V. are a married couple who work full-time in a downstate Illinois residential school for disturbed boys and girls. In addition to this full-time work, John and Mary are enrolled full-time in a master's degree program in Child and Youth Care at the University of Illinois at Chicago. Because the administration of their workplace is committed to upgrading the quality of child care within their program, it supports the couple with transportation aid, flexible working hours, and generally positive encouragement But because there are no local university child care programs, the students themselves must drive to Chicago once a week; they pay for their own meals and miscellaneous expenses, and find places to stay over with various friends and relatives who live in Chicago. Their rationale for self-subjection to this gruelling regimen: 'Of course we want to get ahead, to advance

career-wise; but for us that also means becoming the best possible child care workers, and giving the best possible services to the kids.'

3. Myrna R. is a child care work team leader in a Chicago facility for acting-out adolescents. A six-year veteran of child care work, Myrna is struggling, with impressive success, to balance demands of work and family with ambitions of professional advance and personal growth. A single parent of her own seven year old, Myrna is also a part-time community college student and one of a handful of Certified Child Care Workers in Illinois. She is considered a pillar of her program's effectiveness due to both her direct service to clients and leadership of other child and youth care staff. Eventually, she says, she might like to operate her own facility for delinquent and disturbed youth. Although she has received several attractive offers for work outside the field, at the moment she cannot imagine leaving child care.

'Maybe I'm crazy, but I know that I'm good with these kids and that they need people like me. Besides,' she quips, 'the high energy keeps me young.

The point of these sketches is neither to glorify the particular individuals nor to suggest that all child care workers demonstrate the kind of excellence implied by our examples. Those experienced in the child care field know that not all workers are excellent. They also know, however, that the types of individuals depicted above are not rare either. Indeed, our belief is that among America's approximately 200,000 child care workers are many thousands of dedicated and effective, truly excellent, child care workers.

Who are these child and youth care workers, and what distinguishes their excellence? Child and youth care workers are employed in a variety of residential and day treatment settings. Their clients are typically handicapped, emotionally or developmentally disabled, aggressive and acting out, multi-problem, 'troubled' children and youth. Estimated to number over 500,000, these are the kind of young

people most difficult to deal with; the kind with whom most mental health professionals, consequently, are loathe to deal – at least not at close range.

This latter factor of 'range' is one of two distinguishing marks that clearly set child and youth care work apart from the work of other mental health professionals. Whereas psychiatrists, psychologists, and social workers address various aspects of the child's life from a position of professional 'distance' (symbolized, usually by a secured private office containing the essential trappings of professional authority: desk, books, forms to be filled out, etc.), the child and youth care workers operate more or less completely within the "life-span" of the young person. This life-span contains the actual living quarters of the troubled youngster and all the activities that transpire there, as well as those places and activities outside the home through which various needs (medical, recreational, etc.) are met. It is a space shared in common by worker and child, much as such 'living space' is shared by parent and child.

As a result, the relationship of child to child care worker, more than the relationship to any other helping professional, is characterized by immediacy, intensity, and intimacy; it is a constant interchange of selves at very close quarters over very long periods of time. Even the special education teacher, whose role perhaps most closely resembles that of the child and youth care worker, can rely on a degree of functional structure, time limitation, and even physical distance from students that is greater than that available to child care workers.

The other distinguishing characteristic of child and youth care work, closely related to the range factor, is its inherently holistic nature. While every mental health profession claims to be addressing 'the whole child' it is the child and youth care worker who most truthfully does. Psychiatrists, psychologists, special educators and social workers tend to 'divvy up' the young person into segments most amenable to their own specialist skills. The child and youth workers, on the contrary, are, necessarily, integrationist and generalists. Like good parents they are there for the child whenever and for whatever reason the child needs them. And as with parents, the range of activities through which they might engage with young people is virtually limitless: from disciplining to game-playing to nursing an illness to comforting after a nightmare in the middle of the night – all are within the professional purview of the child and youth care workers.

A demographic profile of these workers indicates that most of them are twenty-three to twenty-eight years old, equally divided between men and women. Most are single. About 65 percent overall have two years of college; in urban areas 65 percent have college degrees (Krueger, 1983). We are concerned about excellence, however, more important than cold demographic facts are the qualities that excellent child and youth care workers bring to their work. Over the course of many years of involvement in the field of child care, in the various roles of direct service workers, supervisors, administrators, and educators, the authors are

deeply impressed by the consistent and widespread appearance of a number of valued even 'heroic' qualities among effective child and youth care workers. A list of these qualities would have to include the following:

- **Idealism:** a firm hopefulness and faith in the power to make positive change in human life.
- **Pragmatism**: a realistic practicality in the use of means, a willingness to experiment in the service of a burning desire to be effective.
- **Intelligence:** both cognitive and intuitive intelligence, a high degree of self-knowledge and the knowledge of how to use self in the helping task, coupled with a thirst for the accumulated scientific knowledge regarding development, pathology, human ecology, treatment, etc.
- **Empathy:** an enormous capacity for caring deeply about those in need.
- **Commitment:** the application of self, often with amazing stamina, to the thorny problem of effecting change in disturbed human beings.
- **Courage:** the willingness and ability to engage with always stressful, usually challenging, and sometimes dangerous youngsters.

Many other associated qualities spring to mind as well – qualities such as discipline, self-motivation, joie de vivre, sacrifice – but enough has been said to suggest something of an 'ideal type' of child and youth care worker, the kind of individual who can make a real, perma-

nent difference in the life of a damaged youngster. Above all, it is a healthy personality type: balanced, well-integrated, energetic, capable of both love and work in truly impressive proportions.

In light of the important work they do, and the qualities required to do it well, we might expect that child and youth care workers would receive impressive pay and professional status in compensation for their labors. Unfortunately, nothing could be further from the truth. In fact, child and youth care workers generally earn an average income of $9,000 to $12,000, with correspondingly poor job benefits. The position of child and youth care workers on the National Standard of Occupational Classification is below that of tour guides, barbers, porters, and ushers. Mailmen, auto workers, and janitors often have incomes of over $20,000 per year, enjoy respectable fringe benefits, and are engaged in a standard forty hour work week (and their work does not involve extremely stressful working conditions, nor daily congress with angry, troubled, and disturbed children!).

Child and youth care workers receive virtually no social recognition or professional status for the difficult, exhausting, and important work they have chosen. While the important role of the child care worker has long been acknowledged by leaders in the disturbed children's field, there has been great reluctance by the mental health system to provide a legitimate professional role for these valuable, but marginally recognized workers. Unlike the fields of psychiatry, psychology, social work, and special education, the field of

child care can boast of only a handful of university-based programs for the education and training of its members. Child and youth care work sits, uncontested, at the bottom level of the American mental health hierarchy.

It is not our purpose here to analyze the reasons behind the child and care worker's lowly position. Instead we intend to make the seemingly more simple effort of demonstrating that it ought not to be the case, at least not if the American republic is concerned about the future of its youth.

The Role of the Child and Youth Care Worker

We have already suggested something of the unique role of the child and care workers in the treatment of troubled youth. These care-givers, as Krueger (1983) has written, 'can generally be on hand to support growth, recognize change, and to discuss feelings throughout the day, not just during a scheduled office visit or class, as is the case with other helpers.' The direct positive strength of a healthy child and youth care worker serves as a major curative force in the life of the troubled children with whom he or she work. This quality of intimate human involvement that the child and youth care worker develops with the child is the central basis for deep-level change in the

abused, neglected, and frequently desperately alienated young person.

This strong positive identification with the child and youth care worker was identified by the pioneer youth worker A. Aichhorn (1964) as the central quality in an effective re-education of the troubled child. The child's relationship with this worker moves beyond the range and professional role limits to the traditional mental health or education specialists. The child and youth care worker activates the child's need for a trusting, non-punitive adult model, friend, and temporary parental figure. The activation of the child's deepest personal concerns enables the child to move beyond adult distrust to a close emotional bonding with the worker and this is an essential part in breaking down the tough resistances often maintained by the youth living in a residential setting. In depicting the qualities of the effective child and youth care worker, Aichhorn found essential, as we have in our experience, the healthy personality in general, and the capacities of empathy, intelligence, and critical distancing from societal norms in particular.

A Taste of the Great Plains

Mark Strother

For more than thirty years, I have worked with children and youth, some troubled and some troubling as Dr. Nicholas Hobbs might say. I would like to think that I have been helpful to a respectable number of them and, if so, believe some of that success stems from never having totally severed myself from my own childhood. In some areas, I have resisted "growing up" and, in at least a couple of areas, I am afraid my wife would tell you I have succeeded. With this "youthful perspective," I cherish many of my childhood memories and keep the stories fresh in my mind. The following is one of my favorite memories.

At about the age of 11, I had developed a love for reading. I had already put together a respectable collection of books, many of which contained grand tales of mountain men and Native Americans. I was fascinated by their rugged existence. Tracking, hunting, bow making, flaking arrow heads, fire starting with flint and steel, were all amazing practices and skills. I especially found interesting the ingenuity of those making an existence on the Great Plains. How do you build the fire needed for warmth and cooking when there is not a tree in sight, not a piece of wood for miles and miles? Buffalo dung was their answer and, to a sixth grader, that sounded awesome!

Well, reading and fantasizing was one thing, but I also liked to give everything a try. I had made a crude bow and an even cruder set of arrows. I could start a fire with flint and steel, had done a fair share of animal tracking around the neighborhood, and had built a magnificent shelter in my backyard. However, I had yet to cozy up to an inviting campfire produced purely from buffalo poo.

I can clearly recall the fine Saturday morning that I decided to check that off of my list of mountain man experiences. Hunting in the neighborhood had been

tough, so having no store of buffalo meat or venison, I took a couple of hot dogs from the refrigerator, grabbed a box of matches, and headed for the backyard. I immediately hit my first hurdle. There hadn't been a buffalo in my neighborhood in over a hundred years. There wasn't even a cow within five miles. However, I did have a large collie.

As it was my responsibility to scoop the poop and my schedule had been quite busy, sure enough, there was no shortage of dog turds in the backyard. In no time, I had collected enough turds for a small bon fire. I had forgotten to inform my parents of the plans for the day, so I decided my fire making activities might best be conducted inside the confines of my shelter. The previously mentioned shelter was a fine dugout just deep enough to sit up in and was covered with logs collected when trees were trimmed in the neighborhood. I made my way down the entrance to my underground haven and started looking for the best spot for my cozy fire. I decided that, with the dry timber overhead, setting my shelter on fire was a mistake to be made by a tenderfoot and not by someone of my experience. With a past scarred by enough accidental fires to have labeled me a fire setter, I prudently decided the safest place was the entrance. From the inside of the dugout, the entrance looked a bit like a fireplace which made me even more excited about my choices. I quickly made a pile of the dog turds and commenced to setting them on fire. Now, I don't know if you have ever tried to light a dog turd, but they are a little slow to light. Having almost burned up a whole box of matches, I decided I might need to cheat a bit and soaked the pile in lighter fluid. I immediately had a blazing fire. However, unlike the fires of the great plainsmen before me, mine may have produced a bit more smoke and, oh my, the SMELL! Unfortunately, the entrance also being the exit, I had to tend my plains style campfire from the inside of my shelter which was filling with the green, putrid smoke. By the time the fire died down to smoldering turd embers, I had developed a pounding headache and, to this day, the hot dog roasted over that fire is the worst I've ever eaten.

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Action Transforms

Defining Supervision in a Professionally Packaged Way

Frank Delano and Jill Shah

There are many different definitions of supervision, some trying to capture its' essence in a sentence or two and others focusing on summarizing the functions supervision entails. Ireland (1994) suggests supervision is a process in which the goals of individuals are met and meshed to ultimately meet the goals of the agency. It is primarily an administrative tool concerned with quality assurance and quality control in the delivery of agency services. Kadushin (1985) saw supervision as comprised of three basic tracks; administrative, educational and supportive, with the supervisor having responsibility to deliver all three components to the supervisee in the context of the supervisory relationship. Austin (1981) defined supervision as a process with designated functions involving relationships to produce the best possible services. Garfat (1992) speaks of a "S. E. T." format, using the functions of support, education, and training to define supervision as a learning process within the overall framework of enhancing the quality of services delivered to children and their families.

Professionally Packaged Supervision

In our efforts to compose a definition of supervision we have combined the main concepts of relationship and process in a package that creates a working definition of supervision which serves as a model to provide an overview of supervision and be a guide to the everyday functioning of the supervisor. In developing a common theme for all our training and writing about supervision we have focused on the concept of a "professional package" defined as:

> *A cohesive concept that logically articulates a commonly accepted professional standard that depersonalizes an issue and stimulates a professional process. Consistent use of the package cultivates an organizational culture that promotes a standard of excellence, cultural competence, and highest quality services.* (Delano and Shah, 2006, p.38)

The concept of building a professional package focuses on framing issues in relation to commonly accepted professional

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standards and not on issues of personality or individual shortcomings. Based on our professional package theme we suggest the following definition of supervision:

Supervision is a professional relationship that provides support, education, monitoring of quality, and creates a safe forum to reflect on professional practice. It should encourage constructive confrontation and critical thinking that informs and improves the practice of all parties. Respecting the inherent hierarchy in the relationship it should accept the responsibility to use power in a thoughtful manner. The dynamics of the supervisory relationship can create a parallel process in all other relationships including that of client/worker.
Ultimately supervision should be the vehicle to create dynamic growth, establish high professional standards, and enhance quality and culturally competent services. (Delano and Shah, 2007, p.7)

Supervision IS Support, Education, Quality Monitoring

In creating our definition we chose to establish our belief of the primacy of relationship in supervision in the first five words. Yet, supervision becomes quite complicated in that while it should embody many of the positive qualities of all relationships, it should remain "professional" in its' context and actions. The ability for a supervisor to establish a positive professional relationship is dependent on the ability to be self reflective and to establish appropriate boundaries in the relationship. This is particularly difficult for supervisors in therapeutic settings since supervision relationships often have therapeutic qualities and expectations woven through them. For example, one of the "games" supervisees often play in supervision is *protect me, treat me, don't supervise me* (Kadushin, 1968). All of the games have health until a certain point, but in this game the supervisee attempts to be excused from responsibility for their actions by engaging the supervisor to focus on helping them with their personal issues as opposed to fulfilling the primary role of holding up the standards for quality work. This is a particularly difficult boundary for new supervisors in that they have probably been very confident in their therapeutic intervention skills but are yet to be confident in their supervisory role and skills, so they are more prone to falling prey to some of the games that chip away at the professional nature of the relationship. Alwon (2000) points out that supervisors that are promoted from within must also tune into the potential traps that exist in keeping the professional nature of the relationship as they are now supervising former peers and possibly even friends. The professionally packaged supervisor will pay strong attention to being consistently self aware of keeping appropriate boundaries with supervisees and working to establish their professional image as a supervisor.

It is crucial for the supervisor to provide support for the worker in a variety of ways. The most concrete form of support would be for the supervisor to provide

"hands on help" to the worker in difficult situations. This type of help can be extremely supportive, but to keep supervision professionally packaged the supervisor must monitor this to be sure that the hands on support is not preventing the worker from being empowered to do the work competently themselves, and does not compromise the role clarity in the relationship. One example of this would be a supervisor in a residential program who would often help staff pack up the clothes of a client who went AWOL from the program. It is often not a pleasant task and the supervisor felt that rolling their sleeves up to do the work together would create a feeling of support. This worked well until on one occasion the supervisor's staff interrupted an important meeting she was in with the Executive Director to see if "she was ready to pack the clothes." Obviously the attempt to be supportive had crossed the boundaries of clarity of roles and those roles would need to be re-clarified. Another example of support would be for the supervisor to provide, or advocate for, appropriate resources for staff to do the work effectively. An area of support that is extremely sensitive for a supervisor is being able to "back the decisions" of staff. The supervisor has to allow for staff to have the latitude to occasionally make a decision that might not be the most preferred one and still feel supported while drawing a clear line on what kinds of decisions will not be supported. For instance, a supervisor should be clear that they will not be supportive of decisions that are not ethical in nature, knowingly harmful in some way,

reflect significantly poor practice standards, or go against the best interest of the child. While a supervisor should want to be supportive of a decision a worker makes with a child, it should not be at the expense of fairness to the child, quality of service, or something that may be going against the grain of the treatment plan. A supervisor should show strong support for the worker by being clear and stating which decisions will not be supported. On the other hand there should also be clarity on areas where a supervisee can make an independent decision that may be different than what the supervisor would have preferred and still be supported.

Education is one of the primary responsibilities of a supervisor. The supervisor should provide a number of options for the worker to learn the concepts and skills necessary to do their jobs in a competent manner. This can talk place in formal trainings done by the supervisor or in providing training opportunities for the supervisee inside or outside of the agency. The supervisor should be aware of emerging trends in the field and provide access to articles or books that would help the worker keep pace. Much education can also come from the supervisor role modeling techniques and interventions and allowing the supervisee the ability to ask questions about their practice. Perhaps the most important piece of the educational responsibility of the supervisor is to create a climate for learning in as many ways as possible. This would include providing the structural opportunities discussed above but also developing a philosophy that mistakes are primarily a way to learn and

improve practice as opposed to a reason to look for blame. In his book "Good to Great" Collins (2001) points out the importance of a leader learning to "conduct autopsies without blame" as way to create a learning culture in an organization. The focus on developing this culture of learning clearly parallels what a supervisor would hope to teach a worker about helping children see mistakes as a natural part of growth and learning and will also help to create a safe forum for the supervisee to be willing to share their practice in supervision.

Fulfilling a basic role of supervision to monitor quality the supervisor can use many different strategies to make assessments in this area. One concrete method is for the supervisor to do a certain amount of supervision using "management by walking around." This allows the supervisor to directly observe the supervisee in practice and opens many opportunities to discuss their practice with the supervisee. Of course, the amount of management by

walking around has to be balanced with the reality of when the supervisor is present the worker may be presenting one way that may be different than when they are not being observed. Attention should also be given to the question of whether having a supervisor present so often will stifle the creativity and independence of the worker and if it will feel like the often objectionable "constrictive style" of supervision (Rosenblatt and Meyer, 1975) or micromanagement. Another key in being able to monitor quality is to clearly establish what "quality" is for your program. This can be done through establishing clear and measurable goals, setting and communicating what are considered to be standards of excellence, and communicating desirable outcomes in management and client practice. The ability to accurately monitor quality is directly tied to the overall level of professionally packaged supervision. Creating safe forums for supervisees to share their practice, doing regular and collaborative staff evaluations,

and establishing high standards across the program culture will all enhance this process and ultimately lead to the bottom line of quality client service.

In composing this definition we have consistently been impressed with how much all the areas of professionally packaged supervision we suggest seem to come together and intertwine. The ability of a supervisor to create a safe forum to reflect on professional practice will significantly enhance the ability for so many of the desired qualities of supervision to emerge more clearly. We often stress that with the privilege of professional judgment comes a responsibility for reflective practice. We feel strongly that this responsibility goes to the very heart of ethical and quality practice in the helping professions. A worker can always take personal responsibility to be reflective on what they are doing, but doing so in supervision itself with the opportunity for support, challenging, and learning becomes crucial to enhance growth and maintain high quality service. A supervisor should make concerted efforts to establish and maintain that safe forum.

A supervisor should contract clearly that while they can never guarantee blanket confidentiality for things a supervisee may share they will make every effort to respect confidentiality of discussions. A basic guideline for what the supervisor may feel a need to share elsewhere might parallel the process Hoghughi (1988) sets forth in the "need to know" concept. Regular supervision sessions with mutually shared agendas that are valued will set a solid base for this to take place. The su-

pervisor can enhance the safe forum of supervision sessions by a commitment to hold sessions regularly, minimizing interruptions and using the opportunity to encourage the supervisee to share their practice by asking critical thinking questions and exhibiting excellent active listening skills. The willingness of the supervisee to openly share their practice should be a clear expectation of professional growth and competence and should be a focal point of the supervisee's performance evaluation. This can only happen successfully if the supervisor has been able to support the safety of the forum by establishing the culture of learning described above.

Confrontation and Critical Thinking

Few could argue that constructive confrontation and critical thinking are necessary components in a supervisor being able to effectively do their job. However, many supervisors are reluctant to confront in their efforts to be a competent manager and maintain status quos. They "allow" confrontation and critical thinking but don't push it to the next level. We feel strongly enough about the importance of confrontation to clearly add in the word encourage in our definition of the supervisor's role in confrontation and critical thinking to emphasize the crucial role these two processes play in professionally packaging your supervisory practice. Many times supervisors avoid confrontation because they want to be seen as "nice," they are not confident in their competence at confronting effectively, they have already waited too long to confront (and have

thus already validated the behavior), or they are concerned the reaction of the worker to being confronted will create a backlash that will make the situation worse. With these concerns about confronting many supervisors overcompensate when they actually do confront and the interaction comes across in an authoritarian way and ends up being perceived as displeasure with the worker, and not the desired effort to improve a professional practice. We feel much of this struggle comes from the fact that most definitions and impressions of "confrontation" have negative or aggressive connotations. As a result we developed a working definition of confrontation that will reframe the concept to better fit the growth potential confrontation brings. We define confrontation as:

- A pro-active intervention to intercept and redirect behavior that may require change and
- To create a forum to better understand and guide the judgment/practice of both parties in order to ultimately improve quality and culturally competent services. (Delano and Shah, 2007, p.6)

Using this definition as a guideline the supervisor can contract to encourage confrontation in the relationship by stressing the reason for confrontation is primarily to create a forum to better understand the worker's practice and vice versa. Crucial in the definition is the idea that the supervisor enters the confrontation with an open mind that perhaps the behavior they are confronting does not need to change, but is simply one the supervisor does not fully understand. The supervisor may agree the behavior they want to understand better may actually be more effective than what their impression of it was and it may serve to help them improve his/her own practice. It is important that the supervisor does not confront what they perceive to be a deficit in the worker or the worker's personality, but to frame the confrontation in what we call a "professional package" (Delano and Shah, 2007). This requires that the confrontation target a commonly accepted professional standard possibly not being met as opposed to the worker not performing well. For example, if a worker is late to work in their role of supervising children the confrontation should not focus on the worker's work ethic but on the commonly accepted standards of being at work when scheduled and maintaining a safe level of supervision for children. The entry in to the confrontation should be focused on creating the professional forum to discuss practice and we strongly recommend most confrontations begin with the opening of "help me understand" or "what was your intent?" It is crucial the supervisor deliver the opening genuinely wanting to understand and with appropriate tone. This kind of confrontation model also is an excellent role model for the direct service worker in how they should be confronting children in their care. Our confrontation definition highlights the mutual learning expectations from confrontation and will hopefully allow the supervisor to encourage the supervisee to see it as a regular and nor-

mal part of their relationship that should be able to flow in both directions with the supervisee being comfortable confronting the supervisor with the same "help me understand" approach.

Gilberg and Charles (2002) have noted that supervisors give answers but great supervisors ask questions. By creating a culture that encourages the worker to think critically and outside of the box the supervisor establishes an excellent base for growth for the supervisee, and a constant process of reflecting on current practices. Again, we feel strongly it is not enough for a supervisor to allow critical thinking but to actively encourage and make it a clear desired quality in the program. One way to do this is to create a diverse team (age, gender, experience, ethnicity, etc.) with a strong emphasis on looking at the impact of cultural differences on interventions and practice. We believe that the nature of diversity can (and should) bring some conflict and trouble in a program. The professionally packaged supervisor will welcome the challenges diversity brings and accept the responsibility to work through the difficulties to capitalize on the richness that develops when the different cultural perspectives are blended together. Other ways to encourage critical thinking in a program include having portions of team meetings set aside for just brainstorming, setting up suggestion boxes, and honoring the quality improvement process that looks at critical incidents with the primary eye of "what have we learned?" and not "who should we blame?." One of the keys to professionally packaged supervision is

for the supervisor to pay careful attention to the message they are sending in their program around how mistakes are handled and how new ideas are received.

The Ethical Responsibility to use Power Thoughtfully

The ability of the supervisor to come in touch with the concept and reality of power woven throughout the supervisory relationship is crucial on the road to professionally packaging their supervisory practice. Both Hawthorne (1975) and Kadushin (1968) highlight how abdication of power, fear of power, and misuse of power will trigger so many of the unhealthy "games" played on both sides of the supervisory relationship. There is much structural power in the supervisory relationship that clearly favors the supervisor (Delano and Shah 2006). This would include the clear hierarchical "assigned authority" that exists in the relationship. Simply put the supervisor can always "pull rank." Other structural power might include key roles in hiring, promotions, salary increases, and even termination of the supervisee's employment. The supervisor's structural power also includes a potential significant impact on the lifestyle of the supervisee. This would be particularly important to consider in the child and youth care field as it often entails shift scheduling and overtime portioning. These more concrete examples of a supervisor's power are significant but most often a supervisor can be in touch with these examples of power and in most agencies there are a number of checks and balances to monitor how it is used. In

composing our definition we chose to add the word "ethical" in connection with the supervisor using their power in a thoughtful manner. This was partially connected to encouraging wise use of the structural power but mostly to highlight what we feel is a much more potentially damaging, or potentially empowering, use of power by the supervisor. There are a number of areas of power a supervisor has in this relationship that are much more subtle and have far fewer checks and balances, other than a supervisor's commitment to strong ethical standards for their practice. One example of this would be the power of the supervisor to control "access" in the relationship. This includes access to the supervisor for support, access to information, and access to others in the agency and the field. In connection to keeping the relationship in a strong professional zone the supervisor must be in touch with the power they have in the expectation of the supervisee to reveal more about themselves personally in the relationship. This might include a worker feeling they must reveal a personally sensitive reason to convince a supervisor for a day off or vacation, revealing medical information explaining why they are out ill, or discussing their counter-transference in practice. Perhaps the most compelling examples of the supervisor's power is the ability to significantly impact the self esteem of the worker and the ability to create an "image" of the supervisee in so many different forums. It is in these more subtle areas that a supervisor must be exceptionally thoughtful in regards to the ethical use of their power because of the lack of for-

mal checks on their responsibility and the exceptional impact it will have on the overall trust and integrity in the supervisory relationship. We have developed a working definition of power:

> *Power is a sometimes structured, often subtle dynamic that has significant effect on any relationship. Power used to "control," or used in a vengeful way, can be destructive, intimidating and have disastrous effects on a relationship—causing harm to all. Power used thoughtfully, respectfully, and wisely by critical thinkers can create the path for dynamic growth for all involved.* (Delano and Shah, 2006, p.37.)

By including the ethical standard to thoughtful use of power in our definition we are highlighting the crucial task for a supervisor to accept and respect the hierarchically reality that is inherent in the relationship by maintaining their responsibility to monitor quality, while thoughtfully looking for ways to balance the power in the relationship by empowering their supervisee to grow and improve their practice. In our previous article on power in the supervisory relationship (Delano and Shah, 2006) we laid out a model to pro-actively balance the power and have modified it below:

- The task should match the skills. This entails a strengths-based look at a supervisee with attention to not putting them in a situation where they will look bad or predictably fail. It is impor-

tant for the supervisor to keep a strengths-based focus while supportively challenging the supervisee to broaden their repertoire of strengths and skills (Gilberg and Charles, 2001).

- Contract the relationship. Supervision should entail an on-going series of contracts that establish and clarify roles and needs of the parties.
- Develop a "learning diagnosis" of each of your supervisees. Part of the contract in the relationship should be to assess with the supervisee how they learn best.
- Do the right thing, not always the best thing. A supervisor must always be aware of the political dynamics in a situation but should also balance power in the relationship by having a strong focus on acting with a high ethical priority. A manager does things right. A leader does the right thing.
- Care about the supervisee as an "individual." There is a need to maintain the relationship on a professional level, but the supervisor should always be aware of the importance of supervision being a relationship between two people. Gabarro and Kotter (1980) describe supervision as a relationship between two fallible human beings with mutual dependence. A supervisor should determine and appreciate how the supervisee is valuable to them in the mutual relationship.
- Use shared agendas in supervision. Agendas are essential to structure the supervisory session. We recommend the format of a *1/3, 1/3, 1/3* agenda.

For example, in a one hour supervision session, the supervisor would be responsible to devise 20 minutes of the agenda and the supervisee 20 minutes. Acknowledging every session will not be perfectly balanced in terms of needs, the supervisor will maintain responsibility for how to use the last 20 minutes with input from the supervisee.

- The supervisor should delegate outcome, not process, when they assess the supervisee has the basic ability to complete the task. Micro-managing is not a good use of power. By allowing for creativity in the process of completing a task the supervisor allows for growth and new ideas into the program
- The supervisor should encourage critical thinking. It is essential that supervisors encourage supervisees to think on their own. This will help the supervisee in their own career development by creating comfort for thinking "outside the box" and the feeling of empowerment that brings.
- The supervisor should practice and encourage constructive confrontation. The supervisor should also teach the supervisee constructive confrontation skills and encourage the supervisee to use those skills in confronting them when appropriate.

Parallel Processes

The supervisory relationship is only one of many relationships in an organization. One only needs to think back to the impact of having a particularly good super-

visory relationship and compare it to the impact of having a particularly negative one to get a sense of how the dynamics in the supervisory relationship can create impact in all other relationships in their lives. In child and youth care settings this concept is exceptionally important as the worker is so involved in developing and using relationships with the children as a primary way to deliver quality service. Garfat (2001) suggests that supervisory interactions should be an opportunity to learn about the doing of their work through experiencing a similar process in the relationship with their supervisor. In a parallel process the supervisee is able to feel what a child may be experiencing in their relationship through what they are feeling in the relationship with their supervisor. It is extremely important for a supervisor to alert the supervisee to this dynamic and to encourage discussion about their experiences in supervision as a way to help them be reflective on their client relationships. Of course the parallel process can go in the other direction where the supervisee may mirror their supervisor's behaviors in their relationships with clients and families. Maier (1987) has said "caregivers are enriched or limited as agents of care according to the care they receive" (p. 120). This clearly suggests the argument that the quality of care and service given to clients is a direct connection to the quality of care given in supervision. Phelan (1990) describes three distinct developmental stages of a child and youth care worker that a supervisor needs to consider in designing their supervisory approach and interventions. Garfat (2001)

points out supervisory interventions are most effective if chosen according to the workers ability. These developmental approaches to how a supervisor intervenes with a worker clearly parallel the approach a child and youth care worker should be using in interventions with children and also allow for a professionally packaged supervisor to role model the approaches so the worker actually experiences what they should be delivering to children in their practice.

While the most obvious impact of parallel processes that develop from the supervisory relationship will be seen in worker/client relationships we suggest that the same dynamic is taking place in relationships throughout the agency at various organizational levels. We support this theory in the importance we place on a supervisor needing to be willing to own the responsibility to balance the power in their relationship with their own supervisor (Delano and Shah, 2006). This willingness to work to empower oneself in the relationship is another example of how a supervisor can role model empowerment for their supervisee and also enhance their own ability to perform their role more effectively. It is simply logical that a supervisor who is feeling empowered in their relationship with their own supervisor, will likely be more able to share the power with their supervisee. Simply put, it is much easier to deliver quality care and supervision when you are receiving quality supervision yourself.

Supervision as the Vehicle to Competent Services

We wish to highlight our belief that dynamic growth, established high standards, and quality and more culturally competent services will be a natural outcome of a supervisor investing in building their professional package by engaging and performing competently in the areas outlined in the previous sentences. By creating a safe forum to reflect on professional practice the supervisor will allow the worker to blossom in many ways and grow in the range of self reflection and understanding of his/her practice. That safe forum will also encourage critical thinking, constructive confrontation and facilitate the desired learning tone in the program. By using power thoughtfully to empower the worker (i.e delegation, etc.) the supervisor can create more avenues for dynamic growth. Education and support will inherently allow the worker to learn more about their role and themselves. Consistent use of constructive confrontation as we define it will help the worker and supervisor to see that they can learn even through disagreements and that learning can be a mutual process in the relationship. More culturally competent services will emanate from critical thinking, constructive confrontation, thoughtful use of power, education and a safe forum to talk about culturally relevant or culturally sensitive issues. High standards for supervision require that:

1. Supervision is a professional relationship that provides support, education, monitoring of quality and creates a safe forum to reflect on professional practice.

2. Supervision encourage constructive confrontation and critical thinking that informs and improves the practice of all parties.
3. Respecting the inherent hierarchy in the relationship, supervision accept the ethical responsibility to use power in a thoughtful manner.
4. The dynamics of the supervisory relationship create a parallel process in all other relationships including that of the client/worker.

These key ideas can serve as a convenient guide for the supervisor to work with. Of course, this definition of supervision is meant to capture and reflect a picture of what supervisors need to do to help them successfully reach the bottom line of the overall purpose of supervision; to enhance quality service to clients.

In developing this definition we hope the reader will be able to use it as a daily guideline and barometer for their supervisory practice. We suggest that the supervisor share the definition with those they supervise and have consistent and open discussions about the level of the relationship in the areas outlined in the definition. This is meant to be a working document that encourages continual reflection on the process of professional supervisory practice and high quality service delivery to children and families.

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The major-general

Brian Gannon

The major-general sniffed and twitched his bristly moustache. Looking a bit redder in the face than usual, he declared: "Well I say that what these juveniles need more than anything else is to learn respect!"

The rest of us looked at each other looked at each other rather despairingly. Here was the same old George, whom we called "the major-general" because he always seemed to adopt such a hard-bitten, almost military, approach to the work. We rarely felt that we shared much with him in our monthly meetings, but he nevertheless came along month by month regularly as clockwork.

There was nothing like an association for child and youth care workers in our town, and we had built up this small informal group of people who worked in the various children's pro-

grams. There were three or four children's homes, a "teen center", a shelter, the largish boys' village to which "difficult" adolescents tended to be sent (the major-general's place), and other odd foster care cottages and such like. I suppose the best that could be said of us is that we *commiserated* with each other each month, talking about the stresses and strains of group care and work with kids over a cup of tea. (I know that sounds a little negative.)

One good thing we did was to go round the group asking what were the current tasks and challenges in our various programs and how we were meeting them. We often learned helpful ideas from these "real life" situations — or perhaps we learned "what *not* to do"! This month we had done some very useful talking around "transitions". Year-end was approaching, and we all had

"comings and goings" to deal with. New children were coming in, others were leaving programs, and there was the usual crop of kids moving out of the system to start work or after-school studies. As we shared ideas, the gloomy theme of "too little, too late" constantly raised its head. "If only we had started with all that *last* year," someone wailed. "rather *three* years ago!" another added.

"From Day One!" declared the major-general. We turned towards him (confirming his military seniority!)

"Remember what I was saying about learning respect?" he asked. We groaned inwardly. It seemed that we were in for another of his sermons on discipline. We nodded, more (strangely enough) out of respect than with encouragement!

He continued — and I must confess that for ten minutes he held us spellbound.

"Talking of starting sooner rather than later on important tasks, we had a similar discussion on this subject in our place a few years back. We realised that our youngsters often had a rather greater 'kiss and make up' task with society, so we had more teaching to do. It seemed to us that the greater part of this socialisation process was learning respect."

"But the 'curriculum' for teaching respect," he went on, "is experiential rather than just learning *about* respect. It begins with youngsters *being* respected and *feeling* respected. But how could we achieve this with our somewhat ordered and formal program and larger numbers? We needed, somehow, to convey respect towards individuals within our structures

and routines."

We glanced at each other. This was a quality of thought we didn't expect from the major-general. He went on.

"We had heard stories of successful places, and we tried to adapt some of their ideas. One idea, for example: our dorm block was a fairly large and institutional building, so we looked for some positives. So, firstly, when a new kid arrives, we explain: 'Our dorm has a long central passageway with rooms facing westwards into the campus so that on that side you can see the comings and goings, the recreation spaces like gym and pool, staff offices so you can see who's in and who's out; and then on the other side it has rooms facing eastwards so you can see the countryside, the mountains and the sunrise. *Which would you prefer?*' We give them that choice when they come — and you'll be surprised how many choose eastwards and how many choose westwards! And how they value the courtesy of being asked."

"Then we tell them that the kitchen sends early-morning urns of coffee and tea up to the landings every day. *'Which would you prefer, tea or coffee?'* And we take their choices seriously. These things are no problem to our staff. We have the rooms, we make the tea and coffee anyway. It's just done in a way which conveys respect."

"We have lots of seemingly unimportant 'traditions' like that. And others. For example, the welcoming staff member who asks them about these choices goes on: 'For the coming weeks I will personally be your key worker. If you need

anything, if you need to ask anything, or have any problem, feel free to come and see me. Then, when you have come to know who's who on the staff of the place, you may ask that any adult you feel comfortable with is made your key worker. I won't mind. The staff won't mind. Of course you can't chop and change all the time, but we all understand that it's good to have someone around whom you know and trust …"
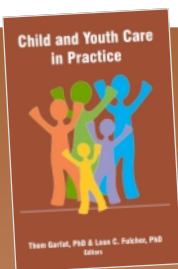
I don't mind admitting that, in spite of all that we had thought of the major-general, every one of us at that meeting was secretly examining in our minds our own routines and our *modi operandi* for their "fit" with this thinking. He was quick to add that in no way was all this was meant to be over-indulgent. The boys were still fully accountable for their normal developmental tasks like study, games, environment, etc., and staff were fully aware of when teaching and encouragement were necessary before mere compliance could be expected.

From that day on I held a different view of the major-general and his "put your money where your mouth is" philosophy. So did several of us. We were left with

practical examples of how our own philosophies (often existing in theory more than in practice, and often somewhere in our heads more than in our day-to-day actions) could be applied transparently and honestly in things like routines!

"Things aren't what they used to be! When I was at the Daisy Hill Puppy Farm ..."

Postcard from
Leon Fulcher

**Cathedral Cove, Coromandel
NEW ZEALAND**

Kia ora everyone! The end of the Summer holidays found us on the Coromandel Peninsula, one of New Zealand's 'must see' places very close to Auckland. The walk to Cathedral Cove from the Hahei car park is recommended! (http://www.hahei.co.nz/)

Cathedral Cove – Coromandel Peninsula NZ

One walks through a limestone archway and Cathedral Rock looms into view. It was immediately apparent why people – young and old – come to this place from all around the world to spend a few days on the beach. Add it to your Bucket List!

The Cathedral at the Cove – Coromandel Peninsula NZ

Every couple of hours, a boat pulling an inflatable banana deposited youths after a short sea journey from the village. As young people do, these made themselves known. I chuckled about the seeming ease with which young people band together and display features of 'gang' behaviour. Peers are such a huge influence in youth!

Cathedral Cove Youths Making Themselves Known

The Coromandel Gang – Luke, Caitlin and Jacob

Our Coromandel visit offered opportunity to spend a holiday fortnight with our children and grandchildren – all in the same part of the world. We played at the beach with all four grandchildren – cousins aged 1, 3 and 5 – making sand castles and sitting pools or jumping over waves. It observed with amusement how after being together nearly two weeks, the 3 pre-school cousins had 'banded together' into their own special 'gang'. At times they defied instructions from all adults – their mothers, their aunty, father, uncle, granny and papa! As child and youth care workers, I wonder whether we notice and attend to 'ganging up' behaviours amongst the children or young people with whom we work? Do we use daily life events therapeutically as we engage them?

Alas, search and rescue also featured during this Coromandel holiday. A family visitor from Edinburgh set off on a bicycle ride in the Tairua Forest near where we were staying. An experienced cyclist in

Scotland, he set off mid-morning entering the forest at 11 am, taking with him an old mobile phone, water, fruit and biscuits, but not his compass. At 2 pm, I received a text giving location overlooking our beach, saying he was starting back. At 4:30 pm, we texted for an update. The reply said he was lost in Tairua Forest on unsealed roads without road signs, and was back-tracking.

I texted saying I was setting off to collect him and his bicycle at the Ohui Rd entrance off the highway. At 5:30 pm – just under 3 hrs before sunset – I texted again saying I would shortly need to alert Search and Rescue to ensure he was found before nightfall. At 6 pm he texted saying he had found the correct forest road and knew where he was. Just before

The Search and Rescue Party started at Entry Point

7:30 pm as I was preparing to contact Search and Rescue, I the last text came in saying "*on Ohui Rd following signs to eco-lodge*".

An aging Nokia mobile phone required cooling for the screen to operate!

Cousin Dougal had managed to cycle from one end of Ohui Rd to the other end of Tairua Forest, nearly an hour's drive away by road from where he had started! He was safe, if exhausted and shaken by the experience. The screen on his aged Nokia mobile required cooling in order to operate! To send me texts, he had dampened the screen with water and then blown across the screen to cool it down enough to send and receive text messages. Without a compass and in cloudy conditions, he was lost.

A Scotsman Rescued by another Scot after 8 hours cycling in Tairua Forest!

During those 'meaningful moments in my life as an anxious rescuer' I wondered how often in child and youth care we actually 'practise' our health and safety procedures? Written policies and procedures are required but how often do we rehearse these?

miscellany

… end notes

When we look downward and inward we close our world and others others out and make ourselves alone and vulnerable …

When we look forward we see reality and others and possibilities and place ourselves ready to re-engage with our world.

When we look up we recognise our people and supports, we remember that we have come this far, and so can continue …

All his life he tried to be a good person. Many times, however, he failed. For after all, he was only human. He wasn't a dog.

— Charles M Schulz

———

"The truth is rarely pure and never simple."

— Oscar Wilde

———

"I refuse to answer that question on the grounds that I don't know the answer"

— Douglas Adams

———

"When you're in jail, a good friend will be trying to bail you out. A best friend will be in the cell next to you saying, 'Damn, that was fun'."

— Groucho Marx

———

"There are two basic motivating forces: fear and love. When we are afraid, we pull back from life. When we are in love, we open to all that life has to offer with passion, excitement, and acceptance. We need to learn to love ourselves first, in all our glory and our imperfections. If we cannot love ourselves, we cannot fully open to our ability to love others or our potential to create. Evolution and all hopes for a better world rest in the fearlessness and open-hearted vision of people who embrace life."

— John Lennon

When you have exhausted
all possibilities, remember this:
You haven't.
— Thomas Edison

————

What other people think of you
is none of your business.

————

Somewhere, something incredible
is waiting to be known.
— Carl Sagan

Use your smile to change the
world
Don't let the world change your
smile.

————

Tell the negative committee
That sits inside your head
To sit down and shut up

————

"My father used to
play with my brother
and me in the yard.
Mother would come
out and say, "You're
tearing up the grass";
"We're not raising
grass," Dad would
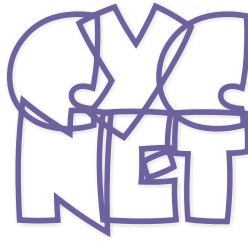reply. "We're raising
boys."
— H. Killebrew

————

OMG! I just got born!!

"The third-rate mind is only happy when
it is thinking with the majority. The sec-
ond-rate mind is only happy when it is
thinking with the minority. The first-rate
mind is only happy when it is thinking."
— A.A. Milne

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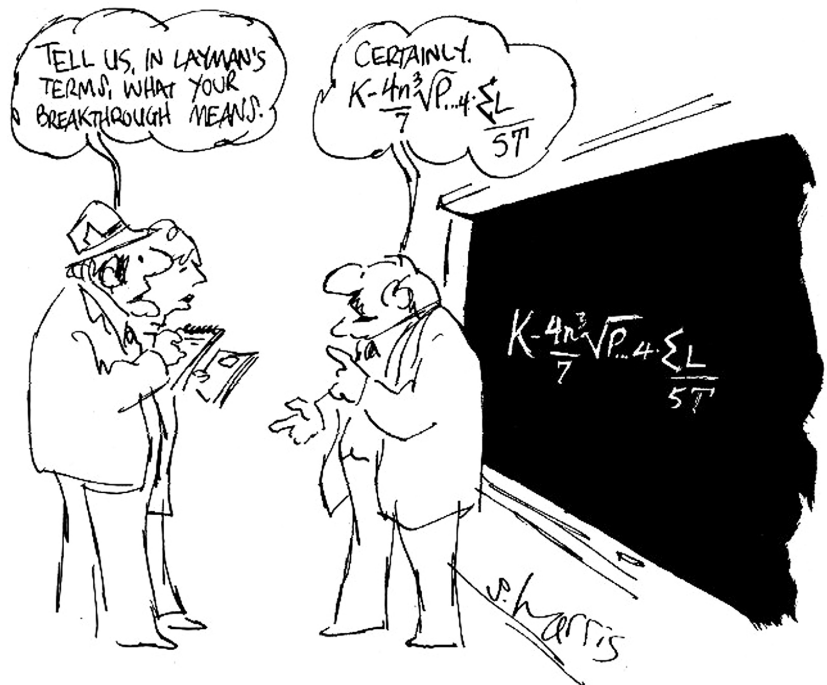
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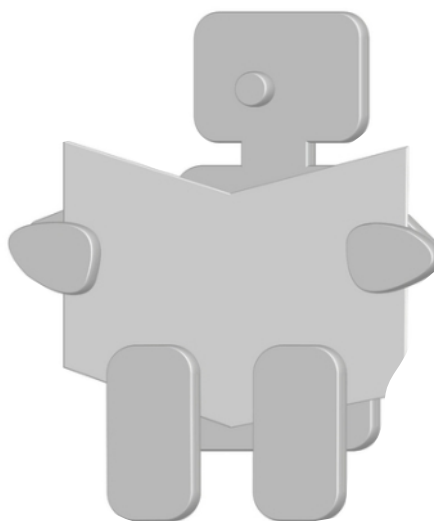
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