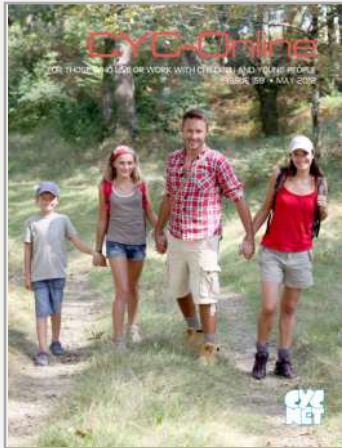


CYC-Online

FOR THOSE WHO LIVE OR WORK WITH CHILDREN AND YOUNG PEOPLE
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Seeing it differently

Every day, at least a couple of times, I walk down the same half-kilometre road – when I go for a walk with the dog, we must make this walk before we get to the corner where we choose a direction. It is an everyday thing to which I am habituated.

Today, for some reason, as we started the walk, I thought about how ‘habituated’ I am to the passing images – I looked around and said to myself ‘boring really, how I always see the same thing – so often each day’. And then for some reason I decided to try and ‘see it’ differently. So I intentionally decided to look for things I have not been seeing, or to see different aspects of the same things, or to see the same things with different eyes.

Well, it was quite an adventure, really. Here are some things I noticed today, that I did not notice yesterday:

- When the sun shines through the trees and hits the water in the swamp, it bounces back up and illuminates the underside of the branches, casting extra swaths of brightness in the dark contrast of the swamp.
- In the middle of the neighbours’ cedar hedge, there is a rose bush struggling to grow – it is small and stunted, but pushing its way into the world, none-the-less.

- There are some strange things floating in the withdrawing water of the swamp – which is a part of the river which surrounds this island – like an old tire complete with rim, broken pieces of a float for attaching a boat to a dock, a discarded travellers coffee mug with the lid still attached, a stack of plastic plant pots – weird, but true.
- The daffodils are early, and are of different shapes, sizes and colours – yellow comes in many shades it seems. A daffodil is not just a daffodil.
- Crab Apple trees leaf really early – this year especially.
- The dog points to everything new that I do not see – smells, movements, sounds – he is more sensitive to the world around him than I am. I try to follow his lead, but I cannot sense what he does.

Well, the end result was that this was a different walk, along the same route, than I have walked in the past few months.

We get habituated, don’t we? To the sights, sounds, characteristics of everything with which we become familiar.

And so – yes, here we go about how we get habituated to the kids and families with whom we work. After a while we ‘see’ the same things, stop looking for what is different than our normal percep-

tion, and, in the end, miss a lot, I think. Kids and families are not always only what we see every day.

Like Jenny. She is aggressive, defensive, angry, resistant. But maybe we miss the rose in the bush – that little part inside struggling to grow in less-than-ideal conditions? Or we miss the way her spirit reflects on others, or how she is also a gem in the mud. Habituation is a normal process – and perhaps it is a sadly discounting one.

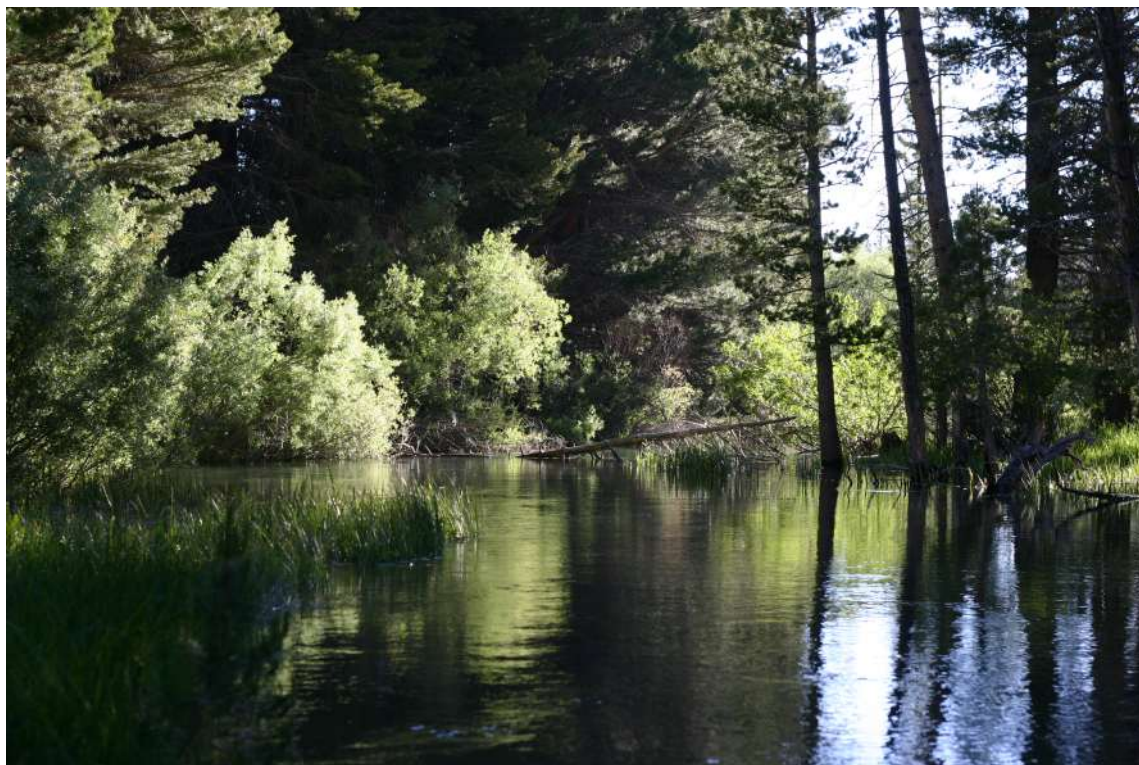
When we fail to stop and say ‘let’s look again’ – maybe we are missing something important.

So, do them a favour – go look at those kids and families you are working with, with refreshed and available eyes.

And when you are finished doing that, because it is International CYC Week this month, perhaps you could decide to look at our field with different eyes as well – and see how it has changed, grown, developed, since the last time you stopped to look



Thom
(in the swamp)



The Child Care Worker

We look back 35 years at an historical snapshot of the Child Care Worker in 1977 recorded by one of our most esteemed teachers,

Henry Maier

Child care workers are those persons who provide a major portion of round-the-clock care, supervision, and resources for children or youths in a group-life situation, whether for day care or residential care. They become the extension of the children's parents, by assuming immediate responsibility for nurturing care, socialization, and specific therapeutic requirements. The group situation is a socially engineered alternative to family living in which the child care worker functions as the instrumental leader. Child care workers then are both the children's link with the tasks before them and the world around them and society's guardians of the quality and direction of



the care afforded to the children. Of all the staff working in child welfare settings, child care workers are most directly involved in the children's lives, in the latter's

continuous encounters with the everyday issues of life as well as the variations created by the particular group-care program.

Individual child welfare programs use different terms to designate the child care person — cottage parent or houseparent, group counselor or group-life counselor, mental health worker or residential worker, teaching parent or teacher

counselor. Although each title describes a specific aspect of residential care and child care functions, all can be viewed as varia-

tions of the general role of child care worker.

FUNCTIONS

The functions of child care workers may be described as being equal to but unlike those of parents. Child care workers intervene in all aspects of a child's life, but do not replicate the parental role.

The tasks performed have instrumental and expressive components. Different programs vary in the instrumental tasks expected and the theoretical perspective associated with the expressive component related to the required tasks. For example, "getting children to sit down at mealtimes and eat their meals" is an instrumental task demanded of child care workers in all group care settings, while counseling with a child or the child's family on mealtime behavior might or might not be considered a "proper" child care function.

The delineation of tasks is related to the administration's conception of the child care worker's spheres of functioning. The child care worker can be responsible for group-life spheres *per se* or the individual child's group-life spheres. The expressive components of a child care worker's interactions with the children for making mealtime a mutual time of sharing and personal growth can be handled in various ways, depending on the worker's and the setting's care and treatment orientation. For example, emphasis might be placed on shaping behavioral expectations or on a child's finding satisfaction in the process of eating with others.

Child care functions can also be understood as service tasks that are comprised of direct and indirect aspects, with the instrumental and expressive child care functions inherent in each aspect.

Direct Work with Children

Such work involves carrying out functions that help accomplish both the immediate and long-range objectives of the care that is instrumentally agreed on in a given setting. It takes the form of providing both everyday care and maintenance and individualized care and treatment. Everyday care includes the general child-rearing functions of physical care (provision of feeding, clothing, and rest), habit training (personal and interpersonal hygiene), first aid (health maintenance and restoration), self-management in interpersonal contacts (peer and adult relationships), and the introduction of new stimulations and variations in daily life experiences (planning new social contacts in the world of play, work, and routine). Individualized care includes the special provision of nurturing care, personal counseling, crisis intervention, tutoring, and family counseling, the introduction of specific therapeutic timing, activities, and personal role variations, and the application of behavioral change programs that arise out of an individual child's ongoing needs.

Indirect Work with Children

This describes the carrying out of executive and managerial functions of a child welfare program within an individual child care unit. Such work involves management of the use of space and facilities and

of the daily program of the unit (including provision of food, clothing, rest, routines, and controls as well as enriching daily activities and outside contacts) and leadership in overall planning of the use of group-life time, space, and content and of intra- and intergroup relationships. Also involved is implementation of the program's overall child welfare policies, which includes consultation and planning with other staff within the program and counseling and consulting with persons in the children's lives outside the program (teachers, parents and other pertinent community contracts), as well as writing and receiving reports evaluating the children's progress within and outside the unit's life.

The spread and variety of tasks asked of child care workers, combined with the fact that the children served have continuous, intense, and taxing individual demands, create extraordinary pressures on the workers. It is not surprising that the job turnover is high.

THE WORKER'S PSYCHOLOGICAL POSITION

Child care workers function at the hub of the institutional wheel: they are the persons centrally responsible for the provision of care and treatment to the child away from family care. It is the child care worker who is with the child and who sees to it that the child's daily living requirements are fulfilled. Through the regular exercise of their caring functions and the control of resources available to the children, child care workers are the most powerful agents in the children's lives. Conversely, the children's everyday

experiences of receiving the workers' personal attention as well as food and other necessities of life make the child care workers the central persons within their immediate daily lives (Portnoy, Biller & Davids, 1972).

The group care units constitute the basic service and organizational segments of a child welfare program. Thus the child care worker also has a key position in being able to modify the impact (both positive and negative) of other potentially important persons on the children's lives within and beyond the service program (the social workers, teachers, psychiatrist, and director of the program, as well as community people).

THE WORKER'S ORGANIZATIONAL POSITION

Despite the important part child care workers play in the group-care units, they are apt to be among the lower-status persons — organizationally, economically, educationally, and socially — within their programs. They tend to be relegated to the lower echelon in decision-making. More often than not, they are bypassed in becoming full participants in staff or case conferences, in allocation of equipment and working (including office) space, and in representation to the outside world. They do not have power and status within the overall organization compatible to that they hold in the group care situation itself. Thus, the child care worker is apt to adapt to the immediate demands and values of the care unit rather than to the overall objectives and therapeutic directions of the total agency program (Polsky & Cluster, 1968).

THE WORKER'S PROFESSIONAL POSITION

Lacking an established professional reference group, child care workers depend for their vocational or professional image on the place of their employment. Child care work, long established as a profession in most European countries, can be described in the United States as a discipline-in-the-making. This trend is indicated by such developments as training programs and certification of child care work, the publication of a periodical (*Child Care Quarterly*) devoted to child care practice concerns, and the existence of associations of child care workers in two-thirds of the states, as well as the emergence of national organizations for child care workers (the American Association of Workers for Children and Professional Child Care Workers of America).

Whether child care work will become a discipline with professional standing or occupational commitments and whether it will become professionally or occupationally aligned with social work, nursing education, or a discipline of its own is yet not clear. Moreover, child care workers remain divided in their group affiliations; some lean toward membership in professional associations of their own or in the child welfare field, others toward labor or employees' unions, and some remain affiliated only with their place of employment.

TRAINING OF CHILD CARE WORKERS

The trend toward professionalization of child care work has been intertwined with the emergence since the mid-1950s of educationally centered training pro-

grams. Institutions of higher learning in many states now offer courses on child care. These vary from short-term courses to fully accredited curriculums in community, two-year, and four-year colleges and in graduate divisions of universities. Some training programs emphasize the development of competence in workers already in the front lines of practice; others prepare workers, once trained, to enter the field of practice. There is debate over the establishment of degree ladders and the question of whether child care training programs should belong to community colleges or two- or four-year institutions of higher education. Yet, the basic issue for training, as for practice, remains: What constitutes the instrumental and expressive functions of child care? A clearer delineation of these functions will clarify the training requirements and the degree of eventual merger with established training programs for child development associates, day care personnel, social work, and psychosocial nursing (Beker, 1975).

THE HISTORY OF CHILD CARE WORKERS

The ancestors of today's child care workers were the matrons of the orphanages and almshouses of the nineteenth century, who served as overseers of the children's moral training. In the first half of this century the preference in child welfare for foster home care caused institutional programs to designate first housemothers and later house-parents as the desired providers of care. "Family units," cottages or separate living units, replaced congregate living, and "residen-

tial care or treatment” became the preferred terms for around-the-clock group services. Child welfare’s accent upon family living, with institutional care envisaged as a last resort after all other alternative services to family life had been exhausted, made the child care worker a less desirable agent for child rearing. Remnants of this perception still affect appraisal of the child care worker’s role in the present-day scene.

With the shift in role and position, child care workers tended to model themselves after their more powerful professional colleagues in residential care programs — the social workers, psychiatrists, and educators. Child care workers, formerly viewed as surrogate parents, now tended to assume a perceived role as change (treatment) agents. Concerns about practice methods and skills replaced a previous preoccupation with personal attributes. These altered perceptions have facilitated the replacement of sixty hours or more a week of “parenting” by a forty-hour work week, as well as the recognition of the workers as members of a team and treatment agents in their own right.

These changes have raised questions about the kind of working orientation that would be most desirable. Should child care work proceed as a reeducation effort as in the RE-ED approach (Peabody College, Nashville, Tennessee), as a group socialization endeavor in line with the educateur model (Linton, 1971) as a behavior-rehearsal and citizen-training program as demonstrated in the work of Kansas’ Achievement Places, (Phillips, Phillips, Fixsen & Wolf, 1974) or as a resource for basic everyday life experiences

within an intense group-care situation as advocated in developmentally oriented programs (Nicholson, 1975; Trieschman, Whittaker & Brendtro, 1969; VanderVen, 1975)? Experiments with critical review of this wide array of group-care stances and techniques are now in progress.

THE CURRENT SITUATION

Contemporary society’s concern with achievement and interpersonal competence is reflected in the shift in the status of child care workers, who find themselves defined, more and more, as the major treatment agents in group-care programs. They counsel, reinforce behavior, guide group or milieu treatment sessions, manage token economies, engage in therapeutic encounters, the actual skills of living. Increasingly, child care workers are called upon not only to work with the children or youths in care but also to work with parents, the children’s families, and other vital community contacts.

The trend toward group homes, five-day twenty-four-hour care, and day treatment programs — that is, community-oriented group care — has brought the child care worker further into the center of group care. In group homes or day care services, the child care worker is often the only staff person continuously on the scene. The recent emphasis upon behavioral training has redefined the child care worker’s functions and, experience into the area of expertise. It is the child care worker as the expert in child care who is the one to plan and counsel with the children’s peers, teachers, and families. The child care worker has become a partner in the child’s primary world. Par-

ents are no longer compensated for. Instead, the child care worker serves as an extension of the parents and the one to work with parents.

The actual number of persons currently employed in child care is unknown. An early 1970s estimate placed the number at 100,000 workers — 50 percent in child care institutions, 25 percent in programs for the retarded, 15 percent in correctional work, and 10 percent in work with the physically handicapped. In a New York City survey, 43 percent of the workers were under 30, most of them working with preadolescent children. In correctional centers with preadolescent and adolescent youths, 27 percent of the workers were under 30. A representative female child care worker would be in the 36-45 age range, married, and childless, with considerable past babysitting and nursing experience and with a distinct liking for children. A representative profile of the male worker would be a person in the 26-35 age bracket, married, and childless, with some years of college education, previous experience with children probably in community recreation programs, and a stated enjoyment of and ease with children (although he is guarded with adults) (Toigo, 1975). Staff turnover tends to be high in the first-year of employment (40 percent), leveling off to an average of two to three years of continuous service within one program.

A 1975 survey by the Child Welfare League of America, presenting a highly selective sample of child care programs and the only data presently available on a nationwide scale, reports a median salary of \$7,314 for child care workers; this is

equivalent to the pay of case aides and the lowest pay scale of all professional child welfare personnel. Five-sixths of the sample studied lived away from the institutional premises and without maintenance provisions as part of their employment arrangements. Salaries varied by region but had no significant relationships to educational background. Workers with a BA degree achieved a slightly higher range, and in general, persons trained in child care work received lower pay than those with no specific training for the work (Haring, 1975).

THE FUTURE

Contemporary concern with providing care and increasing care services — day care, day program centers, group homes — combined with the potential for realization of national health and care assurance plans, places the activities of child care workers at the center of attention. Child care workers will be under pressure to define further the nature of their work. What is the unit of their work — the child alone or the child and his family? Do they work as an extension of the child's primary-life agents? Moreover, the child welfare field has to find new images for the service and training of child care workers, doing away with the distinction between day and twenty-four-hour care. A single group care worker is in the making.

Used with permission. From Maier, H. (1987) *Developmental Group Care of Children and Youth: Concepts and Practice*. New York: Haworth.

How Kids could Save the World

Gerry Fewster, Ph.D

Having worked with troubled children and their families for the past fifty years I've come to conclusion that all kids are now in serious trouble and there's not much I can do about it. Whatever we choose to believe about the sorry state of our planet, the fact is that our children will inherit a fragmented world of unprecedented fear and uncertainty. If we hang onto the futile belief that our leaders and scientists will come up with the answers, we will only add our delusions and helplessness to their already dubious legacy.

Confused, cantankerous, conceited, or just plain 'cool', most of the kids I meet these days are well aware of our predicament. Whether they chose to seek refuge in our denial, sink into apathy, or tell us to go to hell, they are showing us that something is painfully wrong; and we don't like what they have to say. Rather than listen, we prefer to hold them responsible for our unease. Across North America and Europe youngsters are being tagged and labeled as 'problems' and subjected to the remedial devices of the experts and the pharmaceutical companies. The statistics

are staggering. We are now at the point where even babies and toddlers are being treated for depression, disobedience, anxiety, attachment disorders, hyper-activity and an escalating list of syndromes invented to let us off the hook.

However helpless we might feel about resolving our global woes, I remain convinced that our future will be largely determined by how we raise, educate and relate to our kids. Encouraging, or coercing, them to follow in our footsteps is the worst possible option.

We can no longer pretend that we are the experts on how to live together on this planet – the evidence is clearly to the contrary. Returning to the good old days of homespun family values, religious dogma and unquestioning respect for authority is no more than a futile attempt to bring back the repressive beliefs and practices that created this mess in the first place. By the same token, reaffirming our faith that God or the universe will shape our destiny in mysterious ways just doesn't cut the mustard – at least with the kids I know.

So, if we don't have answers, what can we possibly offer those who will carry the baton on the next leg of the human journey? If we were able to put aside all we learned from our own parents, the experts and those 'how-to' books, perhaps we could take another look at the questions. Do children come into this world as inherently purposeful and compassionate beings or as potential sinners and terrorists who need our rewards, punishments and deprivations to keep them in line? Remember, whatever we believe about them, we also believe about ourselves. Do we see them as future doctors, lawyers and hockey stars, or as creative beings with every right and reason to reject our legacy? Do we really want our children to love us unconditionally and live according to our way of being, or do we want them to take charge of their own lives and, with our guidance, find another way – one that confirms our connection to each other and to our struggling planet?

Of course, my own answers are inherent in the questions, and there are many more to be asked. The bottom line is that unless young hearts and minds are given the opportunity to create new pathways into the future, they will be destined to follow, or desecrate, our highway to oblivion. What they require are not instructors, but caring and empathic companions who will shine the light and walk with them into the unknown. They will need to know that they have the inner resources to move beyond the fears that have kept us frozen for generations. They will need to learn how to join with others in exploring what it really means to be human and connected - in families, classrooms, com-

munities, and on the planet that will no longer tolerate our mindless stupidity.

The problem is that we can't give our children what we ourselves have never had. We can't nurture their natural curiosity until we are prepared to challenge our own rigid beliefs. We can't ask them to believe in their inherent ability to change the world from our place of fear and helplessness. And we can't expect kids to understand how it's possible for human beings to live together in harmony unless we can create this in our relationships with them.

So the ball is squarely in our court, and that's just the way it should be. We are still the adults and they are still the children. Our obligation is to their welfare and not the other way around. Forget the old cliché about children being our future: we are *their* future and they need us as never before. We now have a one-time opportunity to free them from the shackles of our own history, without abdicating ourselves from the responsibilities of being parents and teachers. Children will always need adults who are prepared to set expectations and impose limits when necessary. Without doubt there will be risks involved but if we have the courage to bring our own lives into union with each other and our planet, our kids will discover that same potential within themselves. The alternative is to remain as we are, victims of forces that will always be beyond our control. This isn't about claiming power but about our willingness to change our way of relating to our kids – one child at a time. May the Force be with them.



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At CELCIS – the Centre for excellence for looked after children in Scotland – we’re committed to increasing understanding and sharing knowledge.

Building on the work of the Scottish Institute for Residential Child Care (SIRCC), we’re inspired by our work with practitioners and others to help them provide the best possible care for vulnerable children and young people.

That means sharing best practice and revealing the latest developments, news and views... plus creating research of our own, and providing training and international consultancy. Online learning is coming soon.

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Trust

Penny Parry

The other day I went to a talk on economics and business — all very stuffy I thought, but guess what? This world class economist from Italy outlined the three key factors in small business success — one of which was trust. That's right — he was promoting trust amongst business partners as critical to effective business. I had a rather odd feeling in my gut: this is good insight — trust has been a basic in child and youth care forever; this is late insight — it's about time business woke up! How strange it was to listen to a hard core economist argue that trust — that which begins with risking and, once established, is indicated by a good reputation — is a key factor in building a model of successful small business in the face of the encroaching truism that you must get big and lean and mean to succeed, or in child and youth care, that you must earn trust, or some such thing.

So, I began to think about trust.

First I recalled a young fellow I had known: how this young fellow had stolen the cash box from the residential centre he was at and how there was a big discus-



sion about how he would have to earn back trust. No one could define what he would do to get to this point — just that it would be a long time before he could be trusted. In fact, as I listened I realized that there was no objective criterion he would meet. It was strictly when we felt he was trustworthy. And, no thought was given to whether to express disappointment in how we had trusted and were let down, what had led to this, and what had we done/not done to model trust?

Then, I thought about another incident: when I was on a bus and ran into a young girl who was running away to another town from a group home. I told her to call my friend Hugh and he would come and get her and resolve things with the group home — not that all would be perfect but that he would be there for her. She called

him at midnight and, on the basis of her saying that I said to call, he woke his toddler son and drove to the bus station to get her and indeed did work through the issues over the next while with her. There was never a doubt in my mind that I could not trust my friend. There was never a doubt in his that I would only send such a message if I needed it to be acted on. But there had never been any test for him to pass — no criterion he had had to meet for me to know that I could trust him. There had, however, been much risking between us — both sharing ourselves and our caring through genuine friendship.

So, why were the two situations so different? So, when do I trust? Who do I trust and why?

I have always taken the position that I have no control over whether others trust me but I do have control over taking the risk to make myself open/vulnerable as a human being, and in so doing, setting up the atmosphere in which trust can occur. In my early days, I tried very hard to look trustworthy, be trustworthy, earn trust, etc. But, after all this time, I still feel that all I can do is put myself out there — and model risk taking by being myself.

And after all these years, I must say that it still seems to work: people say that I can be trusted. How does this fit with your experience?

Looking back: This feature is taken from a 1999 issue of *Child & Youth Care*



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The Relevance of Social Pedagogy in Working with Young People in Residential Child Care

Gabriel Eichsteller and Viki Bird

“All children are artists. The problem is how to remain an artist once growing up.”

– Pablo Picasso

The art of being a social pedagogue. In many European countries social pedagogy has historically evolved as a profession and discipline concerned with holistic education and well-being. As such it has roots in youth work, social welfare, early years, formal education, and care settings. Therefore, social pedagogues usually work in a wide range of settings across the lifespan – working in children’s centres, schools, youth clubs, children’s homes, with disadvantaged groups of adults (asylum seekers, adults with disabilities, drug users, homeless people, delinquents, or whole communities), or in older people’s homes and hospices. Whilst the meaning of social pedagogy in practice will differ depending on the setting and context, there are common principles underpinning social pedagogy.

Social pedagogy, it could be argued, is all about being – about being with others and forming relationships, being in the present and focussing on initiating learning processes, being authentic and genuine using one’s own personality, and about being there in a supportive, empowering manner. As such, social pedagogy is an art form: it’s not just a skill to learn but needs to be brought to life through the social pedagogue’s Haltung (her attitude or mindset)¹. In other words, social pedagogy is not so much about what you do, but more about the ‘how’. This perspective of social pedagogy means that it is dynamic, creative, and process-orientated rather than mechanical, procedural, and automated. It demands from social pedagogues to be a whole person, not just a pair of hands.

The art of being a social pedagogue can be illustrated by many practice examples we have come across as part of our work with children’s homes in England, Scotland and Northern Ireland. The narrative of one of Essex County Council’s residential

workers, Viki Bird, aims to provide you with inspiring insights into what it means to be social pedagogical, so that you can explore and reflect on how your practice connects to social pedagogy. In doing so, we hope that you can see the potential which lies in social pedagogy, the learning opportunities it offers us all to become even better and realise our own potential.

Social pedagogy is not about good practice – it is about better practice. Rather than having a good-enough approach, social pedagogy encourages us to be aspirational, to constantly look for ways to improve our work. After all, it lies within our human nature that we can always learn more, further enhance our well-being and develop even stronger relationships. If we as professionals show such aspirations in our practice we're not only becoming better through our own efforts; we also set a positive example to the children and young people we work with, an example that can encourage them to be more aspirational too.

What becomes apparent in Viki's account is the journey which Viki and her team have been on, their eagerness to question, reflect upon and develop their practice and make things even better for the young people in their care. Social pedagogy has given them a framework, which guides them on their journey and helps them identify areas of development. In this process they have mainly built on the resources and potential within their team, and their ability to relate their practice to social pedagogy as well as their persistence to work on some of the more difficult and challenging issues have led to an impressive journey for the team and

the young people in their care. Here is Viki's account, which is based on a presentation she gave at a care leavers' conference at London City Hall².

Social pedagogy in practice – Viki's journey

I've been asked to share with you a brief insight into social pedagogy and the impact it has on our relationships with the young people in residential care. I'll begin with providing you with a short background of our social pedagogy journey, followed by an overview of how social pedagogy has helped us support young people in developing their identity, build positive relationships with them and challenge social stereotypes about young people in care. These three aspects are at the heart of what's important to young people in our homes and explain why the implementation of social pedagogy has become so relevant to our work.

In September 2008 Essex County Council began to implement social pedagogy across its children's homes. This began with the organisation, ThemPra Social Pedagogy, introducing itself at conferences and visits to our homes, followed by 6-day training courses on social pedagogy, 2-day residential courses to develop social pedagogy change agents, team days to develop a social pedagogic culture and follow-up degree level course work. But it doesn't stop there...

I speak as one of many Social Pedagogy Agents and residential workers who have fully engaged with this holistic and solution-based approach to working with young people, and as one who seeks to enthuse and motivate my colleagues and

others across Essex and beyond to recognise the benefits of working with social pedagogy. In my experience social pedagogy enables confidence, backed up by theory and experience to best support young people in our care in their learning and development.

For us in residential child care the framework social pedagogy provides is most importantly seen to complement our already established best practice and not replace it. This is vital to its success, so individual homes and individual practitioners can adapt and evolve its methods using key elements suited to the current culture and the dynamics of a particular environment.

My personal workplace is in a long-term, teenaged, mixed gender, 8-bed residential home, and this is where I am drawing my experience from. And it is my understanding that the crucial factor in social pedagogy is exactly the 'social' aspect.

Developing positive relationships

By concentrating our efforts towards forging authentic relationships with our young people, we can substantially improve their outcomes. We have therefore wholly taken on board the 'Common Third' element³, which promotes the use of actively creating opportunities for shared learning experiences within and outside of the home.

The Common Third is best explained by visualising an equal triangle with the young person at one point, the pedagogue at the next, and the task being the third point. We are encouraged, then, to translate every available opportunity when working with our young people as a

means of building common ground through shared experiences.

This crucial foundation in relationship building has had a massively positive impact in our home, and this has been achieved by providing learning environments where participation becomes almost a natural desire for all involved.

The resulting outcomes of focusing our attention on our relationships sees more and more of our young people having the confidence to develop their personal relationships with family, carers, friends, teachers, health professionals, and others. Equally this gives them a future outreach base, with which they know they can comfortably revisit us and continue to gain support and guidance beyond their time in care.

Changing approaches to risk-taking

To give you an understanding of how far we've come in a short time I ask you to consider how prior to the implementation of social pedagogy we were almost considered to be 'risk-obsessed' and of having a 'cotton wool' approach to care.

For example, our young people were only allowed to go to the beach if an extensive risk assessment was written, then the area was combed for dangerous objects, and subsequently, if all was ticked and approved ... they were only allowed to paddle in the sea up to knee height anyway! A somewhat limited experience as I'm sure you'll agree.

Yet where we were previously restrained by particularly strict risk-assessment factors such as this, we have now successfully moved towards a growing confidence in our own judgement, by

questioning and challenging practice and procedures in order to better socialise and equip our young people in today's society.

Now I personally bounded into my role as a residential worker 3 years ago full of enthusiasm and ideas to generate activities and experiences, which were often considered 'too risky' to undertake.

However, by expanding our knowledge and drawing on social pedagogy concepts such as risk competence⁴ we have found we can shift the expectations, norms and procedures to help us provide worthwhile opportunities which enhance our relationships and the care experience.

Supporting young people's inclusion and identity formation

This progressive shift has seen improved inclusion through reviewing and updating the consideration towards risk whilst allowing for the beneficial factors to be given equal priority. I'm not talking about throwing caution to the wind, but simply enabling a confidence to make a professional judgement towards developing our young people's competencies in identifying and managing risks themselves instead of having to rely on adults to do it for them.

From this we have been introducing various new ideas such as having therapeutic campfires in our grounds, embarking on graffiti projects; young people are taking ownership of their home by being involved in the decoration and maintenance; they are planning their own activities for the holidays; we have themed events, activity-based group gatherings and many, many more simple and effective

tasks that occur on a group or one-to-one basis. Even a basic washing-up chore becomes a valuable learning opportunity where communication is vital to gaining a deeper understanding of the young people we work with, their inner worlds, what they're thinking and who they are.

We recognise then, the value of quality time spent introducing new ways to engage and communicate with our young people by simply making the most of the time spent in their company. These shared experiences are then crucial to building the firm foundations upon which the relationship can then explore the many issues facing our young people.

In terms of identity we are empowering them with the confidence to develop this aspect by individualising their care plans to convey an in-depth understanding of the whole person, their strengths, their achievements and their aspirations and not just how to manage their behaviour.

A good case in point would be one of our long-term school refusers who had low self-esteem, was insecure with her family's unconventional lifestyle and was continually reminding us 'You don't know what it's like to be a kid in care!' (minus the expletives).

Her transition back into full-time education and the plan to return her back to the family home in the very near future has been the result of extensive work around our relationships with her and her family, and from this, building her self-esteem and helping her to feel secure enough with her identity to engage with outside assistance and not remain in the sheltered confines and comfort zone of the care home.

The contributing factor here saw us move away from the expectation we should not engage with young people who refuse school in order that it may seem more exciting to remain at home, but instead using those opportunities as a platform to encourage independence, motivation and self-worth to achieve a positive outcome.

Here it is important to add that carers, social workers, family and the wider community are all stakeholders in a young person's life and we are increasingly inviting opportunities for communication and inclusion in order to enhance their care experience.

We have seen the benefits of inviting all those involved in regular BBQ events, where our young people are fully involved with the preparation and everyone has enjoyed a day of participation in activities and guests have been presented with a showcasing of talent.

This extension of the Common Third doesn't only have a tremendous impact on the self-esteem of our young people but brings about yet another valuable opportunity to forge strong relationships with those involved in looking after them.

Building bridges into the community

Whilst it's fantastic to bring the community in, it's equally important to encourage our young people to go out and contribute to the wider community, and this has been evidenced via articles of achievement being reported in the local newspaper, contributions being made to the Care Matters magazine and project work such as with the local Carnival Organisation, all of which help to promote

positive publicity and a sense of acceptance.

A recent example highlights this: one of our young people actually wrote a letter of complaint to a sports organisation after having had his place withdrawn due to the behaviour of another resident at our home who attended the same club.

He challenged their discrimination, successfully and quite rightly, and was sent a substantial letter of apology and invited back with immediate effect. His talents have since awarded him a special mention in the paper for fastest lap time despite being the youngest member of the club! A great outcome, I'm sure you will agree.

But this is just one of many recent examples whereby our young people are confidently contributing to their development and to society by making their voice heard and by making their voice count.

However, whilst we strongly encourage participation by our young people, we cannot do this effectively without increasing our own participation by way of looking at ourselves and consistently reflecting on our practice.

Being professional and personal

The core of our work focuses on the '3Ps' element⁵ of social pedagogy: the Personal Pedagogue – what we give of ourselves, the Professional Pedagogue – our knowledge and conduct, and the Private Pedagogue – our lives outside of work.

It is through this means that we are able to consider how we as workers can approach our young people and become authentic practitioners by working with their best interests in mind. Through con-

stant reflection on our own experiences in life and not just in the working environment we learn an awareness of how our Personal, Professional, and Private involvement affects our practice and our approach towards our young people. To convey this better I'd like you to picture, if you will, the London Underground network with the care system being the circle line and the many routes to and from this central hub being different stages in the young people's journey through care. Both the young people and their carers all need maintenance, direction and a network from which to make their journey through care as comfortable as possible.

This network has to cater for the individual traveller as well as transporting whole groups towards positive outcomes and desired destinations. I, for one, strongly believe that social pedagogy provides us with the network to do this.

Concluding thoughts

Given the scope of social pedagogy, I have only been able to touch upon a mere fraction of the wealth of knowledge and evidence that backs up this insightful approach, which can forward our thinking and support us to responsibly consider the future of care. But essentially, social pedagogy encourages us to be an artist and think creatively and imaginatively, to challenge ourselves and overcome barriers to communication within our homes and out into the wider community. It also teaches us to be adaptable and resourceful, which is a necessity in today's current climate. That said, we do, however, have an appreciation for social pedagogy not having a

'magic wand' effect, but indeed a profound effect on positive outcomes nonetheless.

And when I said at the beginning 'It doesn't stop there!', it is vital to recognise that our momentum continues to gather pace as we pro-actively contribute to the practitioners forums within Essex Residential Services, host our own pedagogy team days and reflect on and share our practice as an extension of the training that was initially given. The aim is to become a suitably self-sufficient, holistic, flexible and well-educated workforce within the Children's Service.

So having been provided with a cleverly adaptable framework and a complementary approach to our practice I hope you can appreciate why we are hugely enthusiastic about exploring, evolving and improving our future role in caring for and meeting the needs of our young people.

And finally, we also hope that by sharing this brief insight you have gained an understanding of the relevance of social pedagogy in residential work. If you wish to find out more please get in touch with us here –

victoria.bird@essex.gov.uk and
gabriel@thempra.org.uk) or visit
www.thempra.org.uk.

Notes

1. For a detailed explanation on the notion of Haltung please see <http://www.childrenwebmag.com/articles/social-pedagogy/the-notion-of-%E2%80%99haltung-in-social-pedagogy>

2. Evaluating the Care System for Young Londoners, organised by the 'Children Living Away From Home' Division of LB Redbridge and the Children and Young People's Unit of the Greater London Authority, 13th October 2010.
3. For further information about the Common Third please visit www.thempra.org.uk/concepts_c3.htm
4. See Eichsteller & Holthoff (2009), which is available on <http://www.thempra.org.uk/downloads/Eichsteller%20&%20Holthoff%20-%20Risk%20Competence.pdf>
5. For a comprehensive explanation of the 3Ps, please visit www.thempra.org.uk/concepts_3p.htm

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COMMENT

Charles Sharpe writes –

In Viki's and Gabriel's stimulating and informative article, Gabriel seems to suggest that Winnicott's notion of "good-enough" is a descriptor of a kind of care which does not ask that the carer to be aspirational for the child she cares for. This is a misapprehension of the concept of "good-enough." It is the carer's quality of being good-enough which is the essential element for a child if he or she is to become imaginative, creative and aspirational. Winnicott originally coined the phrase "good-enough" to take pressure off the young mothers to whom, as a paediatrician, he was giving support. He thought that our society and our culture placed unduly idealistic expectations upon a mother and so he was in a sense reas-


uring mothers that they would be "good-enough". He suggested that the mother need not be "perfect" and that it is important for the baby's development that she is not for she must over time sensitively and gradually relinquish her total absorption and adaptation to the baby's needs. This is an important step for it is during this process that the baby individuates towards developing "the capacity to be alone", safe in the knowledge that the mother is in close proximity. In doing this the mother, and those others around her who give her support, provides a "facilitating environment" and it is in adapting to this changing environment that the baby first exercises imagination (that is, aspiration) and creativity. According to Winnicott a baby's first creation is often what he described as the "transitional object", usually a soft toy or a piece of material which the baby has "created" to fill the mental space vacated by the gradual withdrawal of the totally absorbed mother. At the time Winnicott was developing his theories of human development he was focused upon the mother as the baby's carer but later he suggested that while the mother did not have to be the baby's principal carer, it was nevertheless developmentally necessary that someone ensured that "good-enough" caring took place. When Winnicott turned his thoughts to children in residential care he argued that the good-enough caring process needed to be in part practically, and in part symbolically, reproduced to provide for children whose experience of good-enough caring in early childhood has been disrupted. When children and young people come to live in a residential setting

the carers may have to adapt to a child's primitive, infantile needs in order to establish within the child a sense of security and a trust in his environment. Once this has been achieved the child is more ready for the carers to be less absorbed in meeting his primitive needs and more ready to play, to be imaginative, to be curious, to be creative and to be aspirational. Without the provision of good-enough caring aspiration cannot exist.

Gabriel Eichsteller responded –

Thanks for clarifying this, Charles, and ensuring that readers won't misunderstand Winnicott's concept. I did not mean to refer to his notion of good-enough care, but rather wanted to highlight the importance of us not being complacent about our practice, of wanting to develop our understanding and skills on an ongoing level. This doesn't mean social pedagogues must be perfect or superhuman - quite the opposite: our human side is most important in social pedagogical relationships. And so is our human ability for lifelong learning and development. The great thing is that we can do this in the interactions with children, using the Common Third as an opportunity for shared learning and for role-modelling our own attitude to learning.


This article from: *Goodenoughcaring*, June 2011



Using strength based interventions to explore outcomes that matter

An Allambi Youth Services Conference to be held in Australia in conjunction with Reclaiming Youth International. The Ignite Conference 2012 aims to provide a unique opportunity to learn from Australian and International professionals discussing the latest research on trauma and strength based approaches to caring for people. In addition to a variety of training opportunities and workshops, those attending will have the time to share and collaborate on best practice ideas with other professionals. Please keep September 17- 21, 2012 free for an exciting week of training, speakers, panels, and workshops in the relaxed atmosphere of the NSW Hunter Valley Cypress Lakes Resort

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Using Technology to Break Through Loneliness

Kiaras Gharabaghi

It is no secret to anyone that somehow we have not done very well preparing young people in care for the transition to independence. While some are more successful than others, there is a large enough crowd of youth whose experience of the first five or so years after their final discharge is at best turbulent and at worst deadly, as evidenced by the elevated suicide rates and death through violence amongst these youth. To be fair, service systems, and especially the child welfare systems, have been trying very hard to mitigate the challenges associated with this transition, and some of the initiatives have been at least moderately successful. Everything from scholarship programs to employment programs, and from life skills classes to connecting youth to adult mental health services have contributed to easing this transition and creating new opportunities for many young people advancing toward adulthood. The system is not a failure, but to call it a success would be a grotesque overstatement. So what can be done?

Perhaps one of the core issues we will have to come to terms with is understanding what the challenges actually are. In this respect, much research and feedback

from young people themselves has pointed to myriad operational and logistical issues, all of which are legitimate. They include things like poverty, housing, nutritional deficits, lack of access to health care and other services, lack of financial management skills and many other themes. Currently one of the most talked about issues is the lack of access to educational opportunities, be that as a result of financial resources or because of the inflexibilities of post-secondary institutions that make it difficult for the slightly different application packages of these youth to gain the recognition necessary to be admitted. These kinds of operational challenges are indeed important factors in the transitions of youth to adulthood, but they are not, I would suggest, the only or even the critical factors. Much more important than any of these is one simple phenomenon that sets in right at the time young people are asked (not always explicitly) to turn around, walk away from their turbulent youth, and march toward the future: this is the phenomenon of loneliness.

It should be noted that virtually all of the operational issues faced by youth transitioning out of care are also present,

to varying degrees, for youth who have never been in care. Judging from the food bank operated by my university, for example, students who have had relatively stable and supportive upbringings also struggle with financial health; based on my observations of many of their eating habits, nutritional skills are limited. Some of my students are quite transient in terms of their housing, either unable to afford housing or unable to maintain housing because of too many parties, late rent payments, or whatever else. But there is something that sets the general youth transitioning to adulthood population apart from those young people who are doing so after spending much of their lives in care. The former youth have informal support systems that not only bail them out when they are facing logistical issues, but that also help them to remain connected in a continuous system of personal belonging and relationships. They have an immediate family, an extended family, peers from their high school experience and sometimes even their elementary years, as well as a broad network of connections and relationships with peripheral but important people, such as family doctors, dentists, loan specialists at their bank's home branch, sports coaches, and others. When they get lonely (and they all do more often than any of them care to admit), there is always someone to call, to meet up with, to visit, to engage. It is not just one individual but a whole menu of individuals, each associated with a different level of relationship and different implications in terms of making contact. In other words, overcoming lonely moments is associated with a broad range of choices

most young people can make in terms of activating particular relationships and connections.

What is different for young people transitioning out of care? On the one hand, they are often far better informed about the operational issues they will face, having completed multiple pre-independence training programs offered by their agencies and their professional care givers. They also bring to this process far greater wisdom and more varied life experiences than their more typically raised peers. In many respects, these young people are the most promising young people out there; having already overcome much adversity, they may in fact become the leaders and change-makers we seek amongst our youth. In the immediate term, however, these young people face the challenge of loneliness very differently than most young people. For young people transitioning to independence from care loneliness means being alone. There often is not a menu of people to contact, to reminisce with, to hang out with, or to engage in whatever manner. All of the pre-independence training notwithstanding, nothing really prepares these young people for those moments when everything falls silent, no one is around, and the skills that is really required is the ability to be alone with Self. It really doesn't matter what sort of nutritional regiment they are on, or how financially stable they may be. Indeed, even knowing how the adult mental health system works, where to go to get help with finding a job or being familiar with the ins and outs of the Landlord-Tenant Act (in Ontario) doesn't mitigate that terrible feeling of just being alone. I have

known young people transitioning to independence who, after having suffered through periods of extreme loneliness, will intentionally break the law so that they might be placed in a custody facility where they at least won't have to be alone anymore. Other have maintained problematic relationships in spite of their better judgment; at least these kinds of peer relationships provide them with someone to talk to, even if it is talking about conflict, problems or otherwise destructive plans and schemes. Young women especially often maintain violent and destructive relationship for no other reason than to not be alone, even if the long term consequences of these relationships are painful and ultimately make things even worse.

All of this speaks to the importance of mitigating loneliness for young people transitioning out of care. I know few professionals in the human services who wouldn't agree that maintaining relationships with these youth post-discharge is important. But there are many reasons why that just doesn't happen for many of the young people involved. Perhaps they have burned too many bridges with the child and youth workers, social workers or other professionals while they were in care. Or maybe there are policies in place that prevent young people from interacting with their former placements. Whatever the case, knowing that on-going relationships are important doesn't always result in actually doing something about it.

Many agencies have recognized these issues and have sought to create 'aftercare programs', with the intention of creating frameworks for maintaining relationships

with young people that support their transition. Often the design of such frameworks is somewhat formal, requiring young people to attend particular programs or to be physically present in particular locations at specific times. There are two problems associated with this approach. First, many young people are simply done with responding to the commands of the service system, and their lifestyles are such that being physically present in a certain place at a certain time is just not going to happen. Secondly, many young people transitioning out of care are simply done with programmed responses to their situations. Part of independence is to have flexibility about when to be where. But this does not in any way mitigate their need for connections, which one might argue is a lifelong need that most of us share most of the time. It furthermore doesn't help that governments have been reluctant to fund aftercare programs, perhaps because the jurisdictional disputes between the children's sector and the adult sector appear surprisingly difficult to resolve. Most great ideas about aftercare die a whimsical death as a result of a lack of funding and endorsement on the part of government.

As a child and youth worker, I have learned to live with this. I maintain connections with several young people (some not so young anymore) through my personal Facebook page, email, cell phones, and at times, face to face meetings over breakfast or lunch. It occurs to me now that maintaining these connections has become a lot easier with the introduction of the aforementioned technologies. Sure, there are still risks and sometimes inva-

sions of my privacy. I have had other friends ask me who the person is posting strange comments and messages on my Facebook wall, or why some of my Facebook friends appear oddly out of place amongst the academics, professionals or family members in my on-line communities. But for the most part, I am able to be available to quite a number of young people when they need me without really having to do all that much. Not so long ago, maintaining such connections required that I drive all over the province, visiting youth in their various residential arrangements, which usually range from basement apartments to custody facilities to drug treatment facilities. Now we can connect virtually instantly, sometimes in depth and at other times just very briefly, as if to say “don’t worry, we are still ok together”.

Technology carries risks without a doubt, and there are many issues of ethics, logistics and even legal contexts for which we may not have really good answers yet. But we will never have those answers until we take some risks now and do what we already know is essential for young people transitioning out of care to be successful; we must find ways of being available to them, when they need us. And we can’t just limit ourselves to those young people who are easy to connect with. I know this is common practice, but I would argue that those young people are very likely to be successful anyways. They are easy to connect with because they excel at creating their own social contexts and connections and maintaining these over time. It is especially the young people who are not so easy to stay connected

with, perhaps because they challenge our sensibilities, or maybe because we didn’t really like them all that much while they were in our care that we need to find ways of becoming available to.

So, I would like to suggest that the time has come for us to be a little more bold, and to start experimenting with technologies that might enable on-going connections with young people transitioning to independence in a way that we, as professionals, can monitor the impact on us while still extending our hands, our hearts and our presence to those young people who may encounter a crisis of loneliness right now. Social media, virtual communities, gaming scenarios and many other technology-based options are readily available to be used. Most of these are free, cheap, and likely more accessible to young people than the formal programs we otherwise think might be helpful.

In the end, we cannot prepare young people for the loneliness they will undoubtedly encounter along their journey. But we can make sure that there is someone they know and trust available to engage in however limited or contained fashion. Sooner or later we all learn this basic wisdom: It’s good to have friends when you need them.



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Shut Up!

I Want to Tell my Story

Thom Garfat

So, I am doing this training in a small community. Among the participants are youth, parents, teachers, social workers, elders, and other helpers. At one point we are talking about 'what works and what does not work' when trying to be helpful with kids who are feeling overwhelmed, stressed, pressured. All the adults offer their thoughts and then one young girl raises her hand and says:

"Don't talk so much."

I ask her to clarify for us.

"A lot of the time when I go to talk to a counselor," she says, "they do all the talking. They ask too many questions. They tell me what to do. And I really don't care. I just want to talk about why I came to see them. I want to tell them my story but they talk so much all I can do is listen and I never get to talk about what I want to talk about."

Most of the adults laughed. But they were laughs of understanding and recognition, not laughs of rejection or derision. The young girl had touched a chord.

Sounds like good advice to me. And I wonder why it happens.

I have some thoughts.

The Desire to Help

We all get in this field, I believe, because we want to be helpful. Often it is because we, ourselves, at some point have been helped by others; a not uncommon experience. And a useful one, as it can help us to be empathic.

That's the good news.

But sometimes something happens when we get into the role of 'helper.' We forget the times when we, as the help receiver, were not ready to hear the advice that was being offered, or how we struggled to be heard. Having been through the

helping process we think we have, and likely do have, good advice to give to others. But we forget sometimes that just as we needed to 'be ready', so do the people we are trying to help. Or we forget the struggle we had in trying to be heard by those who would help us.

We are driven by our desire to be helpful, to help this young person move beyond this place of pain. We want them to feel better. We want it to happen now — not because we need to feel good about ourselves (although sometimes that is there) but because we care and do not like to see people in this pain.

But we do forget, sometimes, that this is their story and they need to tell their story in their way, at their pace. They know, almost instinctively, that telling the story is, in itself, a healing process. They know, but sometimes we have forgotten, that telling the story is what is really needed; that the story-teller is not always looking for solutions, or advice, or direction but rather they are, simply, seeking a caring audience who will, without judgment, just listen. Be there. For them. At this time of need. That's it, that's all. And that is what is needed.

Sometimes in our desire to help we forget and so we interject, cut off the story. Thinking we know the ending, we don't wait, we try to push through. And the thing is, that is neither what is wanted, nor what is needed.

Sometimes it is hard to just sit back, or lean forward, and listen.

Filling the Silence

Silence is a strange thing. It says nothing but, for many of us, like an empty

belly, it seems to scream 'fill me up!'

We become uncomfortable when it appears between us. When the relational in-between becomes void of words, we become distraught and we rush to fill it up. And sometimes when we rush to fill the void that is making us uncomfortable, we fill the space that the young person was going to fill with her own story.

People need time. They need time to process, reflect, gather their thoughts, get ready.

Once I was in a northern community having one of those long distance conference calls where 2 or 3 people sitting in a room in the head office and other people scattered in villages around the territory are connected by telephone. The people in the main calling place sit around a central speaker phone connected to the others.

So at one point I am explaining something to all the people on the other end of the conference connection and, having explained, I ask them 'So, what do you think?'

Silence — and after it has gone on for 30 seconds or so, I lean forward to the central speaker and start to ask again. Roderick, who was sitting beside me reached out and put his hand on my shoulder. "Wait, Thom" he said. "You asked them to think. Give them time to do it."

A lesson well learned.

Working on Our Version of Their Story

We hear a lot in our field about how we 'are there to meet the needs of the kids, not our own needs.' And we are encouraged to attend to ourselves and what

is going on for us while we are interacting with other.

So on the one hand, be there for them and, on the other hand, be with yourself.

And sometimes when we are being with ourselves, focused on what we are thinking, or what we think needs to be done, we forget to let the young person lead. As someone said the other day 'sometimes we work real hard on the problems we think they have and end up ignoring the things they think are important.' We are so focused on our own interpretation of their issues or situation, we forget about them.

We work on our version of their story rather than on their real story.

So What?

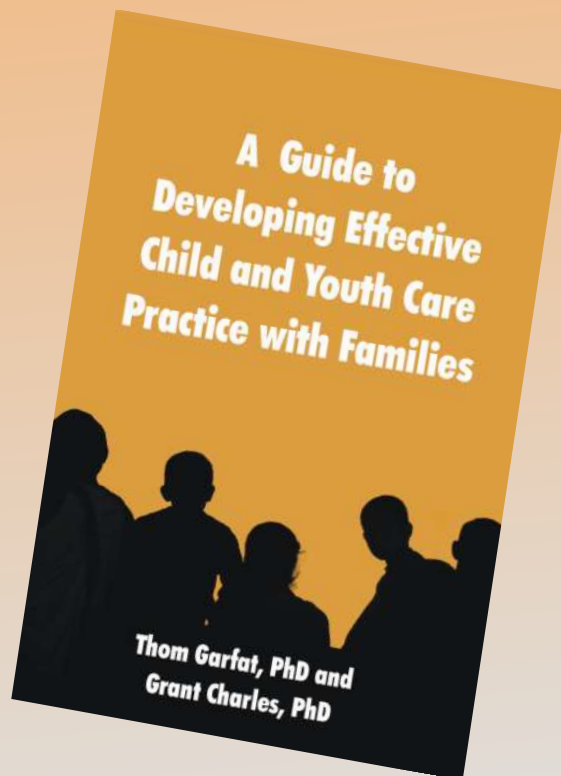
I need to go back to the girl who raised this question in the first place. After she had offered her advice, I asked her what it was like for her when this happened.

"I feel like either what's important for me isn't important for them or like somehow I got it all wrong. I think that maybe there is something wrong with me that I can't even get a counselor to listen to me. And he's paid to do it. So I feel pretty useless."

That's quite a so what as far as I can see.

So, next time you are listening to someone's story, wonder about a few things, like: am I really creating the space for her to tell her story? or, am I listening to her story or the one I am making up for her in my own head?

From: *Relational Child & Youth Care Practice*, 22.1, pp. 73-74



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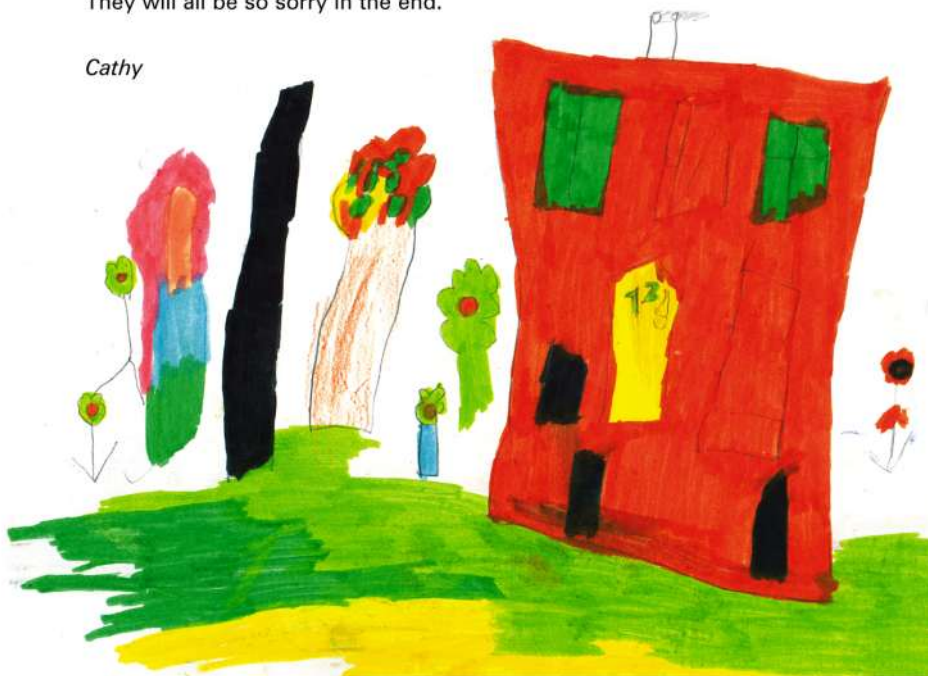
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CONSEQUENCES

Why was I treated differently to him or her or them or we?
Why was I the abnormal one? Please why me?
Why am I suffering the consequences when I did not bring them on?
Why am I feeling this hurt and pain? Why am I the one?
My mother is engaged and her new child in her life,
My brother lives between parents, a hassle free life.
I'm out in the sticks, cold and on my own. I have a roof over my head,
But nowhere to really call my home.
My life's been taken away before I've had the chance to live it.
My head is such a mess; I feel a need to sieve it.
They are not going to win – I will not let them!
There are consequences to come and I am going to get them.
But I will not lower myself to their childish acts,
Be abusive and violent, sly and slack.
I will be the clever one and get on with life.
This will gain revenge rather than cause stress and strife.
They will be worst, trust me my friend,
They will all be so sorry in the end.

Cathy



From "Rattle your cool", a collection of poetry and art by children and young people who are being looked after. Published 2003 by Foster Care Associates

An International, Distance-Learning, Post Graduate Course in CYC?

Laura Steckley writes: For the last few years when I've been at international conferences, I have been approached by CYC practitioners who are interested in the post graduate course I teach on – the MSc in Advanced Residential Child Care. These practitioners had completed their undergraduate CYC degree and were hungry to further their learning. Unfortunately, due to nearly insurmountable visa difficulties for anyone outside the European Union to attend part time courses in the UK, I've not been able to be more encouraging about their enquiries.

For reasons outlined below, we at the Centre for Excellence for Looked After Children in Scotland (CELCIS) are looking into rectifying this situation and Graham McPheat is leading the project.

So, this month I'd like to introduce my colleague and friend, Graham. Graham and I teach together on undergraduate and post graduate modules/classes at Glasgow School of Social Work (GSSW) at the University of Strathclyde and as part of CELCIS. He also course directs the BA in Social Work at GSSW.

I've offered my May column to Graham to tell you about the current course and the possible development of an international CYC course. At the end is a link to a short questionnaire, and I do hope you'll help us by sharing your views on this project – it shouldn't take more than ten minutes of your time. — Laura

Hello everyone and thank you to Laura for allowing me to 'borrow' her monthly column. Those of you familiar with Laura and her writing will know that she often draws upon her experiences of working with students on the academic course for which she is the Course Leader at Strathclyde University, the MSc in Advanced Residential Child Care. It is on this course that my first connection with Laura was made as we both enrolled as students on the inaugural intake in September 2001. It was a month that was significant for obviously unpleas-

ant reasons but by way of contrast, for Laura, myself and thirteen other students, it was the beginning of something significant.

The MSc in Advanced Residential Child Care was established at Strathclyde University by the Scottish Institute for Residential Child Care (SIRCC) and had lofty ambitions from the outset. Mark Smith, a name familiar to all regular readers of CYC-Online, was the first Course Director and was charged with the task of developing and delivering the MSc. SIRCC itself had been established by the Scottish

Office, the then administrative branch of the Scottish Government prior to the re-establishment of the Scottish Parliament. Strathclyde University, along with consortium partners, were successful in delivering a bid to create an organisation tasked with improving the education and training of residential child care workers form across Scotland. The consortium, henceforth known as SIRCC, were required to deliver this education and training



across the entire spectrum of the workforce, from entry level induction through professional qualifications and post-qualifying education. This final requirement was achieved via the development of the MSc in Advanced Residential Child Care.

Mark, when later reflecting upon the process of establishing the MSc, commented upon the synergy between another task of SIRCC, to undertake research on residential child, and the opportunities for Masters level students to become involved in developing a research agenda. In his eyes the MSc “*offered an opportunity to inject academic rigour to a sector where it had traditionally been lacking and to develop a voice for residential child care through the development of a cadre of*

professional leaders” (Smith, 2005, p.266).

These can be viewed as ambitious targets for what was a completely new course being delivered via an organisation at its very infancy. Fast forward 11 years and these initial aspirations have very much begun to be delivered. On a personal level,

students such as Laura and I progressed to complete Masters dissertations and now find ourselves employed by CELCIS (Centre for Excellence for Looked After Children in

Scotland), the wider organisation which now incorporates the role and remit of SIRCC. Many other graduates are employed throughout the sector across Scotland and beyond in a range of agencies and settings. Demand for the course, in the shape of enquiries and actual applications, has never been higher and annual recruitment regularly tops the initially envisaged target of 15 students per year. Testimonies from students who have engaged with the course have been powerful and rewarding for all involved. One former student commented upon their personal learning and who has benefitted from this:

‘The depth of learning that I gained whilst on the course has had a significant impact on the relationships I have with

children and young people. They have not changed, but I certainly have! My level of understanding in terms of theory and not just experience alone has served both myself and the young people well.'

Another former student was able to identify how the learning that they had brought back to their staff team had been both absorbed and implemented in a way that resulted in significantly improved care experiences for the children and young people they were working with:

'[Our] unit team is more inclined to 'hold on' to young people and do not give up during the hard times. This has meant greater stability, security and a sense of belonging for the young people.'

The feedback we have received from academics external to Strathclyde University during quality assurance processes has been continually positive also. Adrian Ward in 2009, when commenting upon the course, said:

'This is a course of national importance which is living up to its reputation as providing sound and rigorous education and training at an advanced level. It is also gaining international recognition, especially in terms of its continuing support from government.'

However, the last four words in this statement – continuing support from government – hint at possible future challenges. When the course was established in 2001 it was hard to envisage the financial landscape that governments would be required to address by 2012. The fully funded nature of the MSc (students currently pay no tuition fees) is evidence of a substantial investment in the education of the residential workforce in

Scotland. The absence of tuition fees has undoubtedly proved critical in allowing employers to continue to send students in what are testing financial times. Whilst the testimonies of students above illustrate the benefit to organisations of attendance and participation, the introduction of tuition fees would undoubtedly challenge their ability to continue to engage with the course to the extent they have up till now.

Whilst the Scottish Government have signalled no indication that their willingness to fund the course is likely to change for the time being, within the current financial climate it would be foolish in the extreme if CELCIS did not begin to plan for this eventuality – even more so within a country which is engaged ever more increasingly with the agenda of full independence from the United Kingdom, or at the very least increased devolution, and the altered political and financial conditions this would herald. So to this end CELCIS are engaging in online research to assess the possibility of developing the MSc in three significant ways.

- The first development involves moving the curriculum beyond the traditional boundaries of residential child care in Scotland and the United Kingdom to something more immediately relevant to a worldwide audience. Whilst covered in the current curriculum, concepts of group care, child and youth care and social pedagogy would be likely to become more central. Working within and sharing lifespaces with the children and young people we work with is already at the core of the MSc and that unifying thread would

make this task readily achievable. For those in attendance at the CYC-Net Clan Gathering in Paisley, the centrality of this 'common language' was vigorously reinforced.

- The second development thinks about the manner in which the course is delivered. Currently students travel to Glasgow and attend class for blocks of 2 or 3 days at a time. This very much limits us to a mainly domestic market, with the occasional student travelling from further afield. The development of a curriculum with global significance necessitates the development of a global delivery method. This would most likely involve e-learning and on-line delivery. Again, the CYC-Net Clan Gathering caused us all to think more seriously about how our sector can engage more meaningfully with new technologies and realise their potential, embracing both the challenges and the possibilities in equal measures.
- The third brings us back to the issue of continued government support and funding. We are confident that we have a good product, better than good in fact. We are also confident that it has the potential to be developed to be of relevance to an international audience and be accessed online via e-learning. But we need to test out our suspicions to see if that appetite is actually there and, in terms of resources, to see if there would be an ability and willingness to pay for such a product. To do this we have set up a short online survey. It can be accessed at https://qtrial.qualtrics.com/SE/?SID=SV_8J00EbXxbaN2r6k. We reckon it should take

5 or 10 minutes at most for you to complete. Our request is that you don't only complete it yourself but that you forward it on to anyone within your organisation or the wider CYC sector who you think would have an interest in such a development and have something to say. Discussions throughout the entire CYC-Net Clan gathering convinced of us the widespread desire, and indeed need, for such a development and we are determined to build upon that momentum in taking this project forward. Thank you for taking the time to read this, and more importantly, thank you in advance for taking the online survey.

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“Effective” CYC practice

Jack Phelan

May is the month that we celebrate the CYC profession and all the various practitioners of our particular type of work with children, youth and families.

Our field combines science, practical skills, multiple theories about abuse, neglect and human development, and the ability to have safe relational connections with people who fear closeness.

In spite of the folk wisdom about “naturals” who just ARE effective CYC practitioners, this is no more true than in any profession. For example, there are people who are teachers who are “naturals” but they still need to learn the theory and develop a reflective practice through experience, good supervision and staying up to date by reading professional literature.

Interacting daily with people who live in a hostile and unsafe world, attempting to counteract themes of abuse and neglect that may have been entrenched for generations is not a simple or obvious task. The people who come to us for help, voluntarily or not, have already been threatened, punished, excluded and “straightened out” multiple times. Effective CYC practitioners are aware of the obvious folly of merely repeating this lit-

any of logical messages, even when the referring funders expect us to act this way.

When we create public awareness and hopefully appreciation for what we are doing and how useful good CYC practice can be, there is an opportunity to also use this time to build respect and support for the complexity and sophistication of our field among people who hire us. Perhaps also the people who we work with as colleagues may also be included here.

So, there are several issues to reflect on this month; we must be well informed about theory, reflective in our practice to avoid damaging responses, and willing to read up to date literature. We also must expect and demand that our supervisors and colleagues also do the same. The simple, logical, and obvious expectations placed on us and our charges by people who are not well informed about good CYC theory and practice need a clear, theoretically sound response from us. The colleagues, supervisors and managers who think too simply about CYC work also need us to speak out. Our focus this month can be to respectfully educate them about CYC practice.

So this May, tell yourself about effective CYC practice, then tell a friend, then ...

Balancing the Imbalance: Integrating a strength-Based Approach with a Medical Model

Robert Foltz

There are major differences in perspective between the traditional medical model of treatment for troubled children and more recent strength-based approaches. This is particularly evident when widespread use of psychoactive drugs becomes a substitute for interpersonal therapeutic interventions. Drugs and relationships both impact the brain, but in markedly different ways. Medications may impact the brain in ways that facilitate short-term management of behavior. Long-term positive changes come as corrective interpersonal relationships serve to rewire the resilient human brain. More research is needed in order to understand how psychiatric medications and therapeutic interventions can be balanced for the benefit of troubled children.

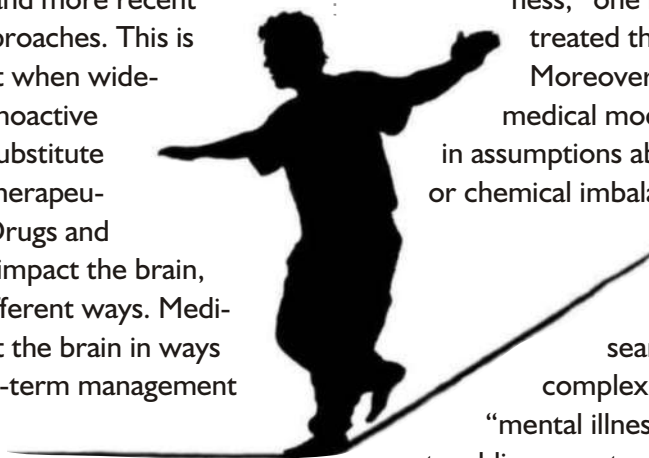
Foundation Beliefs

Current models of troubled youth are largely pathology based. That is, extensive time is devoted to diagnosing conditions, identifying symptoms, and seeking treatments to eliminate these problem

behaviors. Unfortunately, this paradigm leads one to conclude that the disordered behavior is actually reflective of an “illness,” one most effectively treated through medications. Moreover, relying on the medical model can even result in assumptions about brain pathology or chemical imbalances. Indeed, for decades, millions of dollars have been spent on researching the complexities of the brain and “mental illness.” Even if these troubling symptoms can be eliminated or suppressed, it is incorrect to conclude that an absence of symptoms is equivalent to “mental health.”

From strength-based curriculums, such as Response Ability Pathways (Brendtro & du Toit, 2005), it becomes clear that interpersonal connection can be one of the most powerful intervention strategies with troubled youth. Current neuroscience is also pointing to the realization that these connections can

indeed change the neurochemistry and neurophysiology of the brain. In other words, the brain can change, in an ongoing



way, as a result of day-to-day experience; this is a concept called neuroplasticity. If troubled youth can be embraced by positive, productive relationships, they can indeed become more resilient to future stress.

The Reality

It is currently estimated that 20% of America's youth suffer from a "mental illness" (Shaffer et al., 1996). Over 50% of the population will have a diagnosable "mental illness" at some point in their lives (Kessler et al., 2005). These figures do not reflect a very healthy society. Equally troubling is that at the inception of the Diagnostic and Statistical Manual (DSM) in 1952, there were 112 possible diagnoses, reflected in the 128-page text. Today, there are more than 365 possible diagnoses, captured in nearly 1000 pages of the DSM. With the diagnostic options more than tripling in 50 years, it is not surprising that more and more people are diagnosed. Additionally, it is a reflection of our pathologizing of problematic behavior. This aspect of "mental health" is impacting youth at alarming rates.

Connected with the skyrocketing diagnoses is the dramatic increase in the use of psychotropic medications. In 1996, just over half of office visits to a psychiatrist resulted in a medication prescription. Five years later, this rate rose to 76% (Thomas et al., 2006). In the years between 1990 and 2002, the production of Ritalin increased by 1000% (INCB, 2004). The United States currently uses over 70% of the world's Ritalin supply and approximately 60% of the world's amphetamine supply (with drugs such as Adderall). In

looking at drugs such as the anticonvulsants (also renamed as mood stabilizers) and antipsychotics, there has been a 385% increase in their use in outpatient settings between 1994 and 2001 (Thomas et al., 2006). Finally, antidepressant use has skyrocketed, increasing over 300% in the late 1990's, yet these medications have repeatedly been shown to have virtually no effectiveness in youth and can frequently produce behavioral deterioration or a worsening pre-existing psychological distress (Foltz, in press).

While alarming, this data compels one to ask the question, "How could this be true if the medications are not effective?" The idea of "effectiveness" needs careful consideration. In controlled studies, psychotropics have performed quite poorly with respect to "effectiveness." In many cases, there is very little evidence on which to base assumptions of effectiveness because research with children is complicated and filled with ethical and methodological problems. As a result, most clinical use of these medications is based on adult research or anecdotal observations of the youth. As more and more youth are prescribed these powerful medications, very little consideration is given to the long-term neurological or developmental impact, in large part, because at this point, too little is known.

"Effectiveness" also needs further scrutiny to differentiate behavioral control from treatment. Many of these powerful medications act to suppress behaviors. How the medications actually influence neurochemistry is quite complicated, but the "mechanism of action" for each of the medications does not translate to a de-

monstrable “chemical imbalance.” Unfortunately, popular belief would be to conclude that if a medication “works,” then there must be an “imbalance” in whatever chemical the drug affects.

This explanation is overly simplistic and has not been reliably demonstrated for any psychiatric disorder. But the impact of these medications on the brain cannot be understated. In many respects, very little is actually known about the neurochemical and developmental effects following long-term exposure to these medications in youth. Also troubling, it is now a common practice to place youth on multiple medications, the interactions of which are minimally understood. Ultimately, there is a difference between containing these behaviors and treating them.

In defining treatment, again, an absence of symptoms is not equivalent to mental health. Medications are seen to be effective because they can quickly suppress behaviors that have been identified as problematic. Inattention, impulsivity, mood lability, aggression, etc. are all behaviors that disrupt overall functioning of youth and can impact those around them. No doubt, these behaviors can make a home situation unbearable. Moreover, dangerous behaviors need quick intervention to preserve the safety of children and those around them. To suppress these difficult behaviors can provide immediate relief from the anguish of an angry, defiant, impulsive youth.

From this position, treatment providers need to closely examine their choices to use these powerful medications on children. At the same time, most treatment providers struggle to find interventions

that work, as effective alternatives are not readily available or require considerable commitment of time and energy before results are observed. But this reality is a critical consideration. If comparable results can be obtained, albeit across a longer period of time, with fewer potential side-effects, these options need to be carefully reviewed. Even in the most severe disorders, these options do exist. Beyond this, cutting edge neuroscience is pointing back to the power of relationships as one of the most effective intervention strategies.

Modifying the pathology-based paradigm of “mental health” is a large, daunting task. However, integration of a strength-based strategy is decisively important. In bridging these two approaches, small modifications will produce large results. For example, it is common that once a child is diagnosed and becomes managed on a combination of medications, providers often conclude that success has been attained and the youth may “require” this treatment indefinitely. But with what is known, and what is not yet known, about a child’s physical, neurological, and psychological development, it becomes necessary to pull back from these interventions to re-examine the status of the youth throughout the course of treatment. In other words, a child exhibiting “bipolar” behavior at age 12 may not display these behaviors six months, one year, or three years later-with or without treatment. One study showed that after a year of medication treatment, 23% of children previously diagnosed with schizophrenia no longer met the diagnostic criteria (Kumra et al., 1999). This study points to

the important developmental changes that can occur, but are not yet fully understood.

Conclusion

As the power of a strength-based program becomes more and more evident, treatment providers are compelled to re-examine the assumptions that have been relied on for decades. Of central focus within the field of mental health is the use of psychotropic medications. In examining treatments, from medications to individual therapy to group therapy to milieu programming, professionals are obligated to examine the evidence. Moreover, it must be fully acknowledged that the research conducted on adults may not apply to the treatment of youth and cannot perfunctorily be used to justify treatment interventions in the absence of reliable evidence. Working with troubled youth is challenging, but incredibly rewarding. What is known is that the power of relationship is only beginning to be understood. This may well be a more fruitful pursuit in effective treatment.

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Come all ye faithful

Thom Garfat and Brian Gannon

We have tried very hard over the past year to establish the actual date for International Child and Youth Care Workers' Day. All of our research confirms that it is celebrated in the first week of May and that's as close as we got.

In fact, with child and youth care work being a twenty-four-hour service, the rather blurred date had a ring of truth about it, because in our profession there is never a single day when we can all party together there is always somebody who has to be at home to mind the kids!

So let's do that. Let's rediscover this day that somehow got lost, and let's celebrate International Child and Youth Care Workers' Day in the first week of May whenever you and your team can fit it in, and in whatever way feels right for you. And if we tell each other how we plan to celebrate our day and, afterwards, how the celebration went, we will all have touched hands across continents and cultures in a unique way.

Of course CYC-NET is most pleased to promote this. We would like to reflect the occasion in our various media the dis-

cussion group, web site, on-line magazine, news pages ... We would like to collect some thoughts and ideas from our members and readers to share together in the run-up to the big day, so that we are more conscious of each other as we observe the occasion.

* * *

It is right that we should stop briefly to pay some attention to ourselves and our profession. In recent weeks on our e-mail discussion group there have been some moving instances of sharing and networking on CYC-NET: requests for help being met with generous responses, expressions of vulnerability and disappointment being met with support and empathy. And all of this carried along by the powerful undercurrent of child and youth care people always looking for better ways of understanding and working with troubled kids and their families.

It will be interesting to see how creatively we can "do" an International Child and Youth Care Workers' Day.

The Next Sunny Day

Travis Sampson



Foreword by Kelly Shaw

In spite of our training and education it can be difficult to maintain our therapeutic engagement when we are engaged with an adolescent who is struggling and demonstrating pain based behaviour – (Anglin, 2002).

Sometimes children or youth act out in ways that scare us or make us sad. We are not able to remember the youth's context – the previous life events that impacted on their development – nor are we able to remain rationally detached and available as a support and helper for the child or youth. We simply see the 6-foot tall 200 lb. young man or the 14 year old dressed up for a night on the town. We fear the chair flying by our head and for the safety of the drug using teen. In these moments we find it may find it nearly impossible to remember the various life stories of these youth; what impacted their life that lead them to now attempt to meet their needs in ways that stimulate our emotions. If we are not mindful of the multiple contexts at the moment of intervention we can lose sight of the needs of that 6-foot young man and instead respond based on our own emotional response (Ricks, 1992). Staying connected to our own emotional experience while remaining present in the moment for the youth in our care who need our support requires us to be self-reflective, willing to engage in self-exploration and careful to practice self-care (Carver, 2011).

Here is an example of the kind of story which any youngster might have lived – years ago, prior to our ever meeting him. It is a story of love, and loss.
It may be hard to read – imagine living it.

I heard the birds chirp before my eyes opened, felt the sun slanting through my window and onto my eyelids. I blinked my eyes open, stretched and noticed the unblemished blue sky. There wasn't a cloud in it. It was the next sunny day. I kicked my sheets to the foot of my bed and headed for the kitchen. I was hungry.

Our apartment was still quiet. My mom was asleep. I hopped up on the counter and rifled through our cereal cupboard. I pulled out one of the boxes, my favorite kind. It was the one with the marshmallows in it. I gave it a shake and found that it was empty. I opened the cardboard box and looked in. The plastic had been chewed through and what was left of the cereal was ground into crumbs. I knew what had happened.

Mice. The landlord told us he was going to get rid of them.

I shoved the chewed through box back on the shelf and took the other one out. My mom said the stuff in the other box was good for me, healthy. I thought it tasted like dirt. I gave it a shake and looked in it. It was full and wasn't chewed up. Even the mice didn't like it. I jumped off the counter's ledge and slid the box on the table.

I opened the fridge next (the light was broken, I would have to tell mom) and grabbed the carton of milk. I gave it a shake and heard the sound of one mouthful rattling around inside. My heart sank, cereal and water again. I placed the all-but-empty carton on the table, grabbed a spoon and a glass of water and hopped into one of the chairs. I propped myself up on my knees and dumped what little bit of

milk there was into my bowl. I mixed the cereal up, desperately trying to get at least a tiny drop of the milk on each grain flake. It was hopeless. I was about to pour the glass of water in too, but I decided I'd rather eat it dry than soaked in the flavorless liquid. I grabbed my spoon and dug in.

While I chewed I looked at the mail that was sitting on the table. There were piles of envelopes. I sifted through them. They were all from the power and cable companies. The ones on top all had big, thick letters on them. They said things like: 'Final Notice' and 'Past Due.' My mom came out of her bedroom rubbing at her eyes.

"What's 'Past Due' mom?" I asked her.

"What?" she said through her squinted eyes.

"Past Due," I repeated. "What's that mean?"

She snatched the pile of mail off the table and threw it on top of the refrigerator. That's where she put things I wasn't supposed to touch. "It's a new channel," she said. "It just came out. The cable company wants us to buy it."

"Do you think they have *Funny Bunnies* on the new channel?" I asked while chomping noisily on my dry cereal.

"No," she said. "It just has a bunch of boring grown-up shows."

"Like *Sophia*?" I asked. My mom watched *Sophia*. I hated her. She just had a bunch of old people sit in chairs and all they did was talk. Boring.

"Yes," mom said, "like *Sophia*."

I forgot about the new channel and kept on eating. There was a knock at the door. My mother left her kettle to boil and went to answer it. "You're gonna choke

on that stuff, Jack. Put some milk in it.”

“There is no milk,” I said.

“Oh,” said mom, “well, put that water in it then.”

I put my hand on my glass of water until she looked away. Then I left it where it was. She opened the door.

It was our landlord. I didn't like him. He gave me the creeps. He was too round, soft. He had a big, beach ball of a baldhead and these protruding eyes like a frog. His belly bulged. It stretched his used-to-be-white, burn-hole filled tank top to the brink. And his crooked yellow teeth were so ugly I thought I could smell them. I *hated* his eyes too, the way he put them on people.

“Rent's due,” he said.

My mother held the door half open and leaned on the doorframe. “I'm a little short again this month, Joey.”

“Course y'are, doll.”

“Can you come by tonight and, uh, collect the rest?”

Joey went on his tiptoes and poked his head over my mom's shoulder, looked at me. “The kid going to be here?” he demanded. He lit up a cigarette, inhaled then blew the smoke into our apartment.

“He's my *kid*, Joey.”

“Not what I asked, doll.”

“Yes,” she conceded, “he's gonna be here.”

Joey nodded, blew another lungful of smoke in through our front door then walked down the hall to the next apartment.

My mother closed the door, locked it and leaned on the backside of it. She closed her eyes. She inhaled. She exhaled.

Sometimes mom didn't have enough

money to pay all of our rent. Lucky for us, Joey liked to wrestle. My mom would take him into her room and they would have a match to settle the rent. She said I couldn't watch because I might get hurt. It did sound pretty rough. The bed would creak and groan, sometimes I could even feel the floor shake under me. Sometimes I worried. I could hear my mom moaning when Joey was getting the better of her. But she always won in the end and we wouldn't have to pay the rest of our rent. My mom was a tough lady.

“I don't like Joey, mom,” I told her.

She grinned, a weak little grin then walked over to me, rubbed my head. “I know,” she said.

“He smells funny.”

“I know, Jack-O.”

The kettle screeched and a jet of steam shot out of it. Mom lifted it off the red-hot burner and poured herself a cup of tea. I finished my cereal.

“Did you look outside?” I asked.

“Yes, honey. I did.”

“It's sunny. You know what you said we would do on the next sunny day, mom. You said we would walk across the bridge.”

“You don't miss a thing, do ya, baby? My little brainiac.”

“I'm not a brainiac,” I said.

Mom got up and pulled my progress report off the fridge. She dropped it in front of me. “Looks to me like it's full of gold stars. Who says you're not a genius?” She smiled.

I didn't look at the stickers. I hated them. It seemed that the more gold stars the teacher stuck on that thing, the more beatings I caught from Jerry Hewitt. My

next progress report wouldn't have so many, I had made sure of it. "Jerry Hewitt says," I told her for the first time. "He says it doesn't matter how many gold stars a skidder like me gets. He says I'll be a stupid skidder forever. No matter what."

My mom's smile disappeared. She put her hand over her eyes and pinched her temples. She stopped and rubbed at her nose. Her eyes were wet. She looked at me. She snatched my star-filled sheet off the table and stuck it underneath a magnet in the middle of the fridge, stared at it for a while. She walked back over to me, kneeled down and took my face in her hands.

"You listen to *me*, hon," she choked. "Jerry Hewitt is a spoiled, sniveling little *shit*. Don't you ever let him, or anyone else, tell you what you are or what you're *going* to be, that's for you to decide. OK? You hear me, Jack-O?"

I nodded. A smile broke through. "You said 'shit,' mom."

"I did?"

"Uh-huh."

"I owe you another dollar then, don't I?" mom said as she sent my hair in every direction. "Now go get dressed. Wear whatever you want. Mommy's gonna shower and we'll go to the bridge. OK?"

Finally! I thought. I shot into my room like a heat seeking missile. I had wanted to walk across the bridge for as long as I could remember it. We had driven across it almost everyday on the bus, mom and I, but I had never *walked* across. Mom said that the sidewalk on the bridge was a grate. She said you could see all the way down to the water just by looking at your feet. I couldn't wait.

I pulled on my only pair of jeans. It was the only article of clothing I particularly liked. There was a thieving little mouse stitched on them. He was poking out of one of the pockets and making off with a bit of cheese. After the jeans I pulled on my favorite t-shirt, the one with the Funny Bunnies on it. It was dirty, a big pizza sauce stain on the collar, but I didn't care. Once I was dressed I sat in front of the TV and watched cartoons until mom came out of the shower.

"Not so *damn* close to the TV, Jack."

"You said 'damn,' mom," I teased.

Then we left.

The sun was bright and hot. It turned the blue sky white. I could feel the heat radiating from the pavement. It was too hot for my jeans, but I didn't care. My mom had on a plain white tank top and her cut-off jean shorts, her weekend clothes. She dug in her purse for her sunglasses, shoved them on her face. Then she pulled out her cigarettes and a lighter. She smoked.

We walked along in silence and left a stream of cancerous fumes in our wake. All the usual people were on the street. There was the man who always drank out of a paper bag. He was walking around, talking to anyone who was sitting outside. He gave me a look at his gap-toothed smile when he stumbled past. There was mouthwash heavy on his breath. I smelled the rest of him. He stank worse than Joey.

A little farther down the street there were the older kids in the over-sized, flat brimmed hats that hid their faces in shadow. They sat in rickety lawn furniture, smoked funny cigarettes and slapped hands with a lot of people. Mom said their

cigarettes were 'home-made.' They looked it too. They were all wrinkled, fat and brown.

"Morning, Laura, Jackie Boy," Beatrice, the fat black lady a few houses down, shouted while she dumped a pan of hissing grease off the edge of her stoop.

"Bea," my mother said, forcing a smile and lazily throwing her cigarette-wielding hand in the air. I smiled and waved.

We walked some more, got to the end of our street. We turned and headed for the bridge. As we got farther away from our neighborhood the buildings got bigger, nicer too. I wondered what it would be like to live in a house that was a long way away from our apartment building. It was big, the house, huge. The siding was brown-red shale stone laid out in cement. There was a balcony on the second floor with a set of double glass doors that were open wide as we walked by. The lawn was wide, grass-covered and dotted with fern gardens. It looked like a good place to play, I thought, to live.

"I wish that was *our* house," I said happily. I looked at my mom expecting a smile and earnest agreement.

She was staring straight ahead. Her neck looked stiff. "I know," she breathed, the words barely audible. She sniffed sharply.

I shrugged and looked up ahead. We could see the bridge in the distance.

The supports rose high into the air, like the office buildings downtown. The big, metal, suspension cables were bright orange and the steel frames that they connected were forest green. The four lanes of traffic flowed heavily, like a river the day after a typhoon. People were

honking, exhaust fumes invaded my nostrils and when we got to the centre of the bridge we were hundreds of feet up from the deep, black harbor water below.

I looked down, between my own feet. I swayed on the spot. The view made me a little dizzy. As my mom would say, "It was fucking high up!" I caught my balance and grinned, a wild grin. The water was churning below, crashing against the hulking stones that protected the gigantic ground supports. The result was a mess of furious white foam. And hanging there, high over the water like we were, the wind picked up, whistled in our ears. It was an angry whistle, like a cross hunter summoning his disobedient hound. My mothers' long blonde hair danced, helter-skelter in the wind.

"Whatta ya think?" she asked me.

I had only one word for an answer: "Awesome."

I pressed my face against the warm metal bars and looked down at the boats. They looked so small from my bird's nest view. The bridge was better, higher, more impressive and more terrible than I had ever imagined in any daydream or nightmare. My mother leaned beside me.

"Do you remember what I told you about 'getting lost' when we were out?" she said. She liked to quiz me.

"Yup," I told her automatically, "you said to stay where I was because you probably weren't all that far away. You said if you didn't find me after ten minutes or so I should get another person to help me find you."

"Another person?"

"Another *woman*," I corrected myself.

"Good boy," she said. She put her

hands on my shoulders and turned me to face her. Her eyes were wet again. They were wet a lot lately. She hugged me hard, pinned my arms straight down along my torso.

“Are you OK, mom?” I asked after she let me go. “Do you wanna play a game or something?”

Her lips formed a weak smile, but the rest of her face remained stone. “Sure,” she said. “How about hide and seek? You’re it.”

“Can we play hide and seek up *here*? Are there any good hiding spots?” I cocked my head back and looked all around me.

“There’s always somewhere to hide,” she said.

“OK, what should I count to?”

“Thirty. You can count to thirty. Right?”

“Mom,” I said. “I can count to infinite.”

Her lips flashed another wannabe-smile. “I think thirty will do, brainiac.” She kissed my forehead. “Don’t look.”

I covered my eyes, started to count aloud. “One, two, three ...”

“... Twenty-seven, twenty-eight, twenty-nine.” I took a breath of air. “Thirty! Ready or not, here I come!”

I took my sweaty hands away from my eyes. My mother was gone. I guess there are some hiding spots up here, I thought. Then I heard a woman’s voice calling. It was a faint, “Hello. Hello?” I looked down. My mother’s phone was on the grate, flipped open. I picked it up, put it to my ear.

“Hi,” I said. “Who’s this?”

“This is 911, Emergency Operator. What’s the problem sweetheart?”

“I don’t have a problem,” I said. “I think my mom accidentally dialed your number and dropped her phone.”

“Where’s your mother now?”

“Hiding,” I explained. “We’re playing hide and seek. I’m it.”

“Are you at home, sweetie? Where do you live?”

“No. We’re not at home. We’re on the bridge.”

“The bridge? The Joseph Howard Bridge?”

“Um...” I said.

“The big one, honey? The big green and orange bridge?”

“Yup, that one!”

“OK. What’s your name, dear?”

“Jack,” I told her.

“OK, Jack, honey. Just stay where you are, stay away from the cars. I’m going to send help. OK?”

“I don’t need help,” I told her. “I’m just playing with my mom.”

“I know, Jack. But hide and seek is tough on the bridge. I’ve played up there. You’re going to need help to find your mom. Just sit, stay put and I’ll get someone over there. OK, sweetie?”

“OK,” I said. I hung up.

I planted my butt on the metal grate and looked way up at the top of the supports. I wondered if my mother was up there. Then I wondered why she didn’t tell me I would need help to find her.

Maybe that was why she left the phone open.

I looked down, back at the rocks that were getting pounded with waves. I stared at them. They were a long way down, but I thought I could see a splash of gold spread out across them, the same

color as my mother's hair. I squinted, tried to focus. Was that red splattered in there too? Was that blood?

I pressed my face against the grate to look closer, another wave crashed down on the boulders.

The gold and red disappeared, sucked into the blackness. Maybe I had imagined them, I thought. It was hard to be sure. I pulled my face from the metal and sat cross-legged. I waited.

Eventually the police cars and ambulances pulled up. One of the officers, a woman, scooped me up off the grate without even offering to help find my mother and she carried me to her car.

"Aren't you going to help me find my mom?" I asked as she fidgeted with her cruiser's door.

She stopped, took her hand off her key, looked at me. "I'm going to help you," she said, poking a finger into my chest and tickling me. Then she waved the finger at the paramedics. "They're going to try and find your mom. OK?"

"OK," I said.

I looked at some of the faces in the cars that were slowed to a crawl by pylons, flashing lights and arm waving policemen. All the people that passed craned their necks and gawked. They wondered what was wrong with me.

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A warm thought from Karen VanderVen as we celebrate International Child and Youth Care Workers Week at this time: Princess Di was ...

One of us, too!

Tonight, like so many around the world, I am mourning the death of Princess Diana. Watching through blurry eyes, her life review on television, I found myself coming to a revelation. Child care workers do not hold royal titles and do not wear high fashion clothing. Yet the thought increasingly rushed to my consciousness: Diana, who actually worked as a kindergarten teacher before marrying into the British royal family, was indeed a child care worker!

She was empathic and compassionate to people in need and consciously identified with the have-nots, those who were suffering, those who were rejected by society. From her childhood, even though she was of the aristocracy, she found that events were causing her to be more aware of and sensitive to the needs of others. Her own emotional struggles as a younger adult continued to build her sense of empathy for others who were troubled and made her want to extend a helping hand. Sound like anybody we know?

What courage Diana showed — holding the hands of people ill with AIDS,

walking over mine fields, touring dangerous areas not in a protecting vehicle, but connecting directly with people. That is why she was described by a British citizen as “one of us.”

We, too, as child care workers, show courage daily as we deal with a difficult system, when we advocate for a troubled youth, or when we literally waded into a fray of fighting youngsters and help them resolve their differences. Indeed, our work, as has been frequently stated, is directly connecting with people — where they are.

To Diana, touching was a crucial way of relating to people and meeting their needs. Defying the royal custom of not touching “commoners,” Diana hugged and



picked up her own children — everyone agreed she was a highly invested and devoted mother — and many, many others. Why? She remembered not being held or hugged herself, a result of the break-up of her own family, and wanted to make sure that others didn't experience that same wrenching deprivation.

Today, as a backlash from well-meaning attempts to prevent genuine child abuse, needy children experience another form of abuse: they are denied the touch that is like earth, water, and sun in promoting positive development. Diana brought back to our awareness the significance of touch, and she stunningly role-modelled for us the necessity for warm human contact.

And her contagious warmth! As the commentators said, she "defrosted" the entire royal family and its stiff image. Dan Rather commented on what set the Princess off from the rest of the royal family, what made the public — even me — so interested in her: she was a wonderful communicator. When she sat down on a hospital

bed with an ill child, for example, even the photographs showed her intense interest in

and sense of caring for that specific child. Her smiles, her intense gaze, her open posture. This quality "reached" not only the delighted children, but everybody in Britain.

In recent months, the Princess had decided to set her focus toward a life of public service. What a tragedy, indeed, not only to the many beleaguered people who had been touched by her — literally — but to countless others who will never know what she might have done for them.

I sometimes get depressed about the state of our field, wondering: Are there enough dedicated child care workers to sustain interest in it and to keep it moving forward in the future? As saddened as I am by the loss to the world of Princess Diana, I am also heartened by the opportunity to take a closer look at her life which shows that child care workers might be every-



where and anywhere. They will be "doing the work" in many different ways.

Child care workers cannot be known just by their titles job or otherwise, the kinds of clothes they wear, or the amount of money they make — or, of course, don't make. They are known by the kind of people they are, by their thoughts, their actions, their words, and the messages they communicate. And, while, of course, the rest of us are "commoners", this is an opportunity to acknowledge again the nobility of our work, no matter what form it takes. Obviously Diana knew that there was no better way to embrace humanity, to truly serve the public, than to care about its youngest, frailest, and most disenfranchised members, and to use her public position to that end.

When we wonder "Where are the child care workers?" look around.

They're out there; they just have to be "seen". We need to recognize them, tell them about ourselves, and invite them to join us in advancing our multi-faceted emerging profession ... Think about Princess Diana. She was one of *us*, too.



Too Much of a Good Thing

I love the English language, I really do. I love to read something so elegantly expressed that it takes my breath away: a perfect description, a stunning image, a thoughtful message delivered in a way that makes me marvel at the intellect of the writer.

When I write, I love to toy with phrases, turning them this way and that, kneading the language until it has the consistency and shape I am looking for. I'm not saying the end result is always particularly clever or poetic; but it at least pleases me, and that's a start.

On the flip side, I loathe tedious writers who seem to feel that if they pile on enough adjectives, sooner or later what they meant to say will become clear just through the weight of the descriptive burden they have imposed on their readers. We have all read books where we come to a page-long description of a city street or a country meadow, read the first two or three dozen words and said to ourselves, "Got it. Let's move on." and skimmed the rest of the paragraph.

Winston Churchill well known for being clever and succinct in conversation ("Yes, madame, I am drunk. And you are ugly. In the morning, I shall be sober."), once wrote a letter to a friend that went on for four pages. As he concluded the lengthy tome he wrote, "I am sorry this letter is so long. Had I more time, it

would have been shorter."

Winston Churchill understood editing. Not everybody does.

I went out for dinner the other night. It was what I would call a medium-scale restaurant, striving to climb the ladder. So, a good place to go with friends before a night at the theatre, but not necessarily the place you would take your partner to celebrate a milestone like a 25th anniversary or a 50th birthday. It was a nice restaurant with aspirations.

You could tell it from the menu. It came to us in a cover that was very close to being leather-like, with heavy vellum-coloured pages. And the menu was loaded with words that ... well, frankly, I think some of them were either invented, bastardized, misspelled or imported from another language. Words like "noisettes", "duxelles", "compôt" and on and on.

Let me just say this: if I would challenge the word in a game of Scrabble, I don't want to see it staring back at me from my plate.

The descriptions were hilarious; they were wordy and pretentious and almost indecipherable. I'm working from memory here, but here's what one sounded like to me: "Flame kissed, bee's honey swabbed organically raised pork medallions served with a horseradish/heirloom tomato compôt and lemon gratin something something garden leaf salad with

poppy something something dressing.”

Really? You couldn't say that more economically?

I understand that menus are written to attract diners to individual items, but I honestly don't think that works as well as they believe it does. I think it just makes more work for the servers, who have to translate the menu items so we will get the food we want and not inadvertently find ourselves staring at our plates at some sea creature we have never heard of and would not ingest willingly, or even at gunpoint.

Look, I don't need the provenance or ancestry of a given creature that will soon be in my belly. I don't need to know what spices the chef threw on it. Basically, all I want to know is: does it fly, walk, swim, or slither to get around? I can take it from there. Some big fancy description just makes me suspicious at what you're trying to foist on me.

I was particularly amused at one item: “Lovingly char-broiled ground Angus, nes-

tled in a bed of lightly seasoned garden tomatoes, crisp Iceberg lettuce and tart pickled cucumber, blanketed with aged cheese and served on freshly baked Caesar roll”.

Do you want fries with that cheeseburger? Or would you prefer, “Crisp, lightly seasoned potato wedges”?

I'm against tormenting or abusing servers in restaurants. I'm sure they roll their eyes at the food descriptions, too. But I am so tempted in those situations. I think it would be fun to talk like that.

I want to ask my server for a transparent cylinder of chilled, freshly drawn hydrogen dioxide from the house faucet. Perhaps point out that my hand-polished stainless steel cutting implement had a minor cosmetic imperfection in the form of specks of previously-served dining delights.

Then, with a satisfying release of gastro-intestinal air, I would take my leave. Because in the morning, I will be sober. But that menu will still be ridiculous.





Post Card from Leon Fulcher



Une Carte Postale de Provence et Carcassonne

Bon Jour Comrades! Even on holiday it's fun to watch how children and young people spend their time. As a former rodeo rider, I loved the white horses – des chevaux – found everywhere in the Camargue region of Southern France. At Easter break, many young people were engaged in pony trekking.



Jeunes gens avec des chevaux a la Camargue

School trips seemed fairly standard at this time for many young people, especially around Carcassonne and their famous Chateau which dates from the Middle Ages. Renovations for this medieval castle began in 1840, the same year that the Treaty of Waitangi was signed between Queen Victoria and the New Zealand Maori Chiefs! Chateau

Carcassonne, recognised as a World Heritage site, was renovated in the 19th Century. What an enjoyable visit!



School Holiday Picnic outside the walls of Chateau Carcassonne

Of course some youths aren't really into castles, art galleries or museums. Their place to hang out was at the exotic skateboarding facility located outside the walled city. Their SK8 chipé graffiti!

While returning to our guest house, we passed along a tree-lined boulevard where a children's play area had been con-



Carcassonne SK8 Board Park Antics

structed, complete with an antique carousel more than a century old. Young children were buzzing about and one in particular was enjoying her time on the seesaw. As we carried on, it became apparent that the father was keen to leave the play park, even though the child's mother seemed to be in no particular hurry. As father picked the little girl up, she started to cry because she wanted to keep playing. The young father shouted at the little girl to "Allez" – "Stop" and then walked off with the little girl crying. The young mother followed, silently, seemingly embarrassed by what happened. We saw father later, smoking with a mate, without the child.

It got me to thinking about how young people learn parenting skills, especially those with whom we engage in child and



Allez, Allez Enfant de Carcassonne!

youth care work. Sex education goes into the technicalities of safe sex and pregnancies, but not much goes into learning how to be good-enough parents. Without grandparent and parenting role models, young people are thrown into social situations which almost inevitably involve experimentation, and suddenly there are babies without any idea of what to do with them. Shouting at young children to STOP CRYING is thus explained without any idea about alternatives. Children who get shouted at frequently are more likely, as young parents themselves, to end up shouting.



Traditionnelle Puissements et Les Baux de Provence

At Les Baux de Provence – another medieval town on a cliff – a young man who had inserted himself into an early form of social punishment. In earlier times, it said “baddies” were locked into these stocks with an expectation that locals would walk by and shout at them. Different practices, eh?

But who would visit the South of France without checking out the famous vineyards of Provence? The wizened old grape vines struck me as amazing. Châteauneuf de Pape is near to Avignon where the Catholic Popes ruled over Catholicism for more than a century – away from the Vatican! Très bon vin!



The Start of an Abundant 2012 Châteauneuf de Pape Vintage

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EndNotes



Learning to give the children
permission to mess, experiment, play,
bounced back at me
and released me, too,
from my stuffiness and stiffness;
gave me permission
to mess, experiment, play.

“Imagination is everything. It is the pre-
view of life's coming attractions.
Imagination is more important than
knowledge.”

— Albert Einstein

This writer has recent experience of an alcohol dependent mother visiting her thirteen-year-old son in residential care. The visit became several hours longer than expected as the mother got behind a sewing machine and helped a staff member who was making curtains for a 17-year-old girl who was leaving residential care. The event was not planned. It was one of those “opportunity led” events that was recognised and facilitated by a thoughtful residential social worker. For a while, power relations were re-balanced and a little bit of self-esteem was found for a woman who is not capable for the moment of directly caring for her children. Imaginative ways to express partnership can be found.

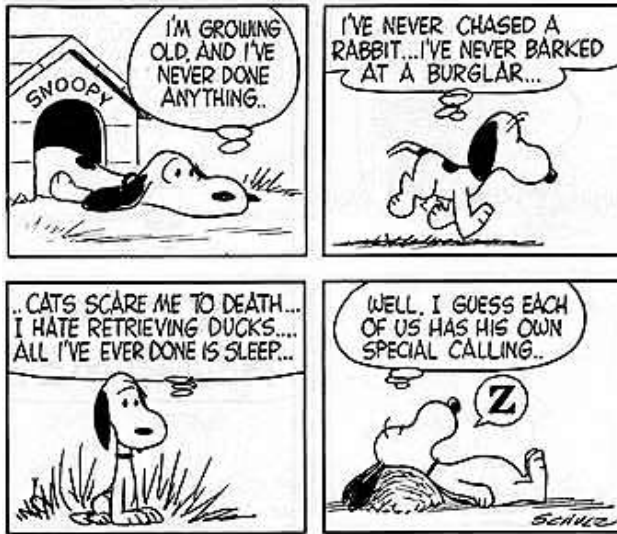
— John Gibson

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Good teaching is one-fourth preparation and three-fourths theater.

— Gail Godwin





Never put off till tomorrow what you can do the day after tomorrow.

— Mark Twain

Education would be much more effective if its purpose was to ensure that by the time they leave school every boy and girl should know how much they do not know, and be imbued with a lifelong desire to know it.

— William Haley

Affection is responsible for nine-tenths of whatever solid and durable happiness there is in our lives.

—C. S. Lewis

Do not ask that your kids live up to your expectations. Let your kids be who they are, and your expectations will be in breathless pursuit.

— Robert Brault

Being unwanted, unloved, uncared for, forgotten by everybody, I think that is a much greater hunger, a much greater poverty than the person who has nothing to eat.

— Mother Teresa

Who dares to teach must never cease to learn.

— John Cotton Dana

A man can't be too careful in the choice of his enemies.

— Oscar Wilde

The clash between child and adult is never so stubborn as when the child within us confronts the adult in our child.

— Robert Brault



Boy, Is he repressed?!

information

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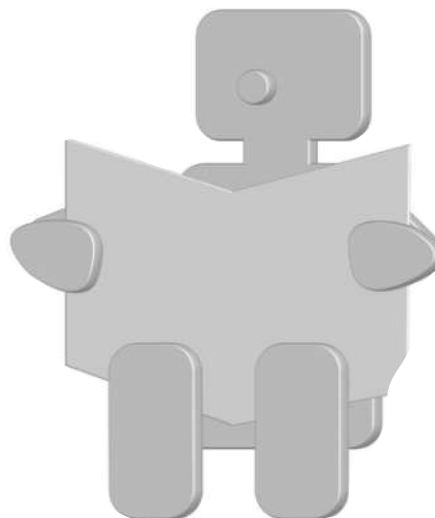
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