

CYC-Online

e-journal of the International Child and Youth Care Network (CYC-Net)

A young person with brown hair, wearing a blue button-down shirt and jeans, is sitting in a silver metal shopping cart. Their feet, wearing black sneakers with yellow accents, are propped up in the foreground. The background is a blurred outdoor setting with a paved path and some greenery.

**It's a Wonderful
World (of CYC)**

**Who Cares?
The Politics of
Disability**

**A How to choose a
CYC program?
An investigation**

**A Journal for those who live or work
with Children and Young People**

Issue 224 / October 2017



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*Happiness is not a goal ...
it's a by-product of a life well-lived.*

Eleanor Roosevelt



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A Limb has Fallen

James Freeman



Brian Gannon, the founder of CYC-Net, passed away on 28 September 2017. He was 78 years old. With just days since the news has begun to circulate, it is a wound still very fresh to his family and close friends. It is a loss to the field and the world for all who have been impacted by his life work.

As we pause and give space to feel the grief and loss of Brian, we offer this anonymous poem, which has been meaningful to many over the years:

A limb has fallen
from the family tree;
I hear a voice that whispers
'Grieve not for me'.

Remember the best times
the laughter, the songs;
The good I lived
while I was strong.



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Continue my heritage
I'm counting on you;
Keep on smiling
the sun will shine through.

My mind is at ease
my soul is at rest;
Remembering all, how
I was truly blessed.

Continue traditions
no matter how small;
Go on with your lives
don't stare at the wall.

I miss you all dearly
so keep up your chin;
Until that fine day
we're together again.

Brian had many roles in his life. Most importantly he was a father and grandfather to his family. He was a dear friend to many.

Brian also founded the network that brings us all together around a common purpose of serving young people around the world. I wonder if Brian's final challenge to us might be, in the words of the poem, "... continue my heritage ... continue my traditions ..." Brian gave us a valuable heritage in creating CYC-Net. We can honor that heritage today by continuing the tradition of reading, networking, and applying what we learn to become better at caring for the children and young people in our world.

Join with us as we pause and reflect on such a meaningful heritage and tradition.



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It's a Wonderful World (of CYC)

Kiaras Gharabaghi

Lately I have been thinking a lot about the tensions in my own Self between seeking a better world, better systems, better ways of being with young people while at the same time, acknowledging, celebrating and valuing all the good things, the extraordinary work and the notable accomplishments of our field. A friend reminded me recently to watch for 'cynicism creep', a process by which one becomes so embedded in one's own critiques that both Self and Other come to expect negativity. My reflective process has led me to develop, in my own mind, an inventory of the things I quietly celebrate in spite of the things I often criticize. I thought I might share them here, largely because I am seeking balance in my presence in the field I have come to love so much. So here are things that I can definitely say are always the foundation of anything I say and do, but I realize that this might not be obvious to those amongst you who have read my columns and other writings, heard me speak or have otherwise engaged with me. I will integrate into that list a few things that reflect my hopes for the (near) future.

- I. I am grateful for and admire the strengths of those who have, over the past fifty years, helped us move from a collection of multi-disciplinary ideas to a comprehensive framework for being with young people in relational and authentic ways. There are so many people who have made this possible, and most of those who have inspired me already know that they have; but some may not, and so I just want to mention by name the likes of Varda Mann Feder, Frances Ricks, Lorraine Fox and of course, the late Carol Kelly; my understanding of child and youth care and all of its nuances has benefited greatly from these people. My hope for the future is



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that we take the lessons learned, the ideas generated and the positions taken through the hard work of our friends and colleagues and engage with friends and colleagues now who will expand our horizons in terms of the intersections of identity, the critical perspectives on whiteness, colonialism and chronic structural oppressions. And I am delighted that we are in fact doing this, in ever expanding contexts and with ever increasing determination.

2. I am astonished by some of my contemporaries and their enormous contributions to advancing a democratic and meaningful way of being with young people under very diverse circumstances. For example, it has to be said that the National Association of Child Care Workers in South Africa has dazzled in its seemingly endless capacity to move an entire nation, and now multiple nations, toward life-space interventions and ways of seeing beauty, light and strength in even the most dire of circumstances. I am endlessly impressed with the unbelievable presence of some of my American colleagues across their own nation's service systems and across Canadian settings and international jurisdictions. Wherever I turn, I run into the open arms of James Freeman, Okpara Rice, Ben Anderson-Nathe and others. I learn every day new perspectives and positive ways of seeing and engaging with my favourite sector, residential care, through the endless optimism and positivity of my friends in Scotland and Ireland, including Max Smart, Mark Smith, Laura Steckley and John Digney. And across Canada, incredible but very humble leaders in our field make me feel more than just hopeful; Ernie Hilton in the East, Bill Carty in the Centre and Anton Smith and the fine folks from Oak Hill Boys Ranch in the West.

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3. I sometimes have to do a double take when I follow my Facebook friends who happen to be the movers and shakers of the Canadian professional association context for our field. They are everywhere, doing everything and they are tireless in their promotion of the field. Kelly Shaw is posting pictures from Nunavut while grading student papers; Christine Gaitens has, for so many years, worked to bring together Ontario's diverse CYC community and in the process has persuaded me and so many others that there is strength and capacity in our community; Wendy Weninger and her colleagues have quietly but always with open arms advanced the mission of the Alberta Association. And who cannot be impressed with the massive archive of pictures and commentary on the Canadian scene provided by Garth Goodwin over a period of decades. More than anything else, I hope that in our future we can continue to find these incredible individuals, and that they will add to our collective endeavour of being in the world that reflects the multiplicity of social locations and worldviews.
4. I spend a lot of time talking with and being with child and youth care practitioners who, in turn, spent much of their time talking with and being with young people. While the institutional contexts are often poor, their work surely is stunning. In Canada, in the UK, in Ireland, in Germany, in Africa, and, as I discovered a couple of years ago, in Sri Lanka, in spite of often frustrating circumstances, child and youth care practitioners show up, accept the limitations of context, and still manage to connect, to offer warmth and to commit to the journey. My hope for the future is that we can maintain their empathy, their determination and their courage and add to it a real, meaningful and impactful participation culture for the young people we ultimately hang out with. This, I think, will help to re-shape often unfortunate institutional and policy contexts that don't seem to work too well for anyone.



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This is obviously not an exhaustive list of what I think is wonderful in our field. But it is the foundation of everything I think about. Sometimes I become frustrated with the incongruence of structure and even culture to the values of relational practices and life-space interventions. But most of the time, I remind myself that many good people are doing many good things that ultimately add up to this really being a wonderful world, at least as far as the field of child and youth care is concerned!!

KIARAS GHARABAGHI is the director of the School of Child and Youth Care at Ryerson University and a regular writer for CYC-Net. He is the author of the chapter 'External Models of Supervision' in the recently released book, *Supervision in Child and Youth Care Practice* (Charles, Freeman & Garfat, 2016). The book is available at <http://press.cyc-net.org/books/supervision.aspx>.



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The Question of Community Involvement

Hans Skott-Myhre

I have been giving some thought lately to what we mean when we talk about community involvement. The idea is very clearly near and dear to funders, agency boards and those of us working as academics or consultants. But, how does involving the community really play out on the ground in concrete and material terms? Who do we mean when we talk about community? What are the limits and boundaries on who can be involved in our day to day operations and who determines the policies and procedures of our institutions. How do the characteristics of CYC, so ably articulated by Thom Garfat and others, function when applied to the relationships we have with those outside the direct influence of our programs? Are our programs insular spaces that ensure safety and order by exclusion? Or are they deeply, consciously, and materially entangled in the life world of the neighborhood and broader communities of families and other social institutions that surround and provide the young people we engage in our work? Finally, who has a place at the table when decisions are made about who we serve, how we pick who works within the agency, how funding is distributed, and the hours and locations of our programs? Are we democratically inclined institutions genuinely responsive to our constituent community? Or are we bureaucratic autocracies centrally concerned with the survival of the agency and our careers?

Obviously, the answers to these questions and others pertinent to community involvement are far more nuanced and complex than the rough binary oppositions I have sketched thus far. That said, I would argue that the reductive dualities of inclusion vs exclusion and democratic vs bureaucratic do have some merit in



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beginning to think about how we might pursue community involvement. There are no neat and tidy answers, conclusions or rubrics that can guarantee appropriate or even ethical degrees of community involvement in our CYC institutions, but there are intriguing examples of programs that have tried. I want to tell three such stories, one of which is a CYC institution, the second is a family centered program and the third is an example of DIY CYC rooted in the lived experience of a community.

From Psychotic City to City Inc.

The mid to late 1960's was a time in which we saw the emergence of grassroots programs across North America and Europe. Crash pads for runaways, such as those provided by groups like the Diggers in San Francisco, proliferated among an array of alternative programs largely instigated, funded and run by non-professional activists, parents, clergy and teachers. One of these was a youth club in Minneapolis Minnesota set up in 1967 by parents whose children were in the juvenile justice system. They called the club "Psychotic City." The development of this youth club was not in response to government funding initiatives, state mandates or the availability of insurance funding. Instead it was created out of the material needs of the very people it would serve. Of course, in Britain there has been a long tradition of such community based youth work (regrettably currently under considerable assault), but in the United States these youth focused clubs were a fairly radical innovation.

What was unique about "Psychotic City" was that the grassroots impetus of its origin story persisted over several decades. Although the club changed its name to just "The City Inc." and expanded its programming, it maintained a strong affiliation with the neighborhoods and populations served. Under the leadership of Jim Nelson, "The City Inc." maintained that the agency's development should be driven by the needs and aspirations of the community in which it was imbedded. Further, the agency persisted in taking seriously the struggles of the community and made sure that those struggles were reflected in the agency's evolving mission and



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structure. This meant that the agency intended to wrestle with the tensions derived from the interaction between the agency, the community and governmental agencies and funders.

This was reflected perhaps most dramatically when the community, in which “The City Inc.” was embedded, began to struggle with gang violence in the 1980’s. I would like to pause here and ask us to reflect on the question of our own accountability to community under such conditions? Are we to ally ourselves with the justice system and the police, which may well be seen as an occupying force by the community we serve? Do we ally ourselves with the anti-gang activists and potentially alienate those young people involved with gangs? Do we take a neutral position and try to create ourselves as a safe gang free space? Does this place us as outside the living material struggle of those we serve or does it create a space of sanctuary? These are deeply troubling and vexing questions that every program that works in a community deeply entangled with gangs has to engage or ignore at the risk of becoming irrelevant to the very young people they are trying to serve.

Jim Nelson’s answer was rooted in the genesis of the agency as deeply involved in the lived actualities of the neighborhood and communities they served. There were two groups that he could see that young people looked to for leadership. On the one hand, it was obvious that the gang leaders had immense influence on the day to day life of the young people “The City Inc.” served. He also saw that there was a large population of indigenous families that looked to aboriginal elders for leadership. So, Jim did something crazy. He hired the leaders of key gangs into leadership positions in The City to recognize their functional role as leaders within their community. He also, at the same time hired aboriginal elders in key positions for the same set of reasons. In doing this, he acknowledged the actuality of political and social relations in the community the agency served.

It was an extremely controversial move, but it began to give the agency a powerful legitimacy within the community. Young people and families could see that their lived experience was being taken seriously. “The City Inc.” was able to broker peace between gangs for a period of time and to involve gang leaders in



community development projects. In the end, due in large part to the unpopularity of Jim's initiative with law enforcement, the project failed and "The City Inc." was undone and Jim's leadership of the agency terminated. (I will refer anyone who is interested in what happened to Nicholas Saray's M.A. thesis at Brock University for the details of the unraveling of The City.) However, both the success and failure of "The City Inc." raises questions about how seriously we take community involvement. How far would we go to engage the "real" leaders in the communities we serve? Complex questions indeed.

Who Gets Hired and Who Decides

In the case of the City Inc., Jim Nelson, as the Executive Director, made a courageous, although some might say dangerous, decision about who to hire in his agency. But, is the executive director, CEO, program director, or even staff the most qualified to decide who should serve a community? Jim Nelson was known for asking us to reflect perpetually on the question, "who calls us to serve?" What gives us legitimacy in the eyes of a community, a neighborhood, a young person? In Jim's case, The Psychotic City was called forth by the actual community who directed and shaped it in its early years. As time went on, Jim made sure that the community was directly involved by including leaders called by the community on staff. But, how do we decide who gets hired and why?

When I reflect on these questions, I am reminded of a story I was told by Charles Waldegrave from The Family Center in New Zealand. Charles was hired to direct a program that did family work using traditional family therapy techniques that involved a one-way mirror and a team of therapists. They had reasonably good results with non-indigenous populations, but were having significant issues addressing the needs of the Pacific Island and Maori families who came to the clinic.

Charles decided to seek guidance from an elder in the Maori community he had come to know. He invited him to sit behind the one-way mirror and observe some sessions of the staff working with Maori families. After a short time, the elder just burst out laughing and said this cannot work. Charles then asked him if he would



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be willing to train his staff in a more culturally appropriate way of working. The elder told him no. He said, the agency needed to hire a Maori counselor to work with the Maori seeking services. Charles agreed to this and put an ad out for just such a counselor.

When the Maori elder saw the ad, he came to Charles and said, you cannot pick who this person will be. Our community will send you someone we have selected. If you don't accept who we send, no Maori will come to seek services from you again. The way that you are working is not only ineffective, it is harmful. Of course, what was being suggested violated a whole range of labor laws, but Charles persisted and was able to do what he had been asked and the agency began a long process of decolonization. (I would refer anyone interested in that work to the writings of Charles Waldegrave and Taimalieutu Kiwi Tamasese.)

How many of us consult with our community in meaningful ways about our practices and modes of treatment? How many of us would be willing to simply turn over our work to a someone selected by the community; a gang leader, an indigenous healer, a member of the clergy; a grandmother? Do we know better than the community who should serve them? Outside of token membership on our boards, do we seriously engage young people, community leaders and parents in the hiring of staff and the development of CYC practices and program development? If we don't, can we say that we are meaningfully engaged with the communities we serve?

Who are the Youth Workers?

Of course, not all youth workers are hired by agencies or programs. Some of the best CYC work is done by adults and young people unaffiliated with CYC as field or as a profession. I have recently written in this column about the realistic and spot on fictional depiction of exemplary CYC work in the film *Short Term 12*, which takes place inside a residential treatment center. In this column, I want to reference another recent movie that I think shows some of the best youth work I have seen depicted on screen. The film is *Moonlight* and it adds a dimension to our



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discussion, because the youth work done is instinctual and utterly outside the parameters of any institution. Unlike short term 12, it is based on an actual set of events as recounted in both an autobiographical play *In Moonlight Black Boys Look Blue* and in the movie as an adaption of that play.

The storyline of the movie follows three stages in the life a young man named Chiron or “Little” growing up in a very rough part of Miami. It traces his struggles with poverty, sexuality and bullying. The film opens when a local drug dealer named Juan finds Chiron hiding from bullies in an abandoned crack house. From a CYC perspective, are some notable things about this opening sequence. As the film opens, Juan is checking in one of his corner drug dealers, when Chiron runs by being chased by a group of other children. Juan notes this, but doesn’t appear to pay it any particular attention. However, he clearly has noticed it, because he follows shortly and finds a very frightened and withdrawn Chiron in the abandoned apartment.

Like a good street outreach worker, Juan is extremely attuned to his environment. He doesn’t miss much and he has a sense of when and how to intervene. When he first enters the apartment, Chiron won’t speak to him. The timing and pacing of his conversation with this frightened boy is an exemplar of Mark Krueger calls the dance of CYC. He never forces the interaction, but very gradually uses timing and humor to get the boy out of the apartment.

The next thing he does is classic CYC. He takes him to a restaurant and feeds him. When Chiron still won’t speak to him, he takes him to his own home. In the car ride, Juan and Chiron don’t speak but there are key non-verbal exchanges of glances that begin to build trust and relationship.

Juan, however senses that he has gotten as far as he can and does what all good CYC workers know to do, he brings in a colleague to shift the dynamic. In this case, it is his girlfriend Teresa. When she goes out to the car in order to bring Chiron into the house, she does not go to his side of the car, but gets in on the driver’s side and just sits there in comfortable silence for quite a long time before speaking to him. He still is not talking so ... they feed him.



It is while he is eating that Chiron begins to talk by telling them that his name is Chiron but he is called “Little.” Teresa responds by telling him she is going to call him by his name Chiron. This small gesture is deeply meaningful in that Teresa is respecting him by not using the name associated with his bullying.

The film is complex in many ways. There is Chiron’s mother’s addiction, Juan’s role as her dealer, and Chiron’s sexuality. In a series of powerful scenes these all come together when Juan confronts Chiron’s mother about her addiction and its impact on Chiron and she confronts him on selling her crack in the first place. She also tells Juan she believes that Chiron’s bullying is because he is effeminate. She goes home and takes her frustrations out on Chiron who runs away to Juan and Teresa’s house.

At the dining room table with Juan and Teresa, Chiron tells them he hates his mother and then asks what “faggot” means. In a masterful piece of CYC work, Juan explains that faggot is a word that people use to make gay people feel bad. Chiron then asks “Am I a faggot?” Juan responds “No, you may be gay, but you don’t let nobody call you no faggot.” Chiron asks how he would know if he was gay. In an utterly brilliant application of what Jack Phelan would call developmentally relational CYC, Juan tells Chiron he will just know. Then Teresa says, “You’ll know when you know” and Juan says “You don’t gotta know right now, not yet.”

There is, of course much more to the film, but I want to highlight the possibility that there are members of community, many of whom we may demonize who are doing good CYC work under our very noses. It isn’t just those of us who choose to do this as our profession, CYC work is done every day by people who would never know to call it that. In some ways, their entanglements with each other are more complex than the bounded world of the agency or institution, but perhaps not. I wonder whether we really engage these DIY CYC workers as much as we could. Do we really see these people when we practice what Janet Newberry advocates as resource mapping our community? If not, perhaps we should.

Community involvement is a complex and at times troubling aspect of our work. It can challenge our institutional definitions of ourselves and ask us to truly



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take seriously the questions of relational ecology and love in our work. In this, it affords us the opportunity to do the work in the way we say we mean to. Of course, that is always our intention but not always our practice.



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Who Cares? The Politics of Disability

Robin Jackson

There is scarcely a week that passes when there is not an article in one of UK's more serious broadsheets – *The Guardian*, *The Independent*, *Herald Scotland* – highlighting a range of problems confronting children and young people who have a learning disability or their families. It might be a reasonable expectation that someone somewhere would sit up and take notice. But in an age dominated by the social media - who has the time or inclination to read full length broadsheet articles?

I am not aware of any of the hundreds of such articles that have been written by social affairs correspondents that have had the slightest effect on government thinking – let alone policy formulation or government action. In any event such articles are usually dismissed by the right-wing governments of recent years as propaganda emanating from left-wing inclined papers. For their part, the right-wing papers feed the growing hostility shown toward people with a disability with lurid articles claiming that people with disabilities are deliberately seeking to defraud the benefits system. These articles succeed in fuelling the frenzied, vicious and spite-laden rhetoric employed on social media in relation to people with a disability.

In any event, governments are not in a listening mode as far as people with a learning disability are concerned. A highly placed senior civil servant recently let slip to the Chief Executive of the National Development Team for Inclusion that successive governments have paid little attention to the needs of this population as it is numerically too small. Thus, their needs are not perceived to be strong enough to register on the government's Richter scale (Jackson, 2015; 2017).

However, there was one recent event that did register on the government's Richter scale and that was the seismic shock occasioned by the publication of the



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report by the UN Committee on the Rights of Persons with Disabilities that examined the impact of recent legislation on the quality of life of individuals with a disability in the UK. Early in 2012 the UN Committee had begun to receive information from grassroots organizations in the UK representing people with a disability about the adverse impact of the implementation of a series of social policy reforms introduced by the government.

The UN Committee, which arrived in the UK in 2015, took evidence from members of the House of Commons, the House of Lords, members of the devolved legislatures, representatives of trade unions, representatives of organizations of persons with disabilities and other civil society organizations, researchers, academics and lawyers. The UN Committee expressed its regret that the UK government had deliberately postponed its meeting with it until the very last day of its visit! For its part the government did everything in its power to disrupt the work of the UN Committee by preventing local governments and health authorities from participating in the Committee's work. When the findings of the Committee were published the government dismissed them out of hand. The right-wing press concentrated on questioning the credentials of individual members of the UN Committee.

What is significant is that not one of the major disability charities in the UK was involved in extending the invitation to the UN Committee to visit the UK. This may well have been because the large UK charities are financially dependent upon public funds and are reluctant to be seen to question government policies. Thus, it



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was left to small organisations like Disabled People against Cuts (DPAC) and other grassroots organisations to extend the invitation.

What is not in doubt is that there is an urgent need for the major charities in the UK to be more assertive and challenge government policy when and where it is seen to be disadvantageous to people with a learning disability and their families. And charities should certainly avoid arrangements with government agencies that have the potential of threatening their own operational independence and functioning.

Whilst the major charities have shown themselves to be ineffective in speaking up for people with a disability, what about the impact of advocacy programmes purportedly established to represent people with disabilities? The problem here is that many advocacy schemes are dependent on funding from health authorities and/or social work departments which impose tight contractual arrangements limiting the operational independence of advocacy schemes. There is an additional danger where, through a process of assimilation, advocacy schemes are simply swallowed up and are indistinguishable from the health authority or social work department funding them. A further problem is the existence of certain self-advocacy organisations – one well-known international body – which has stridently pursued a very narrow radical agenda and in doing so has alienated many sympathetic to the case for advocacy.

Whilst there is very little evidence that advocacy organisations have had any significant impact in shaping government policy, there is clear proof that certain lobby groups have had a measure of success. Perhaps the most significant intervention in this regard is the 1981 Education Act which for the first time recommended the inclusion of pupils with special educational needs into mainstream educational settings. This emphasis resulted in large measure from the intervention of a lobby group representing people with a physical disability (PHAB: Physically Handicapped and Able-Bodied). Not only did this lobby determine the general direction of legislation, but it also helped draft some amendments to the Bill, which were subsequently incorporated into the Act. This disclosure was made



by the civil servant at the Department of Education and Science, who was responsible for steering the Bill through its various parliamentary stages (Rozenberg, 1981).

What is revealing about the 1981 Education Act is that the Committee of Inquiry, chaired by Mary Warnock, which laid the foundations for this Act sponsored no research! And in that regard it differed significantly from all previous committees commissioned to examine important aspects of the British educational system. The absence of research may not be unrelated to the fact that the person responsible for setting up the Committee of Inquiry was Margaret Thatcher. On frequent occasions she had communicated her lack of enthusiasm for research which she saw as both costly and time-consuming. It was Mrs Thatcher's antipathy to academic research and her refusal to provide funds required to support university research that contributed to the unprecedented refusal by the Senate of Oxford University to confer an honorary doctorate upon her in 1985.

There is a certain irony in the fact that when giving the 2005 annual lecture to the General Teaching Council for Scotland, Mary Warnock stated: "no serious suggestions for reform can be made without proper research and a proper reliance on evidence." Soon after the introduction of the 1981 Education Act, Mary Warnock openly acknowledged that no evidence was presented to it that placing children and young people with special needs in mainstream schools would be beneficial.

The danger is that the parameters of research are too often set by the funder (i.e., the government), particularly the time-frame within which research has to be undertaken (Humes, 2013). Government departments sponsoring research are unlikely to be too concerned about the finer points of research methodology, as their principal aim is often to placate their political masters and demonstrate that something is being done. If the results of research are politically embarrassing, they can always be shelved, notwithstanding the fact that public money has been used to fund the research (Jackson, 2017).



In this writer's opinion, the politicisation of the research process makes inevitable the production of compromised and flawed research. The situation is further aggravated where researchers let the evident ideological inclinations of sponsoring government departments influence not only the way in which research is framed and conducted but also the way in which the findings are subsequently presented and disseminated. But this is not a new problem as Professor John Nisbet persuasively argued over 20 years ago when he claimed that "he who pays the piper determines the tune" (Nisbet, 1995).

It is true that in recent years there has been no shortage of discussion in academic circles of the meaning of quality of life as it relates to people with a learning disability and ways in which it can be realised. The topic has been the subject of numerous seminars, conferences, journal articles and books (Schalock and Verdugo, 2002; Brown, I. and Brown, R. 2009; Johnson and Walmsley, 2010; Kober, 2012). Yet there is very little evidence of field research that has sought to examine ways in which the lives of children, young people and adults with a learning disability can be enhanced. Paradoxically, whilst there has been widespread academic interest in discussing this topic, the quality of life of people with a learning disability continues to deteriorate. In other words, there appears to be a profound disconnect between academic interest and the realities of the present world.

In my opinion those who have a professional interest in learning disability research should assume a higher profile at a time when the quality of life of people with a learning disability and their families is under threat (Jackson, 2011). This can be done in a number of ways through:

1. the establishment of demonstration projects, either independently or in association with the voluntary and statutory sector, to explore innovative and practical approaches to enhancing the quality of educational and social care services offered to children and young people with a learning disability



2. looking at ways of improving the quality of training programmes for professional staff by moving away from current approaches that emphasise narrow instrumental competences to strategies that develop essential expressive and relational aspects of practice
3. offering a more considered and rigorous critique of current professional practice and assuming a leadership role at a time when leadership in this field is lacking.

It is time to drop the ritualistic plea for further research that routinely concludes most research papers and government reports, for it is often not more research that is required but appropriate and timely action on the findings of past research. This could lead to scarce financial resources being more profitably directed to improving services for children, young people and adults with a learning disability. At a more fundamental level, the question arises as to the *raison d'être* of learning disability research itself, given the increasing politicisation of the research process to which reference has been made. Further, the application of the purchaser-provider model to the research process prompts concerns as to the credibility and ethical propriety of often one-sided contractual arrangements entered into by researchers which can only work to the benefit of the purchaser.

The question also arises as to why some parts of the research community with a professional interest in the field of learning disability appear to have voiced so little concern about the many adverse trends that are clearly discernible. The argument that such intervention might compromise the academic detachment of the research community by leading it into the political arena is not persuasive. Through its uncritical acceptance and promotion of current practice, the research community long ago forfeited any claim to be acting with scholarly objectivity.

A particular cause for concern in the UK is the increasing tendency of central government to outsource health and human services. However numerous state and local governmental entities are belatedly discovering that turning over these programmes to private contractors not only fails to achieve projected cost savings



but also decreases access to these important services, hurting many vulnerable families. In many cases, the service quality declines dramatically and many sick or at-risk people are left with substandard care.

In the present political and economic climate in the UK there seems to be a certain inevitability that these large companies (e.g., Atos, Capita, G4S and Serco) will seek to exploit what is seen as a growing market – particularly in the field of residential care. For such settings to be financially attractive to these companies they will need to be of a sufficient scale to confer clear monetary benefits.

Criticism that the creation of large settings constitutes a return to institutionalisation is likely to be countered by government arguing that such provision is urgently required and that steps will be taken to ensure that satisfactory standards are maintained in such settings. Given the track record of the companies likely to be involved, one can be confident that high standards will not be maintained and that the discredited regulatory body charged with the responsibility for enforcing such standards – the Care Quality Commission – will be no more successful in monitoring the performance of these new forms of provision than it is in maintaining acceptable standards in existing provision.

What we are witnessing here is the phenomenon of ‘warehousing’ where people with care needs are located under one roof in order to reduce the costs of providing them with the supports they require (Brown, 2017). The word ‘warehousing’ captures the repulsion most people feel about being forced into institutional care, losing privacy and autonomy. The tendency to see people with a learning disability as objects rather than complete people leads to the view that they are less than human. Once the validity of the economic argument lying behind the ‘warehousing’ model is conceded then logically there is nothing to prevent the creation of larger and larger ‘warehouses’. If this model is adopted, it is unlikely to take the form of the sturdily constructed and imposing Victorian edifices, many of which are still standing in different parts of the UK either as spectacular ruins or as converted private (often luxury) accommodation.



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Conclusion

In writing this article I am conscious of the fact that I am also reflecting on 'the state of health' of democracy in the UK. What emerges is a country in which successive governments have exhibited scant concern for those in our society who, for whatever reason, find difficulty in fending for themselves. Amongst this growing population are people with a learning disability and their families.

As I have sought to demonstrate, successive governments have rendered mute and ineffectual those bodies which purportedly seek to represent the interests of children, young people and adults with a learning disability. Increasingly the provision of a wide range of services catering for people with a learning disability is being outsourced by government to monolithic, profit-seeking and democratically unaccountable organisations possessing an abysmal record for the quality of the services they provide.

While there are examples of innovative and inspirational day and residential services and pockets of excellent professional practice on the UK, they exist within a rapidly contracting sector. A climate has also emerged in which the level of tolerance and support for people who exhibit differences – whether intellectual, racial, ethnic, religious or sexual orientation – is declining.

In the two decades following the end of the Second World War it can be claimed that we had education, health and social services that sought to meet the needs of the whole population and actively encouraged research to find ways of best delivering these services. That radical impetus has long gone to be replaced by a succession of governments that appear to be more concerned with protecting the interests of the favoured few and in the process creating an increasingly polarised society. If there is not a reversal to current trends then there is a strong probability that we will return to the situation that existed in pre-war Britain when children, young people and adults with a learning disability were a neglected and unfavoured population.



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ROBIN JACKSON is a Visiting Research Fellow at the University of Hertfordshire, England. He recently co-edited with Maria Lyons the book *Community Care and Inclusion for People with an Intellectual Disability* (Edinburgh: Floris Books; 2016).

Any brave-hearted individual who wishes to follow up on some of the issues raised in this article will find a more detailed and evidenced discussion in the report "Back to Bedlam: What kind of future faces people with a learning disability?" It can be found at: <http://www.centreforwelfarereform.org/library/by-az/back-to-bedlam.html>



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A How to choose a CYC program? An investigation

Doug Magnuson and Jenny McGrath

It is the season of anticipation for new CYC students in Canada, and it is also a season of surprising trust. Students commit \$10,000 to \$35,000 in tuition and 2-4 years of their lives, plus living expenses. Impressively, most do so without much information, experience, or help. Most have not yet seen the work. The experience of learning CYC in the classroom is likely opaque. They do not know the instructors or anything about the quality of instruction. Unintentionally, CYC programs demand some level of compliance and faith.

It might be better for them, for CYC programs, and for the field if we expected more and if CYC programs, colleges, and universities provided more. A change in approach may set a better tone. Instead, what if we treated the choice of institution and program as an investigation? What if we asked CYC programs to explain the education and the work and asked faculty to document their effectiveness?

We want to think about how CYC is operationalized. We ought to have access to the course outline for every course, on the website. Syllabi are one way that the program makes concrete its ideas about CYC. These represent the program's understanding of what students need to know and how they think students best learn. We want to review at least a sample of these syllabi. One way to sample is randomly--selecting, say, a third or one-half of the syllabi. To this we might add a purposeful sample by selecting unique courses, perhaps these:

- The Intro to CYC syllabus provides a quick snapshot of the local definition of the field.



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- The Ethics course syllabus communicates something about the program's sense of responsibility and to whom.
- A Groupwork course is an exemplar of practice ideals.
- The field work course syllabus illustrates local understandings of practice and theory.

From these we would gather the course goals, assignments, and readings. From the course goals we can learn much about what we are expected to learn as a student. A list from a sample of syllabi would tell us much about what the program thinks is important.

It would be useful to locate readings from some of the courses. If we have access to an academic library we can usually locate many of them. (Alternatively, Google Scholar provides at least a summary.) Many public libraries have access to at least one or two academic search engines. Information from these may help us to think about whether the ideas are compelling—and what the program thinks is most important.

From the assignments we can learn whether learning is a) usually organized as individual work or in teams; and b) conceived as the acquisition of knowledge and skills, participation in shared practices, development, critical examination, experience (there are many more). We can learn what kind of “products” are thought to be important.

Another method of sampling is to ask permission to sit in on some classes. Pick two or three different courses, picking the course and the day at random. Is this how we want to spend our time? We can also ask for a list of the program's practicum sites, or at least which agencies and programs participate. Then look at the agency's website.

There are other options to more fully complete our picture. We can look at faculty members' work histories. What do their activities (service, leadership, research) tell you about what they think is important? Pay special attention to their most current activities.



Look for/ask for data about the demographic composition of students in the program. Ask for the table or figure from the official report. In some places this is publicly available. Ask for the average GPA in undergraduate courses. If it is surprising, either high or low, ask someone to explain why.

We should compare the list of faculty and instructors on the website to the instructors assigned to the courses in the past year. These can be found in the online registration system. Do the lists overlap? If they do not, it probably means that part-time instructors might be teaching most of the courses. We want to find out the reason for it before drawing conclusions. Also, it would be nice to find instructor qualifications for particular courses. The basic idea is simple: If Jane is teaching groupwork, what are her qualifications, and is there any evidence that Jane has ever done groupwork?

We ask for data about where the program's graduates are working. Not everyone will have it, but universities and, increasingly, many colleges are collecting it. Here too ask for the report rather than relying on the lists provided on websites. Look for the proportions. For example, you want to find out the proportion of graduates who work in particular fields. If school counselor simply appears on a list, we do not know if it is one person out of 200 or 100 out of 200.

Almost every program has some kind of curriculum map or matrix that includes overall goals, skills, knowledge, and values aligned to each course. I would ask to see a copy. This would save some of the work, because in one place it would include much of the information that is spread around in other places. Finally, even if I only have one program choice, I would want to do as much of this work as possible for another program or two, just so I can see how my program compares.

These activities produce information that is the difference between data and anecdote. Anecdotes are often motivated: that is, the author has an interest in how it is received. Anecdotes often close down interpretation. Data can be motivated as well, but organized and available systematically it is less subject to manipulation and can be interpreted independently and openly.





**NEW
RELEASE**

Intentional CYC Supervision A Developmental Approach

Jack Phelan



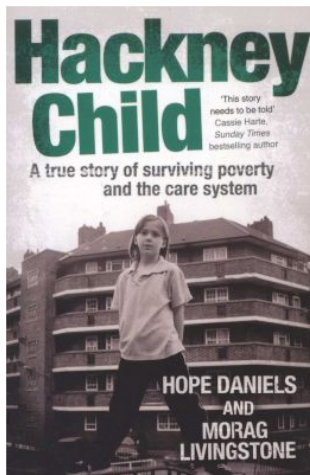
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Poverty and Neglect in Childhood: A Review of *Hackney Child*

James Freeman



Daniels, H. & Livingstone, M. (2014).

Hackney child: A true story of surviving poverty and the care system.

London: Simon & Schuster. 261 pages.

Hackney *Child* invites readers into the inner world of a childhood impacted by poverty, homelessness, and addiction. The book is organized around a collection of notes from the case files of Jenny Malloy (aka Hope Daniels) along with vibrant memories she recalls from formative stages of her development.



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In them she shares deeply private moments with the reader. The book may seem somewhat segmented in places, but offers meaningful insights into the experience and vulnerabilities of a child living through difficult circumstances.

Accessing and reading her case files was of particular importance to Hope. At 18 and again at 22 she reviewed them thoroughly and shares how she has been “obsessed with reading [her] social work files” (p. 9) ever since the day she was placed into care. She wanted to know:

How did they record decisions I made out of fear, low self esteem or just to buck the system, about when I ran away and the other times I rebelled...is this all documented? Did they note that I almost became a lawyer? How did they write about me? Were they kind? Were they professional? What did they think of my mum? My dad? Did they see past the laughter and the overconfident, capable youth to the scared child inside, who just wanted to be noticed, to be loved? (p. 13)

And again toward the end:

Being kept outside, not knowing, is driving me mental. Every time they discuss me behind closed doors, I feel like I'm trapped, caged, and all the control over my life is taken by the decision-makers next door. (p. 229)

If nothing else is learned by the reading the book, it may be the importance of including individuals in discussion about their own planning and care.

Experience in family life

The historical context of the narrative is in inner-city London, specifically the north-east borough of Hackney. It's the 1970s and 1980s and racial tensions are high (for example, Hope's parents forbid her from talking or playing with black neighbors - a condition she disregards to make friends). Hope's father is struggling



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and unemployed. The blame for their circumstances in his opinion is to external forces and he has hope they will one day be recompensed. Immediate family for Hope includes her father, mother, and three brothers - two younger and one older.

On more than one occasion the family is expelled from their neighborhood as a result of her parents prostitution or stealing. In one situation she describes the emotions behind watching them across the street from school with all their belongings packed into in a stroller: “at that time I didn’t know why we kept moving ... but at least they took us with them” (p. 34). Hope details her experiences moving into a family shelter, afternoons in a youth program, her mothers coming and going to prison and hospital, and her parents daily struggle with alcohol abuse.

There are moments of joy in Hope’s life. She finds herself dancing in the kitchen to celebrate a chicken dinner (p. 39), overjoyed with a new doll and clothes from her dad (p. 56), and making a game of treasure hunting while searching for vegetables growing in the local cemetery (p. 59).

Reflecting on these experiences she writes, “Each detail...will fill me with pleasure for many years, until sadness replaces the feeling in later years, when I realize that finding food should have been an adventure, an add-on to childhood, not a necessity or a lesson in resourceful survival” (p. 60). The family rhythm is driven by the arrival of weekly social welfare payments. When they arrive on Monday, her parents head to the bar and the kids look for money left behind to buy dinner.

Hope shares about the intensity and pain of being hungry. She also explains that she shares a bed with her parents, sometimes sleeping alone because they are out drunk and at least once having to pretend she was asleep at the foot of the bed while her mother engaged in prostitution next to her. Hope maintains a deep love and connection with her father, a unique complexity in the family context of abuse and neglect.



Experience in care

Chapter 10 is a pivotal chapter where hope is placed into care after taking her two younger brothers to the police for protection. In care she begins to experience a sense of belonging: “I always thought we were alone...it’s nice to know that there are other kids like us who know what we been through” (p. 133-134). Yet there is a contrasting tension: “Sometimes at night, just before I fall asleep, a feeling of being all alone creeps into my bedroom. In the dark, I feel I have lost everything, and that it is all my fault” (p. 139).

Her experiences are both positive (e.g. she is safe, warm, and can depend on regular meals) and negative (e.g. she is anxious about family visits and is disappointed by changes in the care staff). The impact of each exchange with others is determined by the varying qualities and approach of the adults supporting her.

She begins to develop trust with some (p. 154-155) and with others grows fearful, as with one supervisor who has a tone of voice “strong enough to hate you” (p. 160). Hope insightfully walks the reader through her dreams of being part of a loving family, being placed in a secure unit, and of learning her parent’s own history. She shares deep insights into her process of making meaning of her experiences and her decisions about who (and if) to open up to and trust.

Meanwhile the reader witnesses the system failure to support change at the family level. Her parents, for example, falsify family outings to steal money and provide Hope alcohol while on home visits. She later visits home as a young adult finding that not much changed while she was away (p. 237). Many decisions are made without her involvement and she experiences transitions within the care system that don’t seem to make much sense.

Conclusion

Hackney Child is a bold and transparent story of the impact of poverty, homelessness, and addiction on the life of a child. Because it is shared from the voice and perspective of a young person, it provides opportunity for the reader to engage with empathy and understanding. Thoughtful child and youth care



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practitioners will be able to learn from both the things that worked well and what didn't go well.

There are a number of twists and turns in this book which make it engaging, and the vulnerability of the author makes it extremely thought provoking. The book is a valuable contribution to the field, especially for helping practitioners understand and listen to the voice of individual children and youth. The book ends all too soon, in a sense, because Hope's story is still unfolding, as it is for each of us. Those who care about understanding and supporting young people today will benefit from her generosity and transparency in sharing her story.

Questions for individual and group reflection

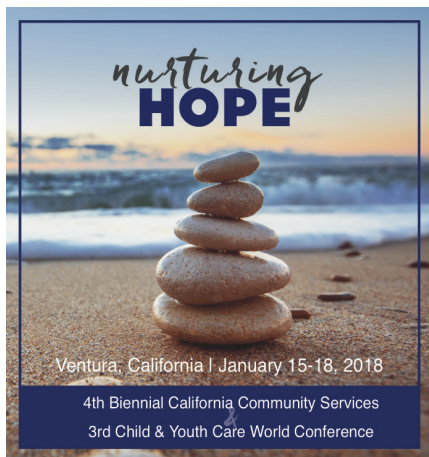
There are many themes and topics in the book that lend to discussion and learning. Below are a few discussion starters for use in personal reflection or small group discussion.

- How would you describe Hope's relationship with her dad? Would you describe it as a loving relationship? What about him did she seem to adore?
- What family secret did Hope discover in chapter 8? How did what she learned impact her own perception of herself and her mother?
- What characteristics did other adults (e.g. social worker, police, care workers) demonstrate that were positive or helpful? What are the dynamics that built or destroyed trust in her relationships with her care providers (see especially p. 154-155)?
- Hope was concerned when others discussed her circumstances and her future without her being in the room (see p. 143). Why was this important to her? In what ways might she have been better included in decision making?



- What agreements does Hope make in her own thinking (see, for example, p. 110, 139, 150, 184, 248)? How do these agreements impact her thoughts and actions?
- Re-read pages 160-162. What about Hope's thoughts is resulting in her feeling "stuck"? What are the feelings, thoughts and beliefs behind her outward actions? How might a caring adult be helpful in this moment of her life?
- What about the change of staff on Hope's thirteenth birthday was devastating (see pages 176-178)? How could this situation have been made less traumatizing?
- How would you describe Hope's strength of character (e.g. determined, caring, curious)? What about her was resilient, contributing to her survival as well as her growth as a unique and strong individual?

JAMES FREEMAN is the training director at Casa Pacifica Centers for Children and Families and Editor at CYC-Net. He may be reached at james@cyc-net.org



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A Feminist's View of Caring

Frances Ricks

The topic of caring is a popular theme in the feminist literature, particularly the literature on women in the caring professions or disciplines, e.g., teaching, nursing, social work, child and youth care. What is apparent from this literature is that "caring" from the feminist perspective is *somehow* different, having *something* to do with being a woman, and in *some way* embedded in a different value structure of feminism. I use the words *somehow*, *something*, and *some way*, because it is not altogether clear from the literature what the difference is between humanistic, Christian, or other caring views and caring from a feminist perspective.

From a feminist point of view, here are some definitions:

- Caring involves both love and labour, and it is precisely this combination that underlines its conceptual complexity (Finch & Groves, 1983).
- Caring is human service work – "people work" – but it has not been recognized as work (Pascall, 1986).
- Caregiving is an activity encompassing both instrumental and affective relations (Abel & Nelson, 1990).
- Caring is a species activity that includes everything that we do to maintain, continue, and repair our world so that we can live in it as well as possible ... Caring can be seen as a process of four intertwining phases: caring about, taking care of, caregiving, and care-receiving (Fisher & Tronto, 1990).



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Before addressing this topic, it is important to first understand the historical emergence of maternal feminism since maternal feminism helps to explain the presence of caring rhetoric (such as the definitions cited above) in the caring professions. In the last two decades, maternal feminism has been identified as the underlying ideology that triggered the movement of women into public employment. Wanting to make a useful contribution, women transferred the values and caring functions they learned and practised within the home and the community to their newly discovered fields of work (Baines, Evans, & Neysmith, 1991).

The presence of values and caring from maternal feminism were slow to emerge in the literature. This is evident from the earlier feminist literature which focused on issues of liberation: the oppressed majority, psychological and sexual repression, emerging political ideologies, and consciousness-raising efforts. In essence, there was an absence of caring rhetoric in the feminist literature and no scientific inquiry about the concept of caring until the 1980s.

In the 1980s, as the feminist literature began to explore, define and research caring, the caring professions were getting into the act as well. In the field of child and youth care, Henry Maier wrestled with the concept of "caring" and characterized it as being a very personal experience whereby the care-giver and the cared-for person each need the other (1987). He argued that, paradoxically within the process of caring, the two become more firmly attached *and* take on greater freedom from each other. Maier posits that there are three components of caring: (1) a sense of physical comfort; (2) a certainty that whatever care was experienced would continue or be repeated; and (3) the involvement of a familiar and close caring person. Another child and youth care perspective has been offered by Peterson:

Although caring is a hallmark of our profession ..., the capacity to love and care are like the attributes of wisdom, intuition, creativity or sensitivity ... [and] the population of educated professionals and the



population of laymen would probably not differ significantly in the distribution of these attributes. (1981, p. 5)

Despite that the caring professions and feminists are only beginning to define and research caring, and compounded by the low value placed on the caring professions (Baines et al., 1991) thereby inhibiting research funding, the paucity and lack of sophistication in research and writing on caring in the caring professions is still noticeable *and emerging!* It is the intention of this article to propose some rudimentary thinking about a feminist perspective on caring in child and youth care in order to *prompt others to explore the topic*. It is hoped that this will encourage further investigation into the concept of caring since it is the foundation for our field of practice.

Child and Youth Care Workers' Perceptions of Caring

A first step in my thinking about the topic was to find out what people in the field considered caring to be and whether their views about caring conveyed a "feminist" perspective. A recent survey of experienced child and youth care workers on the subject of caring confirms that there is a lack of unanimity in defining caring, and that there is a vagueness about understanding the application of caring in the practice of child and youth care.

Thirty-nine students (34 experienced in the field) ranging in age from 20—49 years ($X = 26.6$ years) and who were predominantly female (36 female and 3 male) were surveyed. Respondents were asked to define caring by completing the following: CYC caring is when ...

The most common responses are presented in Table 1 over the page. The content analysis of their responses revealed two themes: (1) caring is about meeting a client's needs or changing the client, and (2) being concerned about or being in relationship with the client. However, it is noteworthy that less than half of



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the sample gave similar responses which demonstrates that there is little agreement on what constitutes caring.

Table 1
Frequency of themes mentioned in defining CYC caring

<i>Definitions</i>	<i>Number</i>
Assist in meeting the needs of clients: emotional, psychological, physical, social, cognitive, and spiritual.	17
Establishing a relationship with client.	14
Treating the client with concern: empathic, responsive, responsible, warm, respectful, non-judgemental, supportive, understanding.	11
Concerned about the well-being of the child/youth.	7
Assisting child/youth in becoming: more positive individual, able to attain happiness, health and wholeness, able to reach full potential, more functional.	7
Facilitate growth and change in child/youth.	6

Further, when respondents were asked to give examples of Caring they opted to describe activities: listening, hearing, counselling, spending time with clients, and providing support (see Table 2). In other words, when it came to providing evidence of caring it took the form of action and intervention such as teaching kids



conflict-resolution skills or life skills, praising a handicapped child for dressing, or walking a child through pre-operative procedures in hospital. Interestingly, their examples did not depict those themes that were evident from their definitions: kinds of needs to be met, or expressions of concern, or the nature of the caring relationship.

Table 2
Frequency of nature of example of CYC caring

Listening, hearing, counselling	20
Spending time with child/youth	7
Providing support to child/youth	6

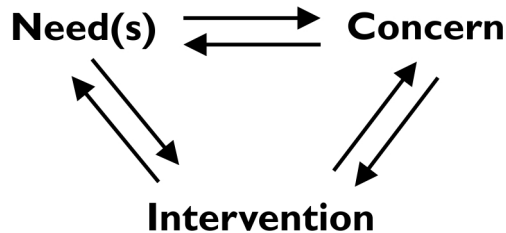
Initially, I was surprised and disappointed that child and youth care workers were not clearer, and in agreement, in their thinking about caring and how it would be manifest in practice. However, when reconsidering their definitions and their examples, a meta-analysis of the conditions/factors present in their definitions and from their examples of caring suggested that there is more agreement than I originally thought. Obviously, the respondents viewed caring as something that happens in relation to other. Further, their definitions and examples pointed to three factors present within the relationship: needs, affect or feelings, and action. Reflection on their responses suggested a model or framework for a way to think about caring relationships within caring professions.



Caring Relationships Within Caring Professions Model

Figure 1 depicts a model or framework for Caring Relationships Within Caring Professions. The caring relationship between the care-giver and care-receiver is different from the generic-caring relationship encountered in our daily lives. What distinguishes the caring relationship in a caring profession from other caring relationships is the presence of three critical factors: (1) the condition of need, (2) an attitude of concern, and (3) intentional involvement in intervention. What distinguishes it further is that all factors are present for the care-giver *and* receiver and are *interactive*.

Figure 1
Caring Relationship



It is the *interactive nature of the three factors* which accounts for the development and enhancement of the caring relationship within caring professions. The dynamic of interaction is complex in that it involves the interaction of the three factors for each individual as well as between the individuals involved (the worker and the client(s)). It is the presence of this dynamic and the interactive work (between worker and clients) within the dynamic that serves and enhances the caring relationship.

Before discussing the three factors and how they interact to create the caring relationship, it is important to point out the advantage of having a model which



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identifies *key factors* which account for the presence of caring. The identification of key factors allows for translations and differentiation across situations. In other words, while the key factors are identified, e.g., need(s), attitude of concern, and intentional interventions(s), the factors must be differentially defined or described for each situation at a particular point in time. The model permits then, indeed requires, the identification of different relationships appropriate to and congruent with the demands of the particular circumstances of the care-giver and care-receiver.

The advantage in this kind of model is that its application allows for different views based on different values which are related to culture, beliefs, theoretical orientations, etc., about what is happening. While the key factors *mandate the conditions required* to endure the presence of the caring relationship, they *do not prescribe how the relationship must look, appear, or how the relationship must proceed to be caring*; this is left to the discretion, creation and experience of the care-giver(s) and care-receiver(s).

Key Factors

Condition of Need

The condition of need recognizes that the caring relationship attends to the personal needs of the child/youth family and to the professional needs of the professional worker. The condition of need defines the focus of care which in the case of the child/youth/family is a condition of being unwell, unsafe, at risk, or in need. To attend to the need is to address whatever is missing in order for the particular child/youth/family to be in a state of well-being.

For the worker, the focus of care is to engage the child/youth/family in the caring relationship aimed at promoting the recreation of the child/youth/ family's well-being. While the focus of care, as defined by the needs for the two partners is different, the critical aspect for both partners is the recognition and



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acknowledgement of their need(s) and their mutual engagement in addressing their need(s). The model requires only that the focus of care be the need(s). It allows that different theoretical orientations, values, and beliefs about needs may be used, and does not prescribe any single, and by implication, "right thinking" or "politically correct," orientation which must be applied. Examples of needs might include safety, self-image, behavioural skills, personal boundaries, family boundaries, new understanding, and so on.

Needs of workers are often not considered or when considered, not valued in therapeutic relationships. The condition of need in this model recognizes the need(s) of workers as they emerge in the caring relationship. For example, I recently received a phone call from an ex-client requesting an emergency session while she was in town. My need to accommodate her need by being a responsible child and youth care worker, pressed me to make an early Saturday morning appointment which intruded on my otherwise peaceful weekend with my family. Another identifiable need which emerged in this case was my need to assist others when I think they are in an unsafe condition. My own beliefs about people being entitled to safety, and not having to put up with intimidation and abuse, is my need which must be addressed in this particular relationship.

Condition of Concern

The condition of concern refers to the attitudes and feelings of the care-giver and care-receiver. For the child/youth/family the attitude is self-directed in that there is a feeling/caring about the self and one's own need(s). Further, the child/youth/family have feeling(s) for the caring relationship which is related to and expressed to the care-giver. Likewise the care-giver has feeling(s) for the care-receiver and their relationship with each other.

This presence of concern and feeling takes professional caring into the personal realm and requires that both parties show up, be present, be engaged at a feeling level for each other. The presence of feeling(s) provides the link which connects the worker and client. Very simply put, without this connection, without the



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feeling(s) in the relationship, the people do not matter to each other. It logically follows then, that if the people do not matter to each other, as evidenced by how they feel, the condition of need would not matter. In turn, without concern for needs, interventions would be pointless.

Intentional Intervention

The intentional involvement in intervention requires that the worker be thoughtful and have clarity of purpose in determining "what to do before doing it." The worker does not randomly try out techniques in some mindless way hoping that something will work! The professional care giver uses knowledge and skills to deploy a specific intervention designed to address the child/youth/ family's need(s). This professional involvement is about "doing with intention." The intentional involvement in intervention is what brings professionalism to the caring relationship. It presumes a body of knowledge, skills, and standards of practice recognized by workers and their professional colleagues.

The child/youth/family must also be involved in the intervention. However, in the case of the client the involvement is about participation or being actively engaged in the intervention activities. The client's intention has more to do with commitment to being engaged in the activity rather than planning and implementing the activity.

Definition of Caring Relationship

Working from this model, an operational definition of a caring relationship within the caring professions would be something like:

Caring is an intentional intervening interaction initiated out of the care-givers and receiver's perceptions that something/someone is unwell, unsafe, at risk, or in need; the interaction is embodied in shared/mutual attitudes and feeling of concern for each other.



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Feminist In Perspective?

Does the model and this operational definition of the caring relationship connote a feminist perspective? Yes, and here's why.

Typically, the professions have placed emphasis on identifying the needs of the client, not the worker; required the worker to be intentional in intervention, but rarely viewed the client as participating in the intervention other than as receiver of it; and expected a professional concern which is clinical, sanitized, and bereft of feelings, other than those expressed by the client. The premise has been that, above all, professionals must be responsible, professional, and appropriate!

In contrast, this model of caring for the caring professions views the context for caring as being the relationship between the care-giver and the care-receiver. It differs from the typical professional interaction in that the relationship is the foundation for caring. To be in relationship means to have a connection with and to contrast with the other. As well, when in relationship, there is an experience of feeling with regards to the connection and contrast with the other.

Clearly, then, one of the dimensions of the model which makes it feminist in perspective is the attention on relationship; in essence, on being with the other in relation as partners, as opposed to one over the other. Declared feminist ideals have always included justice and equality in relationships (Fisher & Tronto, 1990).

Another aspect of the model which connotes a feminist perspective is the nature of the concern factor. Because the dimensions of the model are interactive, concern is interactive and occurs between the care-giver and care-receiver. For concern to be interactive means that it would be expressed; therefore, concern refers to the actual expression of regard, affection and liking between the worker and client. From a therapeutic point of view, this expression of feeling between care-giver and receiver enhances the very nature of the relationship, and empowers both the client and the worker to be truly present and partners in the therapeutic relationship. When this concern is present and expressed within the caring relationship, it takes into account concern about the other two factors: need(s) identification and intentional intervention(s). In other words, when



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operating as partners within the caring relationship, needs identification and intentional intervention are shared and addressed. The notion of partnership in sharing and participating in need(s) identification/resolution, expressing attitudes of concern, and engaging mutually in intentional intervention(s) sounds like the idea of "being in communion" which is a long-established value of feminist perspective (Bakan, 1966). This aspect of being in communion in professional relationships distinguishes it from other caring relationships.

A final dimension of the model which clearly identifies it as feminist in perspective is that while the key factors of the model are abstractions, they must be concretely manifest between two or more persons (worker and clients) in the particular relationship. Noddings (1984) argues that moral and ethical thinking is grounded in caring and that many people who live moral lives do not approach moral problems in the traditional abstract and formal way (based on principles and reason). She posits that, on a daily basis, people, and women in particular, approach moral problems by placing themselves in concrete situations thereby taking personal responsibility for the choices they make. She goes on to argue that women define themselves in terms of caring and actually "work their way through moral problems from the position of one caring" (p.⁸). The point being made here is that moral thinking requires a process of concretization rather than one of abstraction. While traditionally the logical and rational approach to ethical problems, as well as other problems, arises more obviously from masculine experiences, this is not to say that the concrete and caring approach cannot be shared by men. On the other hand, an ethic built on caring is, as noted by Noddings, characteristically and essentially feminine.

Summary

What makes this model of caring within caring professions feminist in perspective, is the interactive component of attitude of concern(s), need(s) identification, and intentional intervention(s). The interaction that occurs between persons places an equal value on the individual needs of all players and their



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contribution with regards to what problems to solve and how to solve them. The caring relationship is one of partnership and the interaction within the caring relationship enhances the concern and ultimately the therapeutic relationship itself. The caring relationship is grounded in values of equity and communion, and values the specific and concrete over the abstract and reasonable.

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Postcard from Leon Fulcher

At the NASA Space Center in Houston after Hurricane Harvey

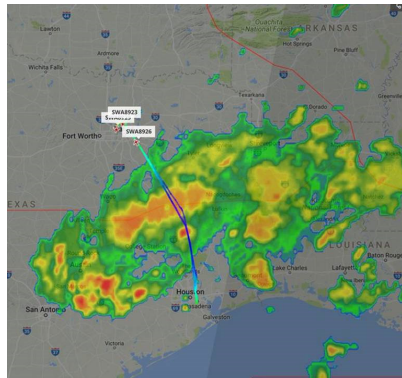
Houston, we have a problem! We remembered hearing those words uttered from the Apollo 13 Flight, a call sign made even more famous with the Hollywood film. Our return flight to Auckland from Denver took us through Houston, and three days out, the International Airport was still closed by the heavy flooding associated with Hurricane Harvey.

Houston Airports are situated on higher ground, but thousands of flights were cancelled when flooding closed the airport freeway exits. After some difficulty in arranging a day trip to NASA's Johnson Space Center, we organised a personal Super Shuttle ride from the Airport to the Johnson Center – named after Lyndon B. Johnson, former President of the USA who championed American initiatives with space exploration.

Our driver was a young university graduate of Journalism from Brooklyn who had moved to Houston to live nearer



The Central Control Room at NASA's Johnson Space Center in Houston



Heavy Rain from Hurricane Harvey Closed Houston Airports for Four Days



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to an older brother who had moved earlier to America's fourth largest city and center of the American petro-chemical industry. In the preceding week he had been stranded at the airport and lived there for four days before flood waters waned.

Record amounts of rain fell in Texas after Hurricane Harvey hit on a Friday. The immediate impacts were that people had to leave their homes, states of emergency, burst dams, streets underwater and more than 20 deaths connected to the storm. In some areas, 48 inches (122cm) of rain fell, compared with an average yearly rainfall of 49.77 inches that flooded streets, homes and businesses.

There was a lot of uncertainty about when Air New Zealand would resume its flights from Houston back home to Auckland. As we awaited our window of opportunity, the next Hurricane Irma started blowing into southern Florida. All Florida airports were now closing.



Freeway Exit to Bush International Airport with 8-10 foot Flood Waters



As Flood Waters Subsided Four Days Later we visited the NASA Space Center



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As luck would have it, we made it to the Johnson Space Center and followed Dr Google's advice that encouraged an early tour of the Rice Complex negotiated for America by the then Senator from Texas, later Vice-President and then President Lyndon B. Johnson.

The Saturn Rocket propelled the little Brown Capsule into Space and offered America's first Astronauts new frontiers of exploration. As children and young people we listened on the radio and watched on the television each explosion of lift-off, and then memories flooded back of the tenth flight of the Space Shuttle Challenger which broke apart 73 seconds after take-off in early January, 1986 killing all seven crew members.

Who would have thought that we would get to walk through an actual Space Shuttle sitting on top of an actual Boeing 747 used to ferry the re-usable Shuttle from its anticipated landing pad in California back to Cape Canaveral, Florida. What an experience.

The training facility with a mock-up of the International Space Station was also mind-boggling. For the past decade, the USA has not had rocket engines that could take Astronauts to and from the



Imagine Sitting on the Tip of a Huge Saturn Rocket and Blasting into Space



Astronauts Sat in the Little Brown Capsule on the Tip of the Rocket!



ISS, and that won't be remedied for another two years. Meanwhile, NASA's longest flight ever with the Cassini Saturn Mission came to a formal ending after one of the most ambitious efforts in planetary space exploration ever mounted.

John



The Lunar Module and Its Boeing 747 Aircraft Support Craft



International Space Station Training Mock-up with Russian Delivery Pod



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Information

Publishers

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Founding Editors

Thom Garfat

thom@cyc-net.org

Brian Gannon

admin@cyc-net.org

Editor

James Freeman

james@cyc-net.org

Associate Editor

Mark Smith

mark.smith@ed.ac.uk

Assistant Editor

Janice Pike

janicepike@waypointsnl.ca

Correspondence

The Editors welcome your input, comment, requests, etc. Write to cyconline@cyc-net.org

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