Portfolio Volume 1: Major Research Project

'Good Enough Parenting': Social Workers' Experiences of Assessing Parenting in Family Safeguarding Services.

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SOCIAL WORKERS' EXPERIENCES OF ASSESSING PARENTING

Abstract

Research examining social workers experiences of supporting and assessing parenting is limited. Despite existing research indicating there are important skills that facilitate parent and social worker relationships and acknowledging the inherent power dynamics and emotional impact of decision-making, the experience of social workers in this area of research is unknown. This qualitative study aimed to explore the experiences of social workers assessing parenting capacity in the context of family safeguarding. Five social workers from a single location family safeguarding service participated in semi-structured interviews exploring how they make sense of supporting and assessing parenting, personally and professionally. Using interpretative phenomenological analysis, three master themes were identified: '*bringing the past into the present and future identity'; 'delicate balancing act' and 'sustaining oneself in a maligned profession'.* These themes reflect social workers' personal and professional impact on assessing parenting capacity in family safeguarding services. Areas of convergence and divergence between these findings and previous theory and research are discussed. Implications for social work practice, supervision and training are highlighted, including the importance of self-reflection, peer support and the value of mentorship to be incorporated throughout social workers' careers in child protection/family safeguarding services.

Chapter 1: Introduction

I readily acknowledge that staff who undertake the work of protecting children and supporting families on behalf of us all deserve both our understanding and our support. It is a job which carries risks because, in every judgement they make, those staff have to balance the rights of a parent with that of the protection of the child. (Laming, 2003, p.3)

Overview

This research concerns the experiences of social workers assessing parenting capacity in family safeguarding. This section begins by situating the researcher and epistemological stance, before providing an overview of the historical, political, and economic context in which social work has developed and the legacy of bureaucracy, managerialism, and the culture of risk-averse practice. Next, an overview of key terms related to the research, followed by a summary of the decision-making process, ethics theories, and psychological parenting theories. The chapter concludes with a literature review regarding social workers and parents in child protection, which leads to this research's rationale and aims.

Epistemological Position & Relationship to the topic

Reflexivity Considerations

Reflexivity refers to awareness and ownership of the researcher's beliefs, values, and experiences that interact with and influence qualitative data collection, analysis, and interpretation (Willig, 2008). In the 'spirit of openness' encouraged of qualitative researchers (Smith et al., 2009), I strive to be transparent about my position and influences whilst undertaking this research. I wrote this reflective section in the first-person to personalise my use of language and situate myself within the study per good practice (Gilgun, 2005).

Epistemological Stance

I want to be transparent about my understanding of the nature of reality (ontology) and how I understand obtained knowledge (epistemology). This transparency of one's ontology and epistemology is critical to understand how research attempts to 'discover' knowledge (Moon & Blackman, 2004). I believe that reality exists separate from one's subjectivity, while acknowledging that how people make sense of these truths is socially constructed. Thus, the meaning-making, language and social context are all filters through which 'truths' are described (Houston, 2010). My perspective lies between realism and relativism, aligned to a critical realist epistemology.

As a critical realist researcher, I am aware of the importance of studying qualitative data in detail and considering it important to understand knowledge in a broader historical, cultural, and social context. Critical realism "marries the positivist's search for evidence of a reality external to human consciousness with the insistence that all meaning to be made of that reality is socially constructed" (Oliver, 2011, p. 2). This approach is an appropriate fit with the research project as it supports the aim to locate the experience of social workers within broader contextual factors that may influence how they support and assess parenting. Furthermore, this approach requires that as the researcher, I acknowledge my role in constructing realities, drawing on my own lenses and experiences, and facilitating research reflexivity and a transparent positioning of the researcher in the research.

Relationship to the topic

My professional interest in the topic came about through pre-training experience working in adult mental health services. Throughout the years of working in community mental health, I had peripheral involvement with family safeguarding. I often worked with mothers at different stages in the family safeguarding process, from those needing early help to support their ability to parent under challenging circumstances, to those whose children were removed from their care. My reflections related to this topic seem to centre in the middle of the process, with families on a child protection plan, and social workers' role as supporters and evaluators of parenting capacity. I noticed I had mixed feelings about the

dichotomy of social workers role in this area. I was deeply concerned with maintaining engagement and sustaining our therapeutic relationships during safeguarding processes, I noticed my tendency to distance from the social workers involved and, at the same time, being preoccupied with considering the children's levels of risk and uncertainty, particularly during a parental mental health crisis.

My interest in this research topic emerged from my learning disabilities placement, where I worked with a service user whose children were removed from her care and placed in the care system. I was offering her therapy to start making sense of this painful experience when she became pregnant unexpectedly, leading to a rapid escalation of the safeguarding process, from child-in-need to child protection to a pre-birth 26-week parenting assessment process within weeks. At this point I became acutely aware of procedural, authoritarian involvement in child protection and the range of ethical and emotional responses this had on that expecting parent; I wondered how this impacted those working with her during this time. I found myself curious about the experiences of social workers working with parents during such a morally challenging time.

Soon afterwards, I became a mother for the first time, so I realised the incredible challenges of parenthood and daily contemplating my perspective of good enough parenting. I was curious about the personal and professional perspectives on parenting, how this is judged generally and in the context of risk to children. I was keen to step outside of the formal, procedurally driven task of assessing parenting and explore in detail the lived experience of those involved in the assessment to challenge my own biases and gain a deeper understanding of the experience from the perspective of social workers.

Based on my personal and professional experiences, I believed that a research project exploring the lived, 'human' understanding of social workers involved in parenting capacity assessment could be of real value. I hoped to bring myself close to my previously distanced stance towards social workers and contribute to understanding social work practice.

Historical, Political, and Economic Context

Several decades' of historical, political, and economic changes has led to changing concepts, policies, and social work practices concerning safeguarding children. A welfare state emerged following the post-war period, greatly influenced by the Beveridge Report (1942). This report proposed that social policy address societal issues through education, health care, housing, and employment. Beveridge proposed that citizens contribute to a universal system, which significantly expanded the national insurance system, set according to each individual's financial capacity to fund public services. Labour's 1945 general election victory enabled the realisation of Beveridge policy to establish the welfare state and nationalise key industries.

Labour and Conservative governments continued to implement the welfare state through the 1950s, 1960s, and 1970s. It is in this context that modern social work developed. To address increasing concerns about overlaps and gaps in services, the Seebohm Report (1968) recommended developing local authority Social Services Departments (SSDs) (Jordan & Parton, 1983). Social work teams were encouraged to engage with communities through group work and a proactive and preventative approach to social work (Rogowski, 2015a). Local authority SSDs provided practitioners with the autonomy to provide community-based family orientated social work with available resources. However, this progressive period of social work changed following the world economic crisis of 1973, the Thatcher government replacing nationalisation with privatisation, and the rise of neoliberal ideas (Rogowski, 2015b). Harvey (2010) defines neoliberalism as:

> A theory of political, economic practices that proposes that human well-being can best be advanced by liberating individual entrepreneurial freedoms and skills within an institutional framework characterised by strong private property rights, free markets and free trade. The role of the state is to create and preserve an institutional framework appropriate to such practices. (p.2)

During the 1980s and 1990s, right-wing and neoliberal policies significantly impacted social work practice by reducing public welfare expenditure. The system shifted away from

local authorities having funding autonomy to serve local community needs. The social work profession became managerially led rather than professionally led, with a market-originated influence on policy and practice driven by targets and performance indicators (Rogowski, 2015a).These policy changes produced a consequential shift in social work practice, introducing changes to central concepts, namely the shift from family safeguarding to child protection.

The Changing Concepts and Policies

The Children Act (1989) is an influential policy framework promoting the welfare and safeguarding of children. The policy placed a duty of care on local authorities to provide a range of appropriate services for children viewed as 'in need' or at 'risk of significant harm'. The Act considers children as 'in need' if their health and development are likely to be significantly impaired without the support of services, thus warranting state intervention through Section 17 of the Act. When there are reasons to believe that a child is suffering or likely to suffer significant harm, social services place the child/family on a child protection register and develop a child protection plan. Furthermore, the United Nations Conventions on the Rights of the Child (UNCRC, 1992) is influential international legislation that underpins UK legislation related to individuals who work with children (e.g., Children Act, 2004, Equality Act 2010). The UNCRC highlights the importance of treating every child as a unique person and emphasises that all children's specific needs are ensured.

Social-economic changes in the family structure were reflected in the political shift from focusing on the whole family to the children's needs and rights (Parton, 2011). The '1990's was a period of rapid change to family life, with ideas of the 'normal' nuclear family based on a male breadwinner, the female child-rearing model within a life-long marriage, changing. These changes were reflected in policy and service provision. For example, responsibility for child welfare in England moved from SSDs to Children's Services department demonstrates the shift in focus from family safeguarding to child protection (Parton, 2009). Under New Labour, the move from family framed services to those explicitly

child-centred was significant in changing practice. The following policies reflected the political will to prioritise the child's rights, needs, and welfare: Every Child Matters (Chief Secretary to the Treasury, 2003); the Assessment Framework (Department of Health et al., 2000); the Integrated Children's Systems (Cleaver et al., 2008); the Common Assessment Framework (CAF) (CWDC, 2009); and the Looking After Children (LAC) project (Parker et al., 1991).

Other relevant policies, including the standardised Assessment Framework, introduced by the Department of Health (2000), requiring that all children 'in need' are offered family support and to offer in-depth core assessment for families with more complex needs and child protection plans. Concurrently, the 'Working Together' policy (Department of Health, 2001) further moved the focus from assessing the risk of child abuse and 'significant harm' to being more broadly concerned with the risk of impairment to children's overall development within their family and community. Parton (2010 & 2011) notes that the nature of concern regarding risk no longer focuses on a child's risk of abuse and 'significant harm', and now includes promoting their welfare. Welfare promotion, through a range of support services, meeting the needs of all children and families became the basis for the concept of family safeguarding.

Decades of political and economic changes have led to shifts from focusing on the concept of family safeguarding and offering family support services to a narrow focus on child protection and child-centred interventions. Social work and child protection became associated through the influence changes in policies, further fuelled by media and public reactions to serious case reviews. The next section describes the legacy of this historical, economic and political context concerning the media and subsequent policy changes.

The Media Impact on Child Protection

High profile of child abuse fatalities and subsequent media and political focus at the start of the new millennium significantly impacted social workers' practice. The tragic deaths of Victoria Climbié and Peter Connolly (Baby P), both subject to a child protection plan with

the Haringey local authority, led to a domino effect of inquiries, reviews, and policies shaping

child protection practice (Laming, 2003, 2009; Munro, 2010, 2011). Peter Connolly's death in

2007 and the collective failure of over sixty interactions with the family from a range of health

and social care professionals to safeguard led to criticism of child protection services and a

media-led campaign[1] to get justice for Baby P by protesting for the dismissal of professionals

involved with the family. Under the weight of this social and political pressure, and in an

attempt to take control of the situation, Minister Ed Balls responded authoritatively and

requested:

- an urgent Joint Area Review of safeguarding in Haringey;

- a new and independent Serious Case Review after deeming the original review

  inadequate and insufficiently critical;

- Lord Laming carry out an urgent review of child protection in England;

- a Social Work Task Force to identify barriers to social workers doing their jobs

  effectively, making recommendations/improvements, and long-term social work

  reform.

The media and political scrutiny of social workers' inability to prevent the deaths of children

like Victoria Climbié (Laming, 2003) and Peter Connolly (Haringey, 2009), together with

government reviews raising ongoing concerns about poor inter-agency communication

(Laming, 2009) and calling for systemic changes to child protection (Munro 2011), led to a

significant increase in child protection and Public Law Outline applications by social workers

(Haringey, 2009 & Munro 2011).This increase was indicative of the pressure and anxiety to

protect children.

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[1] Led by the most prominent selling tabloid newspaper at the time The Sun, on 15 November. The newspaper followed up two weeks later by delivering 1.5 million signatures to the Prime Minister.

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Impact of Reforms on Current Social Work Practice

During the New Labour and the coalition government, more reforms and modernisation were proposed to social work practice, including the increased use of electronic recording systems. The dominance of 'child protection' was perhaps reinforced through the formalised assessments and the introduction of Information Communication Technology (Munro, 2011; Rogowski, 2013). The intention was to improve children's services, particularly regarding documentation and sharing of risk across organisational boundaries. The introduction of the Common Assessment Framework is an example of how Serious Case Reviews influenced policy and practice improvements to protocols and interagency communication pathways (Department for Education, 2011a). However, such risk management tools are at risk of encouraging a compliance 'tick box' approach, which holds a defensive approach to risk management (DOH, 2007b).

Moreover, many commentators stress how social workers are distracted from working directly with children and families due to the increasingly burdensome administrative demands of their role (Audit Commission, 2002; Holmes & McDermid, 2013; Munro, 2004, 2011a). Despite the aforementioned intention to improve children's services, research suggests the system became dominated by accountability, targets, and performance indicators (Burton & van den Broek, 2008; Gillingham, 2012; White et al., 2010). The top-down regulation designed to empower social workers to autonomously exercise judgements based on their training and rapport with individual families was detrimental to this aim, according to the Munro review (2010, 2011a).

This section outlines the historical, political and social context from which the contemporary approach to child protection has developed. An increasingly politicised and critical perspective of local authorities and social workers has led to a reactive approach to child protection rather than a proactive one towards child welfare. The influence of Serious Case Reviews, policies, media discourses, and research contribute to an individualised risk discourse dominated by top-down regulations informing child protection approaches.

Introduction to Key Concepts

This section includes key concepts and their context detailing the nuances and complexity of the terminology relevant to this research, which informed the systematic literature review.

Characteristics of Families

The early work of Cleaver, Unell and Aldgate (1999) and the serious case review of the deaths or serious injuries of children and young people between 2007-2009 (Brandon et al., 2010) developed an understanding of common characteristics that tend to co-exist in families where death or serious injuries to children occur. The term 'toxic trio' refers to parental substance misuse, domestic abuse, and mental health difficulties reoccur amongst the families reviewed (Brandon et al., 2010). Along with poverty, frequent house moves and eviction which often compound and cumulate children's adversities and risk factors (Brandon et al., 2010). Children of parents with learning disabilities are also more likely to be known to children services regarding concerns for the children's needs or concerns that they are at risk of significant harm (Aunos & Pacheco, 2021).

'Good enough parenting'

Facilitating child development is considered the central premise of parenting, requiring reasonable or good enough parenting to promote optimal development (Woodcook, 2003). Winnicott (1957, 1964) first described this reasonable standard as being 'good enough' arguing that parents should be judged against this rather than an unattainable perfection. Bettellheim (1987) reinforced the notion that imperfect parenting can be adequate for guiding a child towards adulthood. The idea of parenting as good enough does not overlook or justify the impact of harmful parenting; instead, it is a way of normalising the experience of parenting being changeable and complex while liberating parents from the unrealistic ideals of the 'perfect parent'. The concept of 'good enough parenting' was adopted into child protection when it was argued that the state needs to consider the threshold of unacceptable parenting (Adcock & White, 1985).

Parenting Capacity Assessment

The Framework for the Assessment of Children in Need and their Families (DOH et al., 2000) also commonly known as the Assessment Framework is a conceptual framework that adopts an ecological approach to identifying the needs of children and their families. Through guiding practitioners to consider what is happening in the family and the socio-economic factors influencing family life. The Assessment Framework is also known as the Assessment Triangle due to the three domains:

1. The child's development needs.

2. Parenting capacity assessment.

3. Family and environmental factors.

Each domain is subdivided into dimensions specifying what practitioners should consider under each domain. There are various resources available that offer guidance to assist practitioners in assessing particular dimensions. Moreover, several conceptual models form the evidence-base for social workers to evaluate and analyse family circumstances to consider the influencing factors of parenting capacity. These are based on risk calculation models (Munro, 1999; Turnell & Edwards, 1999) and trauma-informed tools and assessment frameworks which consider parents attachment styles and reflect their early childhood trauma, impacting attachment style and parenting (Mason et al., 2020; Ward et al,. 2014). It is beyond the scope of this research to elaborate on the several conceptual models informing the evidence based practice for assessing parenting, however it's helpful to focus on the most commonly used model.

The most prominent conceptual model informing the evidence base for assessing parenting capacity to change is based on the Trans-Theoretical Model of Change (TTM), incorporating the stages of change (SOC) Prochaska and DiClemente (1982). The TTM is applied explicitly in child welfare assessments in the UK (Prochaska and Prochaska, 2002; Tuck, 2004). It has been developed as a framework to assist practitioners in conceptualising change processes concerning working with families where children are suffering, or likely to suffer, significant harm and to facilitate analysis and recommendation for court reports

(Horwath and Morrison, 2001; Morrison, 2010). The TTM offers a 'more reliable, valid, and complex assessment of behaviour change than simple recording compliance' (Prochaska and Prochaska, 2002, p.379). Using the TTM as a theoretical construct to understand the structure of intentional behaviour change can also be used as a tool to help practitioners understand what could be the most effective intervention to bring about change, depending on the individual's stage of change. Several questionnaires and scales are used to determine an individual stage of change readiness or motivation (Ward et al., 2014). Therefore aiding an understanding of the type of intervention that would be most beneficial to improve their readiness, reduce resistance to change, or address the underlying difficulties impacting parenting.

Models such as TTM and other psychological theories applied to the parenting literature have been critiqued for emphasising parenting as a task centred on facilitating optimal child development (Woodcock, 2003). That is, parenting assessment can be distorted so that attention is paid to it over the other domains. Horwath (2011) referred to this as the lopsided triangle. For example, a practitioner may generally focus on assessing parenting capacity without considering the impact that poor housing, ill-health, social isolation, and debt are having on the ability of the parent to meet the needs of their child.

Parenting Capacity Assessments (PCA), also known as parenting assessments, are conducted and used in various circumstances by a range of professionals:

- Social workers or psychologists carry out PCA for court proceedings (White, 2005).

- Other professional opinions, such as mental health professionals, can inform PCA based on their previous and current involvement (Rutherford & Keeley, 2009).

- Court-appointed independent experts can carry out PCA (Condie, 2003).

In this research, PCA refer to assessments conducted by social workers working in a family safeguarding service as part of routine, intervention-based input or used for legal decisions. There are distinction between PCA in everyday clinical practice and behavioural interventions for parenting (Reder et al., 2003).

The duality of using parenting assessment to support parents and families and the potential to use the information gained from assessment as forensic evidence brings difficulties for the parent-worker relationship. On one hand, social workers may assess parenting in struggling families for service planning and interventions. On the other hand, PCA can later provide forensic evidence in legal decisions regarding foster care, reunification, visitation rights, and parental rights termination (Azar et al., 1998; Budd et al., 2001.) There is an expectation from lawyers that assessments hold clear conclusions and recommendations on custody and visitation decisions (Waller & Daniel, 2005). Parenting assessments often carry considerable influence in forensic decision making (Lennings, 2002), with the assessment's recommendations followed in 73% of child care cases in England (Jamieson, et al., 1999). Given this influence, it is critical to consider approaches to risk, what frames of reference social workers draw on when assessing parenting, and the different ethical perspectives that apply to their practice.

Risk Approaches

Given the historical and social context, a technical (i.e. protocol-driven) management of risk dominates health and social care practice. The technical approach to risk management can fail to acknowledge and harness the range of complex, unique situations that do not apply to standardised protocols. Also, assessing and managing risk often requires a range of professional, ethical, and conversational responses by workers, which draw on a range of emotions and knowledge bases (Gigerenzer, 2003, 2007). As findings of SCR note poor inter-agency communications (Laming, 2003, 2009; Munro, 2011), an alternative to the technical approach is the relational-collaborative approach. This approach positions risk management within conversations and micro-interactions taking place within teams engaging in assessing risk, and complements the technical approach by improving communication between inter-agency workers (Aggette & Messent, 2018). Therefore, it liberates the practitioner from the fallacy that they are solely responsible for managing risk in their often-brief contact with families.

Ethics Theories

Different ethical perspectives are applied to child protection resulting in tensions with one another. Collectively these enriching understandings from multiple perspectives are helpful and thus examined in this section.

Social work has widely embraced the deontological perspective concerned with one's duties and obligations towards others with a focus on ethical codes and decision-making frameworks to assist in determining the best possible outcomes (Banks, 2008; Dolgoff et al., 2009; Lonne et al., 2004; McAuliffe, 1999). As a theory of ethics, deontology emphasises the importance of universal guiding principles and that professionals are duty-bound to follow their codes of ethics (Weinberg & Campbell, 2014). Deontological are rule-based approaches, which have a universal principle of beneficence. This means that everyone needs counts. The deontological perspective aligns with child protection services focus on children needs and prevention of harm as paramount. Arguably, the current child protection policy and practice are based on deontological ethics rules and approaches (Lonne et al., 2016). Given the risk-averse, managerial, and political context of child protection, applying alternative ethical perspectives to practice has been challenging (Webb, 2006). Furthermore, the literature in this area has developed to question the usefulness of developing and relying on codes of ethics that social workers can use in decision-making.

Critical perspectives challenge the dominance of the deontological approach through virtue ethics and relational ethics such as 'ethics of care' and 'work ethics'. Virtue ethics are concerned with doing the right thing whilst considering the unique nature of each individual. Whereas deontological approaches emphasise reason as the prime motivator for acting virtuously, virtue ethics posit that individuals have an innate tendency to follow virtues of honesty, kindness, and care (Webb, 2006). There has been further critical development of relational ethics, drawing on feminist thinking in 'ethics of care' and 'work ethics' (Featherstone & Gupta, 2020; Lonne et al., 2016). The ethics of care is a political theory that questions the responsibilities and nature of caring for each other in society (Featherstone, 2010; Gray, 2010). In terms of child protection, there are dominant societal assumptions

about motherhood and women as primary caregivers within families. Similarly, the

prevalence of women in the caring professions (including social work) applies to 'care ethics'.

Caring for others is related to relationships between people (Lonne et al., 2016).

Drawing on virtue ethics and the ethics of care approaches and empirical research

with social workers, the 'ethics work' concept offers an alternative to the dominance of

deontological ethics in child protection (Banks, 2016). 'Ethics work' refers to the work

practitioners do to recognise their practice's political (macro) context (Featherstone & Gupta,

2020). The emerging evidence for the social determinants of parental stress, particularly the

association to neglect, suggests a need to refocus from the individual to the societal

dilemmas related to child welfare. Banks (2016) argues for a shift of focus from individual

difficulties, the need to conform to codes of ethics, and decision-making to make rational

judgements, to consider the broader social and political context. Given that working in family

safeguarding is an area characterised by dilemmas, workers are likely to face uncertainty,

anxiety and distress regarding decisions.

Moral distress and ethical trespass are two relevant concepts applied to empirical

research of social work decision-making and ethics (Weinberg, 2009). Moral distress refers

to the psychological and emotional pain arising when practitioners feel unable to take the

morally correct action because of organisational barriers. Weinberg (2009) borrowed the

term from the nursing field and distinguished moral distress from ethical dilemmas by

arguing that ethical dilemmas refer to scenarios where two or more options conflict, yet each

is viable and appropriate. The conflict inherent in the options means that both potentially hold

positive and negative consequences. For example, the decision to terminate parental rights

and take a child into care has the potential positive outcome of safeguarding from the

presenting risks within their family of origin. Yet, the dangers of coming into the care system

need to be acknowledged, such as those described by inquiries into homes and the long-

term psychosocial impacts on children's mental and physical health, education, future

relationships, and employment (Triseliotis et al.,1995). Weinberg argues that the idea of

ethical dilemma deprives social workers of their political responsibilities as agents of change

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in inadequate or unjust social situations. Moral distress allows a worker to hold perceptions of moral individual accountability alongside a perception of being restricted by circumstances (Featherstone & Gupta, 2020). It is this tension that causes individuals moral distress.

Ethical trespass refers to the potentially harmful effects of following actions or rules as part of a process or social system, which is not the individual's intention (Weinberg, 2009). For instance, because social workers usually have responsibilities to more than one person at a time (i.e. multiple family members), the social worker's decisions and actions may inadvertently harm one person to ensure the other person is protected.

Social workers can face many ethical conundrums in their practice. This current research investigates particular issues relating to social workers' experience of PCA, therefore it is important to consider the psychological theories informing constructions of parenting.

Psychological Literature on Parenting & Social Work

This section provides an overview of key themes underlying psychological literature on parenting, followed by highlighting the social stresses and their association with neglect and child abuse.

The current study draws on the work of Woodcock (2003), which explored social worker's constructions of parenting and the way this informs their practice. She reviewed key themes in the psychological parenting literature and applied this to social workers understanding of parenting. A central premise in this review is that some early psychological theories feature a fundamental view that parenting is a task focused on facilitating optimal child development (Woodcock, 2003). There was a focus on the dyadic parent-child relationship, reciprocity, and the parent's ability to be emotionally expressive, communicate, problem-solve, joint-play, and maintain consistency and security with their children (Maccoby & Martin, 1983; Quinton & Rutter, 1988). The understanding of parenting subsequently developed into a triad relationship between the parent, child, and their wider social environment. The current favoured ecological model suggested by Belsky and Vondra

(1989) maps the Assessment Framework Triangle used in the child in need and protection assessments. Rather than understanding parenting as a task, the psychological literature developed to considering parenting as "a relationship that responds to fluctuations in other relationships" (Reder & Lucey, 1995, p.13).

Contextual factors impacting parenting

The socio-economic changes in recent times within the UK need to be considered to fully locate the current research. Over recent decades, austerity measures and more recently the socio-economic impact of the COVID-19 pandemic have placed pressure on local authorities, social workers, and many families from lower socioeconomic groups. The reforms and cuts to welfare benefits are having negative and disproportionate effects for disadvantaged families and increased risks of homelessness alongside decreased home stability due to a shortage of affordable housing, are exacerbating family stress. Meanwhile, local authority budgets cuts impact children's centres, youth clubs, and other family support services closing (Featherstone et al., 2016). The outcome is an increase in families' social needs, with social workers caseloads rising. Bilson and Martin (2016) found that the number of children on child protection plans and subject to care proceedings increases yearly. The previously commonly registered 'core abuse type' of physical and sexual abuse now makes up a minority of child protection concerns. Instead, the majority of children on child protection plans and care are at significant risk of neglect or emotional abuse (Bunting et al., 2017). Bywaters and colleagues' (2017) research found that the likelihood of a child being placed in the care system are over eleven times greater for those living in England's highest decile for social deprivation areas compared to those living in the lowest decile. Poverty is not just about the impact of material and financial deprivation on families; it can also "be understood in terms of relational and symbolic injustices" (Gupta et al., 2018, p.248). Thus, evidence suggests a relationship between poverty, child abuse, and neglect, which may have both direct and indirect influences on families (Gupta, 2018).

Parental stress and the impact of wider contextual conditions may directly impact a parent's actions or inactions. Factors ranging from a history of poor attachment, unhelpful learning styles, or poor and dangerous choices may influence parent's actions or inactions regarding their children's care (Gupta, 2018). Featherstone and colleagues (2018) argue that addressing the impact of inequality and poverty on families is not considered a 'core business' for social workers or policymakers in child protection. The policy context and social workers tend to target interventions to protect children in individual families by considering the factors that distinguish that family from others in similar situations. Thus, there is a tendency to overlook common challenges to good parenting (e.g., poverty, debt, poor housing). Gupta and colleagues (2016) propose drawing on a social model for protecting children and supporting families to shift the paradigm from individual deficit and blame to highlighting economic, environmental, and cultural factors. The Capability Approach (CA) offers a critical multidimensional framework that considers individual and social factors impacting families in poverty, which social workers can apply to those involved in the child protection system (Gupta et al., 2016). It is in this context of theory that the current research is taking place.

To conclude, this section has highlighted the socio-political and dominant discourses related to child welfare in which social workers and families navigate. The systematic review of the empirical literature regarding social workers experiences of working with parents in a safeguarding context narrows the scope for this research to identify the gap.

Systematic Review of Relevant Literature

Introduction to Literature Review

The current study focused on the experience of social workers assessing parenting capacity. Initially, the search was broad to include the experience of professionals working in safeguarding more generally. Following scoping the literature and finding sufficient articles on social workers' experiences which related to how social workers emotionally experience working with parents, or/and any experiences related to decision making, when working with

parents experiencing difficulties[2] impacting their parenting capacity. The decision was made to carry out a systematic review of peer-reviewed empirical literature was conducted to answer the following question:

What does the existing empirical literature say about the experiences of social workers working with parents in Family Safeguarding Services in the UK?

Search Strategy

Five bibliographic databases were accessed via the University of Hertfordshire. Searches were performed in Scopus, APA PsycArticles, Cinalhl Plus, PubMed, and Social Care Online. The final search strategy was informed by conducting several pilot searches to capture the commonly used terms and relevant articles. In addition to this process, titles and abstracts of articles previously identified as relevant were examined for key terms (Appendix A).

Following several pilot searches to scope the broader literature, it was decided to narrow the inclusion criteria to the UK, with only studies published since 2007. Given the socio-political and service structures variations, it would be difficult to compare research across countries and contexts. Comparative studies that included data from England (Dickens et al., 2017) were initially considered for the review. However, their focus was on the international perspective rather than the social workers' perspective, so they were excluded following initially scoping.

Initially, databases were searched from the 1990s onwards. However, literature from 30 years ago could potentially be less relevant to the current policy and service changes impacting social work practice. Particularly given the more recent media and political scrutiny of social workers for failure to protect children like Victoria Climbié (Laming, 2003) and 'Baby

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[2] Commonly experienced parental difficulties which may impact parenting capacity and involve social worker input include mental health difficulties, drug and alcohol misuse, domestic abuse and learning disabilities.

Peter' Connelly (Haringey, 2009) and government reviews raising ongoing concerns about poor inter-agency communication (Laming, 2009) and calling for systemic changes to child protection (Munro, 2011). The year of 2007 was considered a watershed period in child protection, with a significant increase in child protection and Public Law Outline applications being made by social workers (Haringey, 2009 & Munro 2011). The legacy of the subsequent policy changes and social attitudes to child protection is the context in which this research is occurring in. Therefore, a decision was made to include literature published from the year 2007 onwards. This was to capture the significant impact of societal and pollical changes impacting child protection practices among social workers.

Table 2 provides a summary of the inclusion and exclusion criteria below. See Appendix A for the search strategy. Given the limited resources available and timescales of the project, only English language papers were included. However, given that the review has a UK focus, this is unlikely to have excluded papers. Lastly, although grey literature such a policy documents, guidance and some personal accounts presented in non-peer reviewed journals were initially reviewed and informed the broader context of the research outlined in the introduction chapter. A decision was made to not include these grey literature in the systematic review as peer reviewed empirical literature are arguably consider higher quality research which would also enable the studies to be critically evaluated against each other as part of this systematic literature review.

Table 1 *Inclusion and Exclusion Criteria*

Inclusion criteria	Exclusion criteria
Published in the English language	Not published in the English language
Published since 2007	Published before 2007
Focused on the experience of social workers	Outcome or interventions based
Reporting original peer-reviewed	Conceptual or theory
Focused on social workers experience of working with parents in the context of child protection (i.e. relevant topic area)	Focusing on other perspectives

The procedure for the systematic review was as follows:

- ✓ Search results were exported from bibliographic databases to note management software.
- ✓ Duplicates removed.
- ✓ Titles and abstracts - screened according to the inclusion and exclusion criteria in table 2.
- ✓ The remaining full-text articles - assessed against the inclusion criteria.

Results of Systematic Literature Review

Once duplications were removed, a total of 170 articles remained for screening following the inclusion and exclusion criteria. After screening titles and abstracts, 155 articles were excluded, and 15 articles remained for full-text screening. Of these, ten articles met the criteria for inclusion in the review. In addition, the reference lists of the selected articles were hand-searched to check for any further articles that met the inclusion criteria. An additional article was identified that met the inclusion criteria. Therefore, 11 articles were included in the current review (see PRISMA flow-chart, Figure 1).
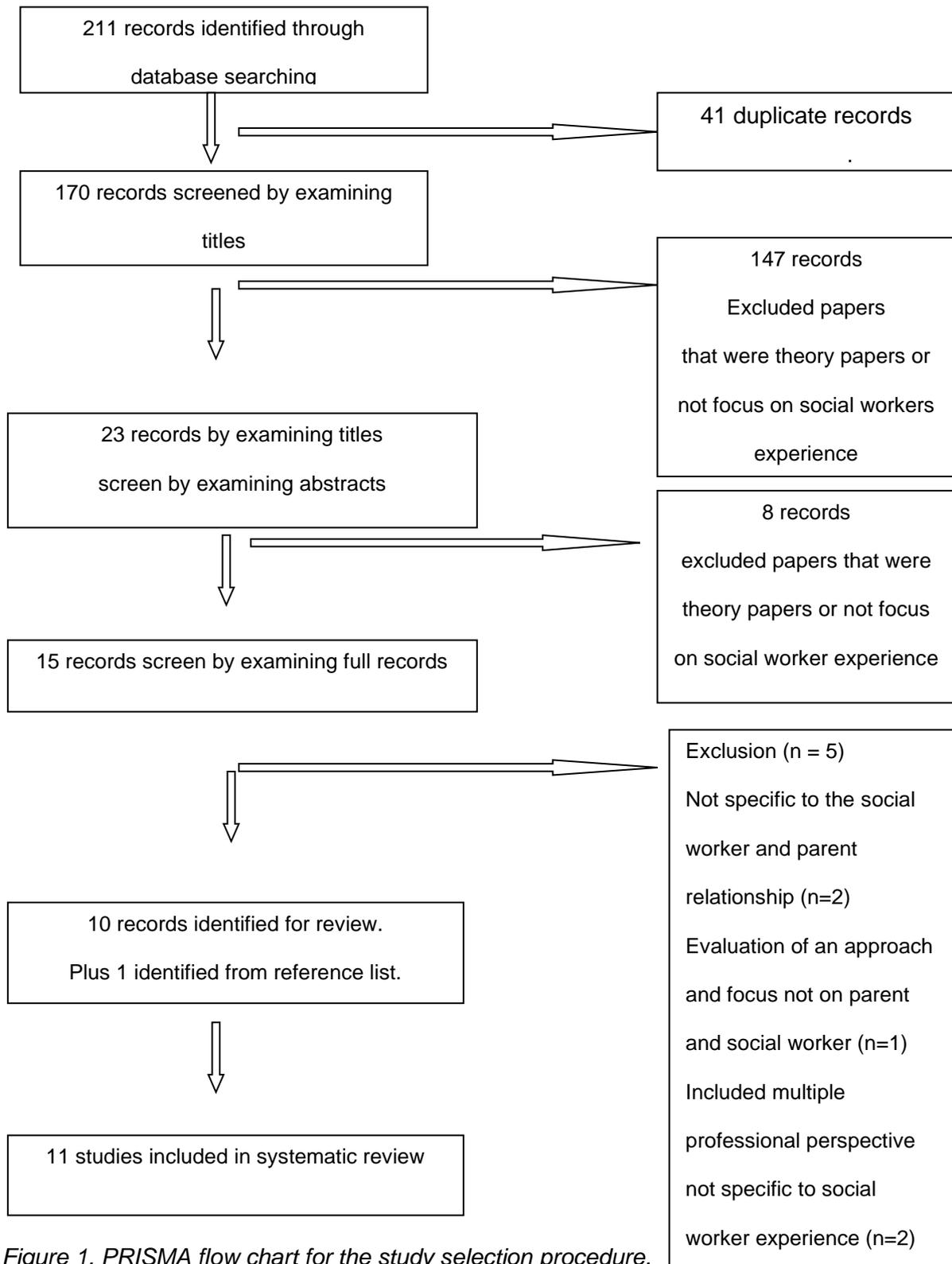
Figure 1. PRISMA flow chart for the study selection procedure.

Table 2 *Summary of Studies included in Systematic Literature Review*

No:	Authors (Year)	Title	Aims	Methodology	Participants	Key Findings	Strength and Limitations
1.	Critchley A. (2020)	The lion' s den' : Social workers' understanding of risk to infants.	To explore how social workers understand and frame risk to infants when assessing families during pregnancy.	Data collection: ethnography using interviews and observations. Data analysis: ethnographic and mobile research methods	41 participants including 12 frontline social workers, 9 chairs, 3 other social work professionals, 12 mothers and 5 fathers.	The study found factors supporting a risk-averse approach to decision making for babies was: -being ' completely convinced' once the possibility of risk has been introduced was shared by participants. -past negative outcomes and experiences of ' atrocity stories' dominated more experienced practitioners. Social workers described a sense of professional risk-taking to justify and convince child protection colleagues to support expecting parents.	Strengths: study produced a large quality of rich data. Names its critical realist epistemology and acknowledges the co-creation between researcher and participants. Resonance is achieved through moving quotes from participants. Limitations: Lack of transparency regarding the analysis process and if triangulation was achieved through the different sources of data.

No:	Authors (Year)	Title	Aims	Methodology	Participants	Key Findings	Strength and Limitations
2.	Ferguson, H., (2016)	What social workers do in performing child protection work: Evidence from research into face-to-face practice.	Do social workers see children alone and, if so, where and how do they relate to them to assess their safety? What are social workers' lived experiences of doing the work and what enables and constrains practice that keeps children safe?	Data collection: ethnography and mobile research methods. Data analysis: Thematic and narrative methods.	24 Social workers were observed and interviewed regarding a total of 87 practice encounters. 71 were on home visits, 9 were interviews with children in school and 7 were office interviews.	The study found social workers to be deeply investigative. Two key factors contributed to the lack of time spent with children on their own and that encounters were so rushed that social workers did not even introduce themselves to the child: i) Organisational pressures of high caseload and the short times set by management and Government. ii) The practitioners varying level of communication skills, playfulness and comfort to get close to children and work with families.	Strengths: A long period of data collection of 6 months when author conducted research yielding large amount of rich data. High ecological validity of research due to ethnographic and mobile research approaches used. First study to fill gap in knowledge to explore how social workers perform child protection on home visits and how they interact with parents and children. Limitation: Lack of transparency regarding the analysis process and if triangulation was achieved through the different sources of data. Limited data provided addressing second aim of study identifying what enables and constrains social workers practice that keeps children safe.

No:	Authors (Year)	Title	Aims	Methodology	Participants	Key Findings	Strength and Limitations
3.	Forrester, D., Kershaw, S., Moss, H., & Hughes, L. (2008b).	Communication skills in child protection: How do social workers talk to parents?	To explores the use of communication skills in child and family social work practice through analysis of taped interviews between social workers and actors playing a parent allocated a social worker ('simulated clients').	Data collection: quantitative research using simulation scenario and questionnaires. Data analysis: Descriptive statistics(Reliability of Rho)	24 Social Workers	On average, Social workers often raised concerns to parents and asked many closed questions, used few reflections and rarely identified positives. The majority of social workers interviews were rated as achieving clarity over issues of concern. However they tended to demonstrate low empathy. With the simulated client responses to this being rated for resistance and information disclosure showing that empathy influenced their responses. The empathic social workers created less resistance and increased the amount of information disclosed by clients.	Strengths: The use of standardised scenarios allows for better comparison across social workers. The study identifies limitations and how this is taken into account. Inter-rater reliability was independently rated data by a second researcher. Limitation: Study uses a standardised 'simulated clients' which are likely to react differently, be more reasonable and listen to social workers more than real clients. No justification of sample size was provided.

No:	Authors (Year)	Title	Aims	Methodology	Participants	Key Findings	Strength and Limitations
4.	Forrester, D., McCambridge, J., Waissbein, C., & Rollnick, S. (2008a).	How do child and family social workers talk to parents about child welfare concerns?	The study uses vignettes to explore social work skills.	Data collection:quantitative research using vignettes and questionnaires. Data analysis: Descriptive statistics	40 Social Workers	Overall, social workers were observed to consistently use a very confrontational and aggressive communication style that was thought to be a systemic issue. There was low levels of listening shown by social workers and little evidence of attempting to take seriously or empathise with the parent's perspective.	Strengths: Random allocation to scenarios. Inter-rater reliability was independently rated data by a second researcher. The study identifies limitations and how this is taken into account. Findings are useful at identifying potential issues for further research. Limitation: Small sample size and no justification of sample size was provided. Entirely London based sample therefore differences in experiences and factors in other areas. Self-selecting sample may be bias as more interested or skilled than others. External validation of findings is needed

No:	Authors (Year)	Title	Aims	Methodology	Participants	Key Findings	Strength and Limitations
5.	Lewis, C., Stenfert-Kroese, B., & O'Brien, A. (2015).	Child and family social workers' experiences of working with parents with intellectual disabilities	To investigate how social workers experience and understand their work with parents with intellectual disabilities.	Data collection: Qualitative research using semi-structured interviews. Data analysis: Interpretive Phenomenological Analysis (IPA).	7 social workers recruited from the same local authority.	Five super-ordinate themes were identified: - " feeling torn" - " experiencing a power imbalance" - " hopelessness" - " having pride in their work" - " experiencing barriers" .	Strengths: The study provides insights into the difficulties from social workers own perspective. It therefore strengthens existing ideas about improving services for parents with intellectual disability. Limitations: self-selecting participants who are likely to represent a biased sample of social workers.
6.	Lynch, A., Newlands, F., & Forrester, D. (2019)	What does empathy sound like in social work communication? A mixed methods study of empathy in child protection social work practice.	To contribute to understanding of how social workers demonstrate empathy in practice and what this might sound like	Data collection: Mixed methods approach. Data analysis: Quantitative coding of the audio recordings (n=110) Thematic analysis(n=10)	(n=110) Audio recording of meetings in a child protection service between workers and parents.	Social workers who demonstrated higher levels of empathy skills used more open questions and reflections in their communication with parents. In addition, they focus on parents emotions and demonstrated this through curiosity about and understanding parents' often difficult experiences. Noteworthy, the majority of were found not to demonstrate a high level of empathy skill.	Strengths: Study provides important first steps to explore how social workers communicate empathy. Suggests areas for future study including investigating the relationship between worker and parent perceptions of levels of empathy shown, develop coding schemes in future research. Limitations: Study focused on the behavioural aspect of empathy rather than the emotional or cognitive. Focus on the verbal communication of empathy rather than the non-verbal or other verbal aspects such as tone and pitch. Focus on uni-factor of empathy rather than with relationship with wider factors e.g. race and gender. Limited sample of one organisation therefore limited analysis variations.

No:	Authors (Year)	Title	Aims	Methodology	Participants	Key Findings	Strength and Limitations
7.	O'Connor, L., & Leonard, K. (2014).	Decision making in children and families social work: The practitioner's voice.	To explore, the practitioner voice and the complex and messy factors that influence the decision-making process at practitioner level.	Data collection: Qualitative study using focus group discussions. Data analysis: Grounded theory	28 participants (of which 13 were pre-qualified social workers and 17 were qualified social workers).	The study found three core categories: i) impact of emotions ii) passing on time iii) strength of professional voice. Time was considered significant in the learning process and that professional development was on a continuum. Contextual and organisational factors are interwoven with time, professional voice and emotions to inform the decision-making process.	Strengths: Study provides valuable insights into how students and practitioners talk about child protection. Choice of using focus groups was suited for this explorative comparative qualitative study. Limitations: Small pilot study based on self-reporting rather than observations of the actual practice of decision making. Paper presented finding and analysis together with limited information regarding the analysis process to allow for replication.
8.	Platt, D. (2008)	Care or control? The effects of investigations and initial assessments on the social worker–parent relationship.	Aims to focus on that borderline area of practice where difficult dilemmas occurred between offering support or undertaking a formal investigation.	Data collection:Qualitative research using interviews. Data analysis:Grounded theory approach	23 case studies involving interviews of both parents and social workers. (involving 14 social workers).	The study identified the following key components of the social worker-parent relationship: *worker sensitivity; *honesty, straightforwardness and the provision of adequate information; * listening and accurate understanding.	Strengths: Study qualitative methods involving interviews with both parents, and social workers examine the effects of more or less coercive interventions between social workers and parents regarding the therapeutic alliance. Limitation: predominantly female sample of parents therefore may not represent the views of fathers.

No:	Authors (Year)	Title	Aims	Methodology	Participants	Key Findings	Strength and Limitations
9.	Pollard, L. W. (2018).	Social worker experience of fatal child abuse.	To provide a holistic, in-depth account and analysis of the social workers' experiences in relation to: the perceptions of their relationships with and the assessments of the children and families involved in the study; the feelings and emotions associated with hearing about the children's deaths, and how events impacted upon the workers in both the long and short term and in personal and professional contexts; the social workers' perceptions of the support and supervision they and their colleagues received post event; the social workers' experiences of participating in a review or inquiries into the children's deaths.	Data collection:Qualitative research using semi-structured interviews. Data analysis: IPA	4 social workers	The study found that all the social workers were significantly affected in different ways by their experience of working directly with a case of fatal child abuse. There was some evidence of good practice, there was also evidence that the organisation could have provided more emotional support to the workers. As there was inconsistent and inappropriate supervision provided following the children's deaths. Furthermore the undertaken serious case review (SCR) further contributes to sense of blame and isolation experienced by the workers.	Strengths: The researcher reflected on the relationship to the topic. Researchers' interpretive analysis was quality checked to add validity and rigour to the research process. The study provided a holistic view of the lived experience within the personal and organisational context of the workers involved. Limitation: No acknowledgement of study's limitation, clinical implications or areas for future research.

No:	Authors (Year)	Title	Aims	Methodology	Participants	Key Findings	Strength and Limitations
10.	Wilkins, D., & Whittaker, C. (2018).	Child-protection social work with parents: What are the barriers in practice?.	To explore the families experience of the social work service, their goals for the intervention and to identify specific difficulties such as alcohol misuse or mental health problems.	Data collection:mixed method approach with qualitative and quantitative questions using questionnaires . Data analysis:Based on principles of action research and realist evaluation	110 observations	Found many examples of key participatory practice skills such as empathy, collaboration and involvement in decision making. There were also many examples of reduced autonomy and excluding parents from decision making. Interesting, the study found that the same worker would adopt a participatory approach with one family and a non-participatory approach with another family.	Strengths: Wide recruitment of all families using child protection services. Adapted approaches early in the project to take into account limitations and reduce resistances from workers. Sample of blind double coding for reliability. Used standardised instruments. Researchers relationship to the topic and their experience is addressed. Limitation: Only qualitative data presented and therefore unknown findings from quantitative arm of study. Relied on one key example to substantiate qualitative findings.

No:	Authors (Year)	Title	Aims	Methodology	Participants	Key Findings	Strength and Limitations
11.	Witt, L., & Diaz, C. (2019).	Social workers' attitudes towards female victims of domestic violence: A study in one English local authority.	Aims to explore childcare social workers' attitudes towards female victims of domestic violence in England.	Data collection: Qualitative research using semi-structured interviews. Data analysis:them atic analysis	9 social workers (two were team leaders and three were newly qualified).	The following themes were identified: *Recognition of domestic violence as a prominent issue with child protection. *Lack of training. *Empowerment *Multi-agency working * Assessing parenting capacity *Focusing on a mother's strengths *Overly focused on the weaknesses of mothers *Attitudes towards mothers' facing domestic violence. * Lack of trust *Raising awareness	Strengths: Study design of using a combination of open and closed questions to balance gaining clear information and participants own response facilitated rapport and provided flexibility to the researcher. Ethics of informed consent and sharing the study aims before the taking part as well as right to withdraw was clearly started. Study identifies limitations. Limitation: Small sample size from one agency, limits its transferability.

Critical Evaluation of Study Quality

The quality of studies included in the review was evaluated using three different quality appraisal tools. This was preferred over the use of one quality assessment guideline, such as Elliott, Fischer, and Rennie (1999), which, although has the advantage of consolidating evaluations of different methodology, is not the most recently published. Additionally, given the methodological variations in the studies selected in the review, which included qualitative, quantitative, and mixed-method research, a methodologically specific quality appraisal framework was preferred.

The seven qualitative studies were appraised using the "Big-Tent" Criteria for Excellent Qualitative Research (Tracy, 2010). Due to the range of epistemological stances and variations in measures used (e.g., semi-structured interviews to observations) in the selected qualitative studies, it was important to use an appraisal framework that conceptualises different qualitative methodological paradigms (Tracy & Hinrich, 2017).

Two quantitative studies were appraised using the Appraisal tool for Cross-Sectional Studies (AXIS) (Downes et al., 2016). This tool was chosen for several reasons: firstly, because the two quantitative studies selected in this review were cross-sectional studies. Secondly, this tool has the strength of being developed explicitly for cross-sectional studies in a rigorous and comprehensive testing process through consultation and review. Thirdly, the AXIS reporting of the risk of bias when assessing quality is another advantage of this framework.

Finally, one of the mixed-methods studies was appraised using the Mixed-Methods Appraisal Tool (MMAT) (Hong et al, 2018). The MMAT has criteria to evaluate qualitative and quantitative studies separately, initially considered for this review. The MMAT criteria for qualitative and quantitative studies are less comprehensive than Tracy's (2010) "Big-Tent" criteria and the AXIS criteria (Downes, et al., 2016). However, it was deemed best to use the entire MMAT for one of the mixed methods studies in order to evaluate both arms of the study and bring these together in one overall evaluation. Since the second

mixed methods study did not provide information on the quantitative arm of the study, it could not be evaluated using the entire MMAT; instead, Tracy's (2010) "Big-Tent" criteria was used. The quality appraisal frameworks used to evaluate each study are included in Appendix B.

All studies contributed in a meaningful way to the knowledge base, and the papers were well written. All authors provided clear research aims, with most situating their research within the relevant literature and identifying a gap that their research would address. Although Platt (2008) provided a useful broad context for situating the research, there was a lack of clarity on stating her research questions and how this related to the existing literature.

On the whole, the methods used in the eleven studies were suitable for the research aims. The papers differed in how their methodology was presented, with the most significant variation being between the quantitative, mixed methods, and ethnographic papers. Witt and Diaz's (2019) paper merged the findings and discussion sections. Because the study outlined ten themes, this limited the space for a full discussion of how the result related to the existing literature. The ethnographic papers (Critchley, 2020; Ferguson, 2016) provided limited information regarding the rationale for methods used, participant demographics, and data analysis, although available in other publications (Critchley, 2019a; Ferguson, 2011). Despite this, Critchley (2020) and Ferguson (2016) used a range of measures, which was the strength of their research (e.g. observations, walking tours, etc.) and which enriched the comprehensiveness of their data. However, it was unclear if the data achieved triangulation.

Most researchers did not adequately convey sincerity through self-reflexivity and transparency regarding the methods and challenges (Tracy, 2010). Only two articles (Pollard, 2018; O'Connor & Leonard 2014) delivered their relationship to the research topic, values, and biases, providing sincerity and transparency. Pollard's (2018) paper provided a thorough ethical consideration section. This stood out as exceptional as most reviewed papers either mentioned gaining ethical approval clearance or gaining informed

consent from participants rather than providing detail of how ethical considerations were managed. O'Connor and Leonard (2014) acknowledged the risk of bias or conflict of interest and researcher impacting participants' responses. Lastly, only one study (Critchley, 2020) provided information on the funding of the research.

Synthesis of Findings

The review synthesises the eleven articles' findings using guidance from Baumeister and Leary's (1997) and Siddaway, Wood and Hedges' (2019). Following reviewing and familiarising myself with the articles, identification of the central and recurring concepts for each were identified and grouped into the following categories discussed below:

- Therapeutic and Communication Skills

- Emotional Impact

- Power

- Professional Variability and Professional Risk

- Barriers

Therapeutic and Communication Skills. Research has been interested in the way social workers demonstrate their therapeutic, communication, and listening skills with parents (Ferguson, 2016; Forrester et al., (2008a); Forrester et al.,(2008b); O'Connor, & Leonard, (2014); Platt (2008); Witt & Diaz (2019).

Platt's (2008) grounded theory study involving 23 case studies of interviews between parents and social workers, suggested that workers' skills were important to good working relationships. Her study proposed three important components in the social worker-parent relationship. Firstly, the social worker's ability to sensitively judge and challenge parenting and childcare issues in a way that takes account of the parent's difficulties rather than through a threatening authoritarian stance was considered necessary. The parents in the study also appreciated the social worker's approach based on fairness and resisting the urge to jump to conclusions based on the allegations of child abuse towards the parents. Secondly, how a social worker can demonstrate honesty and provide adequate information was considered critical to working with parents. Being open was likely to increase the

parents reciprocating openness towards workers, thus improving working relationships (Platt, 2008; Forrester et al., 2008b). Thirdly, emphasis on listening to, valuing, and understanding the parents' perspectives (Platt, 2008; Forrester, et al., 2008a; 2008b; Lynch et al., 2019) was meaningful for the worker-parent relationship. However, Platt (2008) argued that there is a need to adopt a considered manner that does not necessarily completely believe the parent's perspective yet appreciate their perspective. This is because the basis of developing a therapeutic relationship is related to the worker's ability to balance sensitivity of understanding the parent's difficulties alongside raising concerns regarding child protection issues. Achieving a good working relationship requires a high degree of communication and listening skills, reflection, and curiosity by the worker.

Despite the emphasis on open, sensitive and empathic communication styles as important in good working relationships (Platt, 2008), research has found inconsistent evidence of this amongst social workers (Forrester, et al., 2008a; Forrester, et al., 2008b; Lynch et al., 2019). Forrester et al.'s, (2008a) study used vignettes to explore social workers' skills in communications and found that "social workers tended to use a very confrontational and at times aggressive communication style." (p 23). This striking finding was so commonly observed that it was explained by systemic issues which impact social workers' ability to use open empathetic communication skills (Critchley, 2020; Ferguson, 2016; Pollard, 2018).

In addition, Forrester, et al. (2008b) subsequent study went further to explore how social workers communicate empathy. Their study analysed taped interviews between actors as 'simulated parents' and social workers. Although social workers were clear at raising concerns to parents, the study found that they did so through asking many closed questions, using few reflections, and rarely highlighting parents' strengths. This form of communication was rated as low in empathy. Moreover, empathy influenced how much information the 'simulated parent' was willing to disclose. Recent research has supported these findings, showing that social workers with high levels of empathy skills were more curious and tended to use more open questions and reflection with parents (Lynch et al., 2019).

The reviewed literature suggests that social workers do not always demonstrate the desired communication skills (Forrester, et al, 2008a; Forrester, et al, 2008b) and there are variations in the listening skills, use of questions, and reflections (Lynch et al., 2019) when working with parents in child protection. This variation in skills impacts how comfortable social workers are when interacting with both parents and children during child protection home visits (Ferguson, 2016). The social workers who were most able to demonstrate empathy through their communication style were most effective in raising concerns and challenging parents alongside maintaining a positive relationship (Forrester et al., 2008b; Platt, 2008; Lynch et al., 2008). Nevertheless, although there is evidence that social workers require a high level of communication skills to achieve the difficult balance of demonstrating empathy alongside challenging parents with child protection concerns, this has also been found to have an emotional impact on the worker.

Emotional Impact. The majority of the studies referenced the emotional impact of the work of child protection on social workers in some way (Critchley, 2020; Ferguson, 2016; Lewis et al., 2015; Lynch et al., 2019; O'Connor & Leonard 2014; Pollard, 2018), with some focusing on empathy as an emotion as well as skill (Forrester, et al., 2008a; Forrester, et al., 2008b; Platt, 2008; Wilkin & Whittaker 2018).

Research has acknowledged that social workers may experience emotional responses, triggers, and relationship dynamics within their practice and that this can interact with their decision making (O'Connor & Leonard, 2014). A grounded theory study examining the complex factors influencing a social worker's decision-making identified the key theme of emotions' impact on the decision-making process (O'Connor & Leonard, 2014). The relational aspect of interactions between parents and workers can be emotionally charged. For example, the study draws attention to how a parent may trigger an emotional response or a personal experience that may invoke a worker to go over and beyond, perhaps by challenging a manager's decisions regarding service provision. Conversely, a worker may experience negative feelings about a parent and be more readily compliant with a managerial decision that favours the parent. The social workers in the study were aware and

concerned about how their feelings impacted their actions. The study suggested that qualified social workers seemed more able to have ownership of their emotions, power and tolerate ambivalence of decision making regarding a decision justified to have the outcome of protecting a child.

> *Y*ou're *filled with anxiety before you even go, you know what to expect, you know there's going to be a lot of kicking off, ... lots of arguments, ... and it's that kind of anxiety really that I'm talking about as opposed to actually making that decision, it's actually carrying it through.* (O'Connor & Leonard, 2014 p.1812)

The above quote highlighted the emotional discomfort brought about by anxiety around parents' responses regarding the decision made. The weight of the decision regarding child protection measures and removal understandably can have a profoundly personal and emotional impact on social workers.

The emotional impact of child protection on social workers was explored in depth through Interpretive Phenomenology Analysis (IPA) studies looking at their experience of working with parents with intellectual disabilities (ID) (Lewis et al., 2015), and the experience of fatal child abuse (Pollard, 2018). Working with parents with intellectual disabilities (ID) was found to bring about a range of emotions for social workers, including a sense of sadness, regret, and feeling "really sorry" for parents when it came to removing a child (Lewis et al., 2015). A key theme from Lewis et al., (2015) study was *"feeling torn"*, as one participant stated:… *"you're damned if you do, and you're damned if you don't. Expect to never satisfy anybody" (*p. 331).

Social workers appeared to experience emotional conflict as no decision can be a preferable outcome for everyone, i.e., both parent and child (Lewis et al., 2015; O'Connor & Leonard, 2014). The notion of feeling torn by social workers assessing parents with ID, perhaps due to the strongly felt sense of *"power imbalance",* is another prominent theme (Lewis et al., 2015, p. 331). Social workers are identified as being part of a "*very powerful organisation"* which is *"armed with a particular language"* (Lewis et al., 2015, p.331) and who

live with the uncertainty of the potential trajectory of the outcomes. The power imbalance was attributed to feeling conflicted, which came at an emotional cost.

Pollard's (2018) resonant accounts of social workers' worst-case scenario of a child fatality due to abuse provides insights into the intensity of emotions experienced. Her IPA study explored the experience of fatal child abuse in social workers personal and professional capacities. One prominent theme highlighted was "*The pain of knowing—the feelings and emotions associated with hearing about the children's deaths and how events impacted upon the workers in both the long and short term and personal and professional contexts.*" (Pollard, 2018 p.1958). One participant's account highlights the profoundly personal, emotional, and transformative impact on her:

> *You could not be the same person ... to experience working in an environment where you have had a link with a family that has tragically, horrifically lost a child, and to carry on doing what we do. It's not a job is it? You cannot call social work a job. You don't log on and off. Yes, it has changed me; I think of yourself as a person and your own relationships as well changes. Strangely enough I'm not in one (laughs) I now have my own barriers up around things so it does change you as a person, but how could it not change you? If it didn't change you then it would be worrying really. You do think about it, it does come back to you. It is something that will never go away* (Pollard, 2018 p.1959).

The above quote highlights how the tragedy of the death of a child had a profoundly personal and long-term impact on that social worker. The study provided valuable insights into previously under researched phenomena.

Power. The literature has highlighted the impact of power on the social worker and parent relationship. Platt's (2008) study explored the social worker and parent relationships, considering if less coercive and more supportive approaches can improve their relationship. The study highlighted how difficulties arise within the "borderline area of practice where dilemmas occurred between offering support or undertaking formal investigation" (Platt,

2008; p. 304). Unsurprisingly, her research found that social workers were more likely to use more supportive approaches when families are perceived as less risky than when conducting formal investigations. This research's offer of both the social worker's and parent's perspectives delivers great value to understanding the interplay of power within the relationship.

Research has explored the range of factors impacting the parent-worker relationship, with one prominent concept being the impact of power on workers' "strength of voice" (O'Connor & Leonard, 2014, p. 1814). An explorative comparative study using focus group discussions between pre-qualified and qualified social workers found that students felt that their voice was not given weight by others (O'Connor & Leonard, 2014). Students reported being unsure whether the knowledge acquired through training is of value or influence, suggesting that there may be a long-term impact of ambivalence and lack of confidence in an area of complexities and power dynamics such as child protection.

Furthermore, research has found evidence that social workers felt powerless with their wider system in two ways. Firstly, social workers viewed themselves as having less authority or power than other professionals such as managers, legal, medical professionals, police or psychologists (Lewis et al., 2015; O'Connor & Leonard, 2014). They viewed other professionals as having greater power, status, and thus more strength in their voices and influence (O'Connor & Leonard, 2014). Secondly, the sense of powerlessness was associated with feeling unable to support parents adequately due to lack of services available or difficulties with accessing appropriate services, perhaps explained by a sense of powerlessness experienced by workers and parents. For families, factors such as class, education, access to information, levels of aggression, compliance, and workers' views of who 'deserves' suggested contributing to the absence of service users' sense of power and voice (Lewis et al., 2015). Consequently, the shared feeling of powerlessness between families and social workers in child protection services brings about emotional and ethical dilemmas.

Professional Variability and Professional Risk. Social workers practice varied, and they appear prone to feeling exposed to professional risks. Research has identified variation amongst social workers related to communication skills (Forrester, et al., 2008a; Forrester, et al., 2008b; Lynch et al., 2019), playfulness, comfort in closeness (Ferguson, 2016), in their use of participatory approaches (Wilkin & Whittaker, 2018), and the strength of their voice (Critchley, 2020; O'Connor & Leonard, 2014; Witt & Diaz, 2019).

Ferguson's (2016) seminal research using ethnographic and mobile methods highlighted that social workers independently spent small amounts of time with children. The social workers' communication skills and relational capacities were significant yet seemed to vary. How playful and comfortable social workers were to get close to children and engage with parents also varied. Additionally, Ferguson's (2016) observations highlighted that workers talked with parents about their lives, relationships, and parenting difficulties while engaging with children. From these observations, the apparent challenge was that workers had to find ways of shifting their focus between children and parents. Ferguson (2016) argued that although this took real skill, it was undoubtedly worthwhile. It enabled the worker to develop deep and meaningful relationships with the families and thus enabled therapeutic change. This investment in the therapeutic relationship requires skills and may come at an emotional cost and professional risk.

A less frequently cited yet the important concept was professional risks (Critchley, 2020; O'Connor & Leonard, 2014; Witt & Diaz, 2019). Building on the work of Ferguson (2016), Critchley's (2020) ethnographic study of pre-birth child protection explored the experience of how social workers understand and frame risk to infants when assessing families during pregnancy. Critchley (2020) suggests that social workers are inclined to ensure the immediate physical safety of a baby once born, over and beyond the time needed to build a relationship with parents to support them to care for their baby. Thus, social workers felt a sense of professional risk against the backdrop of a systemic culture of blame and a tendency to be risk-averse (Pollard, 2018). Critchley (2020) argued that many social workers faced ethical dilemmas and had to make difficult choices regarding practice. Social

workers may have to choose between working in line with their values to support expecting parents, for example, or practice in risk-averse ways that made them face great moral compromise. Despite working in a systemically risk-averse culture, some social workers were able to work with parents to bring their babies home and sustain positive working relationships (Critchley, 2020). Thus, this is an important finding that has implications to consider, such as which factors impact on social workers' ability to take positive risks and work in line with their values with parents.

Barriers. A range of barriers have been identified as a hindrance to social workers' ability to form collaborative relationships in child protection, including time constraints, workers' skills, and systemic cultural factors (Critchely, 2020; Ferguson, 2016; Lewis et al., 2015; Pollard, 2018; Wilkins & Whittaker (2018); Witt & Diaz (2019).

Firstly, time constraint is a barrier to the parent-worker relationship in child protection. This notion is supported particularly in the context of pre-birth assessment (Critchely, 2020), which is highly time-sensitive and, as highlighted previously, encourages a worker to prioritise the immediate physical safety of the child over the time required support the parent(s) to change or learn. Connected to time constraints is the time (and skill) needed to effectively communicate with parents experiencing domestic abuse (Witt & Diaz 2019) or with ID (Lewis et al., 2015). For example, social workers often did not feel able to dedicate the time nor have the skills to communicate with parents with ID. Leading to suggestions for the need to signpost to independent skilled advocates who can spend the time to explain the organisational processes, advocate, and hold the parent's view, thereby allowing the social worker to maintain their focus on the child (Lewis et al., 2015; Wilkins and Whittaker 2018). Altogether, time is a significant factor that can facilitate or hinder parent-worker relationships and is pertinent to parents' experiences of child protection.

A social worker's level of experience and skills is important in balancing the social work task of supporting parents and investigating alleged child protection concerns. Inadequate levels of worker skills and experience, whether generally in cases of newly qualified workers (O'Connor & Leonard 2014) or regarding specific issues such as domestic

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abuse (Witt & Diaz, 2019) or ID (Lewis et al., 2014), has been suggested as a barrier to the development of the parent-worker relationship. Conversely, Wilkins and Whittaker (2018) found that the same social worker may skilfully adopt participatory child protection practices with one parent and opt not to with another parent instead of adopting an authoritarian stance. They suggested that this depended on managing risk and that adopting participatory approaches may not be appropriate for all parents. Thus, there is contradictory evidence of how skill and experience impact the worker-parent relationship, given the complexity of managing risk in child protection.

Conclusion

This systematic review on child protection social workers' experiences of working with parents identified eleven research studies. Of note, the review was limited to the UK only, using the specified databases; further research may be available in other languages and databases. The reviewed literature emphasised the importance of social workers' therapeutic and communication skills when working with parents in child protection. However, some studies reported inconsistent evidence of social workers demonstrating these skills despite the importance of developing good worker-parent relationships. Some studies found social workers sensitively and skilfully engaged and communicated with families, holding both the child protection concerns and the parent's difficulties in mind.

The reviewed literature suggested that along with the workers' skills came the emotional impact of child protection work. There was a focus on empathy when working with parents as particularly beneficial to engagement and collaborative working. The two IPA studies (Lewis et al., 2015; Pollard, 2018) highlighted the profoundly personal and professional emotional impact on social workers when working with parents with ID and where a child fatality occurs due to abuse. The reviewed literature highlighted how social workers perceive power differently, whether powerful or powerless, depending on different factors. There were variations in the experiences of social workers and how they related to parents, acknowledging their range of skills, experiences, values, and how this relates to the

diversity of families and child welfare concerns and risk. Lastly, the reviewed literature suggested various barriers to collaborative worker-parent relationships, including time, constraints, worker's skills, and systemic cultural factors.

Aims and Rationale for the Current Study

This study aimed to examine experiences of child and family social workers assessing parenting capacity. As previously emphasised, research in this area is limited, as indicated by no studies found exploring UK social workers' perspectives on parenting or parenting assessments. Therefore, there is a need to fill this knowledge gap in literature; however, it is important to consider the potential implications of the research to provide further justification to carry out the research.

Firstly, as outlined in the introduction chapter, parenting assessments can be used both as a meaningful intervention in family safeguarding and as a piece of convincing evidence for child removal or family preservation in court. Yet, given its importance and helpful guidance provided as to what social workers need to address in a parenting assessment, little is known about how social workers experience this.

Secondly, except for one study reviewed in the introduction (Woodcock, 2003), there is limited knowledge about how social workers conceptualise parenting generally and how this may inform their parenting assessments. Therefore, it would be of interest to explore social workers' frames of reference and conceptualisation of 'good enough parenting' in the context of family safeguarding. This research is less concerned with how social workers used evidence-based approaches to assessing parenting and more interested in their personal lived experiences related to working with parents. Therefore, although participants may choose to discuss various models and training that informs their practice, which will help them get oriented to discussing this at the interview, it is deemed not directly relevant to the current research aims to include this as part of this work. However, could be explored in a subsequent paper.

Thirdly, the review highlighted the emotional impact on social workers regarding specific issues such as child fatality due to abuse (Pollard, 2018), working with parents with ID(Lewis et al., 2015), and parents experiencing domestic abuse (Witt & Diaz, 2019). It would be of clinical relevance to explore the emotional impact of the generic task of a parenting assessment. The current study proposes examining the interplay of how parenting assessments may bring up ethical dilemmas, their emotional impact on social workers' wellbeing, which may impact the social worker-parent relationship, as suggested by the literature.

Lastly, the current literature has provided meaningful knowledge of the factors that hinder social worker-parent relationships. This knowledge has been interpretive and raised in the reviewed literature discussion of findings rather than directly from participants from the studies. It would be important to extend this knowledge base by exploring the support and coping strategies that facilitate social workers in their role from their perspective.

Research Question. Following on from the aims and rationale outlined above, the research question for the current study is:

- How do social workers experience assessing parenting capacity?

Three secondary questions that helped to 'answer' and narrow the scope of the primary research question are (Smith et al., 2009):

- What frames of reference do social workers draw on when assessing parenting?

- How do social workers experience engaging with parents around parenting assessment?

- What are social workers experiences of support and coping strategies in their role with parents and generally in their profession?

Chapter 2: Methodology

Design

This study aims to explore the experience of social workers assessing parenting capacity. This research explores deep rich, personalised accounts of participants' lived experiences, which qualitative methodologies can best capture (Barker et al., 2002). Therefore, a qualitative approach employing semi-structured interviews was considered the most fitting way to explore the research question in order to explore interesting, important ideas expressed by the participants in the interviews.

Consideration of Methodologies

These qualitative methodologies were considered for this research earlier in the process;

i) Grounded Theory (GT; Charmaz, 2006);

ii) Discourse Analysis (DA; Edwards & Potter, 1992; Kendall & Wickman, 1999)

iii) Narrative Analysis (NA; Crossley, 2000; Emerson & Frosh, 2009).

iv) Thematic Analysis (TA; Clarke & Braun, 2014).

There is an acknowledgement that each of these methodologies has something valuable and unique to offer. A brief outline of these methodologies and rationale for the final choice of Interpretive Phenomenological Analysis (IPA) follows.

Grounded Theory. Grounded Theory (GT) emphasises theory construction intending to generate explanatory accounts of social processes, giving weight to the contexts they occur within (Starks & Brown-Trinidad, 2007). However, since the present study's research aims to privilege meanings of participants' experiences (the 'what') rather than the processes (the 'how') concerned more with individuals' experiences, IPA is preferred over GT.

Discursive Analysis. Discursive Analysis (DA) focuses on linguistic and social communication patterns in conversations (Smith, 2015). Although, DA and IPA share similarities of requiring attention to detail and pays attention to language during analysis, DA focuses on the role of language is on describing a 'person's experience (Biggerstaff & Thompson, 2008), whereas IPA considers language alongside conceptualising, meaning-

making in participants experiences (Smith et al., 2009). IPA is preferred over DA, as it also considers interactions with participants contexts (Smith et al., 1999)

Narrative Analysis. Narrative Analysis (NA) was considered, given its focus on how people construct their own accounts and its emphasis on the way stories are co-constructed and used to represent and interpret individuals and their social world around them (Emerson & Frosh, 2009). However, NA is concerned more with how experiences are storied, who they are constructed for, and their purpose. NA's strong focus on the narrative compared to IPA's ability to consider narrative as part of a wider process of sense-making without being inhibited by essentiality was considered important for this study's research aims (Smith et al., 2009).

Thematic Analysis. Thematic Analysis (TA) was considered for this research as it is used to identify and interpret the patterns and themes emerging across qualitative sets of data (Clarke & Braun, 2014). The use of TA results in broad, descriptive analyses of several participants (Hefferon & Gil-Rodriguez, 2011). Since the aim of this research is to study a lived experience in detail, with a more idiographic and interpretive focus, IPA is considered a suitable methodology.

Interpretive Phenomenological Analysis (IPA)

IPA aims to explore, in detail, how individuals make sense of their social worlds (Smith, 2015). IPA focuses on how people create meaning to their life experiences (Pietkiewicz & Smith, 2014). An IPA study considers individuals as embedded and immersed in relational worlds of objects, language and culture and that people create meaning based on their relationships with these different aspects. As individuals' experiences the phenomenological aspect, IPA cannot be directly accessed, sense-making is accessed through 'individuals' interpretations and with individuals' accounts reflecting these attempts (Smith et al., 2009). A phenomenological and interpretive approach of this nature would allow the researcher an insight into people's lives from their frame of reference. Since the

focus of this research was to explore 'participants' experiences of assessing parenting capacity, it was thought that IPA would be best placed to achieve the research aims.

The next section will briefly summarise the theoretical approaches and the underpinning of IPA to help orientate the reader to the foundations of this chosen method and provide further justification for its selection. In Smith and colleagues (2009) work, IPA has three theoretical underpinnings: phenomenology, hermeneutics, and idiography.

Phenomenology. Phenomenology as a philosophical approach is concerned with studying experience and is considered the science of the essence of experience (Husserl, 1982). A central principle of phenomenology is the study of experience is, in the way it occurs and in its terms. Husserl (1982) thought it was possible to identify the key aspects of experience through reflection and bracketing. This involves the researcher stepping outside of the immersion of the experience and becoming conscious of the process of experiencing it.

IPA adopts a phenomenological stance through attempting to, as far as possible, give a direct description of experience as it is (Merleau-Ponty, 1996). Although IPA is a little less ambitious than a purest phenomenological approach, IPA endeavours to investigate and encapsulate the lived experiences of particular people (Smith et al., 2009), seeking to gain an 'insider perspective' (Smith & Osborn, 2003).

Heidegger (1962) discussed that we are all inescapably a 'person-in-context'. Thus, as their values systems influence researchers, beliefs and experiences, all experiences are always connected inter-subjectively; 'in-relation-to', in communication with, and to be interpreted by, others. This is where the interconnection between phenomenology and hermeneutics occurs.

Hermeneutics. The hermeneutics approach is related to the theory of interpretation (Smith et al., 2009), which suggests that a simple description of an experience from one person to another is not possible and that every communication involves interpretation. Therefore, it follows that IPA researchers cannot avoid involvement in constructing experiences that are shared with them (Griffin & May, 2012).

This methodology involves a co-construction of participants' experiences, the assigned meanings, and the subsequent conclusions drawn. IPA's interpretative element encourages researchers to be explicit with the reader about the researcher's own biases and preconceptions while attempting to 'bracket' them as far as possible (Elliott et al.,1999; Smith et al., 2009). The participants' meaning-making is described as 'first-order' meaning-making, which is subsequently heard and interpreted in a 'second-order' process as the researcher attempts to try and makes sense of the participant trying to make sense of their experience (Smith et al., 2009).

By its very nature, the hermeneutics approach is concerned with the inevitable interplay between, one's preconceptions, biases and past experiences and the new information presented to them. Therefore, IPA researchers are said to engage in a 'double hermeneutic' (Smith, 2004; Smith, 2015), meaning that they are involved in interpreting the participants' interpretation of their experience.

Idiography. An idiographic approach is committed to detail; in-depth analyses concerned each participant's uniqueness (Smith, 2015). It also emphasises the value of particular people's personal accounts and perspectives in specific contexts (Smith et al., 2009). 'IPA's concern with idiography is thought to be able to move from the particular individual experience closer to the universal through gaining insight about the 'essence' of human experience (Smith et al., 2009). IPA research uses small sample sizes to capture and reveal experiences at the individual level and through the group level by examining similarities and differences. An idiographic approach would be advantageous to use where there is limited research in this area, as is the case for this study. In addition, the use of one-to-one semi-structured interviews with small sample size is recommended in IPA studies (Sullivan, Gibson & Riley, 2012).

Strengths and Limitations of IPA

Many of the strengths and the rationale for choosing IPA methodology have been discussed above. In addition to IPA's suitability to meeting the aims of this current research,

it has the advantage of providing an in-built structure and guidance that ensures rigour and useful validity checks.

Willig (2013) identified three possible limitations of IPA; reliance on language, description over-explanation, and that IPA does not theorise reflexivity. It is important to acknowledge these limitations to keep them in mind throughout the analytical process to reduce their impact on the interpretation of data. IPA presupposes that language is an adequate means to capture participants' complexity of experiences and thus depends upon individuals abilities to express themselves in language. Arguably, participants may not be able to describe the nuances of their experiences adequately. The analysis may not capture the phenomenological differences between participants through the sole use of language.

However, a counter-argument to this is that a key role of an IPA researcher is to ask questions about not only what is explicitly said but also what is unspoken (Smith & Osborn, 2008). Moreover, the ongoing interpretation process of IPA is a real strength of IPA. Lastly, the term emerging themes within IPA has connotations of discovery rather than double hermeneutic of co-construction between participants and researchers (Smith, 2004; Smith et al., 2009). Willig (2013) argues that although IPA acknowledges the researcher's involvement in the analysis, it does not inform the researchers how to avoid this becoming problematic. There is, therefore, a need for IPA researchers to adopt their conscious reflexivity processes and to make this transparent throughout the analytical process.

Ethical Considerations

This section will cover how ethical approval was obtained and consider the ethical issues relevant to this research. The University of Hertfordshire Ethics Committee granted ethical research approval in June 2020 (Appendix C; protocol number: LMS/PGT/UH/04199).

Informed Consent

Potential participants interested in participating in the study were provided with a Participant Information Sheet (PIS: Appendix D). There were opportunities for participants to

speak to the researcher before deciding to ask questions and help them make an informed decision about their participation. Participants were required to read and sign a Consent Form before taking part (Appendix E).

The PIS and Consent Form informed participants that they have the right to withdraw their interview from the research process any time up to four weeks after their interview was recorded. Participants were reminded of this at debriefing. The four-week limit was set to avoid the loss of interviews for the study at a point in time where it would become too difficult to extract data from the analysis.

Confidentiality

Confidentiality was maintained throughout the research process. Information regarding confidentiality and its limits were provided to participants, both verbally and in writing. In line with the Data Protection Act (1998), all interviews were audio-recorded, transcribed, anonymised, coded and kept securely to maintain confidentiality. Once uploaded, the audio files were password protected. The transcription documents were also password protected, with only the researcher and principal supervisor having access. Any identifying information such as names and places within transcripts were changed for anonymity purposes.

Risk of Distress to Participants

The research team did not foresee any risk of harm to participants; however, we considered how interview questions might have reminded participants of challenges within their work or personal life, which could have potentially been distressing. For example, the interview explored sensitive topic areas reflecting on their childhood or their own parenting experience, which may bring up difficult feelings. Therefore, certain safeguards to minimise the potential distress to participants was undertaken, including informing participants that the interview could terminate if they were distress. None of the interviews required being paused or discontinued due to distress experienced by participants. A debrief form with support information was provided to participants at the end of the interview (Appendix F).

Interview Schedule Design

The interview schedule was developed in light of relevant literature, in line with IPA guidelines (Smith et al., 2009) and with consultation with the supervisory team. Furthermore consulting with parents with lived experience on the receiving end of parenting assessments was deemed necessary in gaining their perspective. A professor in social work with substantial child protection experience and publications provided a consultation role for the research. The interview schedule covered the following areas;

- social workers' assessment of parenting,

- what shapes their opinions and recommendations,

- how their knowledge and experience of being parented or being a parent may inform their ideas of parenting,

- the emotional and ethical impact of assessing parenting capacity/decision making,

- experience of the therapeutic relationship over time and

- what resource they draw on in their role of assessing parenting.

Pilot Interview. The interview schedule was piloted with a senior social worker to test out the questions and obtain feedback on the whole process of the interview. The consultant feedback about the interview questions was to begin by eliciting factual information that would initially help participants feel comfortable and willing to discuss personal and professionally sensitive experiences. The interview questions were subsequently changed and organised in a way that allowed more reflection and exploration as the interview progressed.

The feedback from the pilot interview and discussion with the principal supervisor lead to improvement in the clarity of the interview schedule questions. The pilot interview was not included in the main study since there were considerable changes to the interview schedule, including:

- the wording of questions,

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- omissions of redundant questions,

- adding open prompt questions and

- requests for examples to encouraging reflection and openness in responses.

The final version of the interview schedule is in Appendix G.

Recruitment

The recruitment occurred from a single location, Family Safeguarding Service (FSS) working with families and children. The FSS is a fully integrated service working with families and children on a CP and CIN basis[3]. The benefit of incorporating sub-divisions means smooth stepping up or down depending on risk and needs, which also helps the continuity of care amongst the 'highest-risk' families and children referred to FSS. The service focuses on reducing physical and emotional harm and improving health and education outcomes through working with a multidisciplinary team (MDT). The MDT includes social workers, psychologists, parental mental health, drug and alcohol workers and domestic abuse workers.

Three strategies were used to recruit social workers. The first recruitment strategy employed was to recruit via the external supervisor who works in one of the Family Safeguarding Teams. Initially, a recruitment advert was emailed to the external supervisor, who acted as a gatekeeper to facilitate recruitment by sending the recruitment information to the team administrators who cascaded it to various teams.

Secondly, a snowballing sampling method was used to help identify and recruit participants by asking participants who participated in the study to forward the recruitment advert to others who may be interested in participating. The recruitment advert is in Appendix H.

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[3]Family Safeguarding Services (FSS) are usually divided into two sub-divisions which work with families on a Child Protection (CP) plan and Child in Need (CIN).

Thirdly, to keep the recruitment streams live, the researcher attended Family Safeguarding Team Meetings to facilitate recruitment to the study. All contact was virtual due to the study occurring during the COVID-19 pandemic.

Participants were recruited to the study, based on being a qualified Social Worker, with at least one year experience of working in a Family Safeguarding Service and having experience in completing parenting capacity assessment. Student social workers, team managers and service leads who were social workers were exclude from the study as it was considered their status would mean a difference in level of responsibility compared to front line social worker. The current study is interested in the experience of frontline social workers assessing parenting in their routine practice. Although there are instances when team managers and team leaders may be involved in assessing parenting, this is infrequent and often likely to be of the more complex nuanced parenting assessments rather than routine. Table 3 shows the participants inclusion and exclusion criteria.

Table 3 *Participants Inclusion and Exclusion Criteria*

INCLUSION CRITERIA	EXCLUSION CRITERIA
• Qualified Social Worker • Should have at least one year of experience working in the Family Safeguarding Team. • Have experience in completing parenting capacity assessments.	• Student social workers • Social workers managers or Team Leaders or Service Leads.

Online Interviews

Due to the COVID-19 pandemic, all interviews were conducted virtually via Zoom or MS teams. Research has looked at the advantages and disadvantages of using online interviews as a tool for qualitative research (Lo Lacono et., 2016; Archibald et al., 2019). One advantage of online interviews over in-person interviews is the convenience, efficiency, flexibility and cost-effectiveness. However, a disadvantage may be the difficulties in building

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a rapport via an online interview compared to in-person (Cater, 2011). An evaluation of the impact of using online interviews in this study is provided in the discussion section.

Participants Information

The research sample consisted of five social workers from a family safeguarding service. Participants completed a short demographic questionnaire (Appendix I). All participants were female, with most participants aged between 36-45 years old with one participant was younger and one was older than this age range. Most participants identified themselves as White British, with one participant identifying as Mixed White and Middle Eastern. The number of years of experience ranged from one year to 27 years and there were three participants who were parents. Table 4 presents details of participants' demographic information and their pseudonyms.

Table 4 *Participants Demographic Information and Pseudonyms*

Name	Gender	Age Range	Ethnicity	Qualification level	No. Yrs Social worker	Experience FSS	Parent
Courtney	Female	36-45	White British	Masters level	1.4 months	3 years	No
Marie	Female	26-35	White British	Post gradual level	1 year	1 year	No
Natasha	Female	36-45	Mixed White and Middle Eastern	Degree Level	9 years	3 years	Yes
Joanna	Female	36-45	White British	Post gradual level	3 years	5 years	Yes
Maggie	Female	66-75	White British	Degree Level	27 years	27 years	Yes

Data Analysis

The analysis was conducted by drawing on IPA guidance from Smith and colleagues, (2009), alongside ongoing consultation with supervisory team, who have IPA experience. Table 5 presents an outline of recommended procedure to follow for IPA

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research (based on Smith et al., 2009). The following section will outline the procedure

followed, however for a more detailed discussion, see Smith et al., (2009).

Table 5 *Outline of IPA procedure*

Stage	Procedures
1	Formulate research questions based on experiences and understandings of a particular phenomenon and acknowledge the researcher's subjective perspectives.
2	Choose a homogenous sample with experiences of the phenomenon.
3	Conduct semi-structured interviews with participants and transcribe the interview data.
4	Analyse interview data by: a. Familiarising and immersing in data by listening to recording, reading first transcript line by line several times; b. Noting descriptive comments in the left-hand margin; c. Noting emergent themes in the right-hand margin; d. Repeating the same process of all transcripts; e. Identifying emergent themes across accounts; f. Clustering themes into a list of master and sub themes.
5	Produce narrative accounts of experiential themes using excerpts of participants own words to exemplify their attitudes and experiences.
6	Link identified themes back to existing research and acknowledged 'researchers' subjective perspectives.

I began the analysis by listening to the recordings and reading the transcripts several

times to get immersed in the data. Whilst doing so, I interrogated the data further and moved

towards reflecting upon my preliminary thoughts and pre-understanding of the research

topic. First impressions and a brief overall summary of each interview were noted. As

recommended by Smith et al., (2009), initial comments were separated into three areas;

descriptive comments based on the content; linguistic comments on the use of language,

and conceptual comments were later made at an interpretative level, which were refined

through each re-reading and analysis stage (Smith et al., 2009). Key phrases and specific

comments that reflected participants' experience and possible interpretations were

highlighted (see Appendix J, example of analysed transcript).

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Through this process, a line-by-line analysis of each transcript was conducted on each interview. Participant's accounts were examined while, along with considering reflections and interpretation that had been made were taken into account. This line-by-line analysis was repeated several times for each transcript while using the right-hand side of the page to note emerging themes. This process required a higher level of abstraction and conceptualisation to capture and reflect an understanding of individuals' experiences while remaining close to the data (Smith & Osborn, 2008). It was important through the analytic process that I reflected on my interpretations and emerging themes which were regularly cross-checked against the transcript to ensure that these remained grounded within the participant's accounts.

The next stage was to look for connections between the identified themes one interview at a time. This process helps to consider how each theme fitted together, including how polarised themes were and their frequency. Some themes became superordinate themes through subsumption meaning that an emergent theme becomes a superordinate theme[4] as it brings together a number of related other themes (Smith et al., 2009).

Other master themes came from putting various 'like for like' emerging themes together, and putting a new name for the cluster, this process is known as an abstraction (Smith et al., 2009). A list of the master themes and sub-themes for each interview was created.

The above process was repeated for all five interviews, looking at each interview in depth before moving onto the next. Finally, patterns and connections across all participants' master themes were considered. Through this process, some master themes relating to all participants, whereas others were put together and given a new name. A final list of the master themes across all cases was created, including the emerging themes nested within

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[4] Superordinate themes is the IPA term which refers to the higher level theme also known as master theme which will be referred to throughout the document for consistency and clarity.

each participant's master theme. This master list of themes provided a coherent framework to understand the experience of social workers assessing parenting. The results are reported in a narrative form incorporating the final list of master themes, their subthemes and supporting extracts from participants' transcripts.

Quality in Qualitative Research

The current study has been informed and developed by considering the "Big-Tent" Criteria for Excellent Qualitative Research (Tracy, 2010) to evaluate and assess the quality of this research. The discussion chapter provides full details of the review of this research against these quality guidelines. Also, the research impact and importance is provided in the discussion chapter. Additionally, drawing on the criteria by Yardley (2008), which has been applied to numerous IPA studies (Smith et al., 2009) and recommended as the most appropriate for the validity of an IPA study (Hefferon & Gil-Rodriguez, 2011). The following criteria will be addressed next:

- ✓ Sensitivity to context

- ✓ Commitment and rigour

- ✓ Transparency and coherence

Sensitivity to Context

The essential purpose of all research is to contribute and advance existing theory and knowledge (Spencer et al., 2003). Through the conscious efforts to;

- situate the current research in the context of the current political agendas,

- existing social care and child protection services,

- by exploring the relevant literature on the experience of social workers working with families.

The above considerations demonstrate how this research contributes to existing theory and knowledge and relates to context. Additionally IPA accepts that socio-cultural, political and historical influences play a significant role in personal sense-making (Smith et al., 2009). Using semi-structured interviews also allowed for this, alongside appreciating the impacts of

demographic and personal characteristics of participants to be explored. It was important to conduct the interviews in a person-centred way that enabled participants to feel at ease and thus facilitate the collection of high quality, rich and sensitive interview data. Furthermore, the data were analysed and interpreted with care to remain grounded in verbatim extracts from transcripts.

Commitment and Rigour

Researchers need to demonstrate a commitment to qualitative data collection, analysis and interpretation as systematic and transparent to apply this to the complete research process (Spencer et al., 2003). The commitment to rigour is demonstrated through the pilot interview process and ongoing bracketing with the research team and peer IPA researchers. In addition to the ongoing diarised reflections throughout the research process (Ahern, 1999).

Throughout the research process, an effort was made to achieve rigour and transparency through reflection and reflexivity regarding the underlying research motivations, formulations, interpretations, and data reporting. This involved acknowledging and being aware of the impact of my position on the research process and careful in the efforts to carry out a stringent analytical process, using practical group analysis sessions led by an academic tutor with extensive IPA experience. This was beneficial for many reasons, including the supervisory team agreeing on the themes produced, and they could see how they had emerged from the transcripts. Finally, the careful and thorough considerations of the various aspects of the research is hoped to have led to a comprehensive results section that follows, which adds breadth and depth of new insights to the subject matter under exploration (Yardley, 2008).

Transparency and Coherence

Transparency has been considered a key feature of good-quality research. Central to this is openness on the researcher (s) about aspects of them that could affect the qualitative research process, including experiences and motivations that shape their approach. To address this, I have been open about various aspects of myself that could influence the

research, such as my epistemological position and my connection with this topic. Therefore, my constructed view of the experience of assessing parenting is influenced by my experiences working with families in mental health and learning disabilities and my gender, ethnicity, social class and understanding of child protection. There have been examples of how I exercised transparency and self-reflexivity throughout the data analysis process. For instance, I wrote in transcript margins or my reflective diary whenever I experienced a strong resonance or reaction to participants' experiences. Acknowledging it and giving space to reflect on it through writing or discussing it with supervisors or other colleagues helped to bracket my experiences (Tufford & Newman, 2010). This enabled me to get close to their experiences.

Chapter 3: Results

This chapter presents the findings of an Interpretative Phenomenological Analysis (IPA) of five social worker's experiences of assessing parenting. Through analysis and interpretation, three master themes and their subthemes were identified. The remainder of this chapter will focus on describing these in detail, providing interview extracts to illustrate and evidence the credibility of the interpretations. The following account presented provides one possible interpretation of how participants experience of working with parents and the process of assessing parenting.

As discussed in the methods chapter, the influence of the researcher's perspective in the analytic process is acknowledged, and the inevitable double hermeneutic (Smith et al., 2009) is at play in this process. Nevertheless, efforts to present a plausible and coherent account of participants' experiences were achieved through following a rigorous systematic analysis and interpretation of the data. Despite this, another researcher may have generated alternative themes to those presented here (Elliott et al., 2009). Furthermore, an added third layer of meaning-making and understanding to this hermeneutic process is through the readers' unavoidable integration of their meanings, perceptions, and biases of these findings and their understanding of them (Smith et al., 2009).

In line with Smith et al. (2009) guidance, a balance between individual experiences and perspectives with more generalised conceptual understandings is presented. The findings represent the degree of convergence and divergence within and across themes and participants' accounts. An outline of the master themes from each of the five participants' accounts is in Appendix J providing an overview of the representation of the group-level themes for each participant. Table 3 provides a summary of the master themes and subthemes.

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Table 6 *Master Themes and Subthemes*

Master Themes	Subthemes
Bringing the past into the present and future identity	Tied into family origins and social context
	Evolving professional identity
	Being driven by personal values
Delicate balancing act	Being pushed and pulled in different positions
	Navigating personal and professional identity
	"You're at war with yourself" - Enduring ethical pain & its emotional toll
Sustaining oneself in a maligned profession	Learning to disconnect
	Developing self-awareness
	"Being seen"– through different relationships

Master Theme 1: Bringing Past into the Present and Future Identity

This master theme reflects participants' past experiences before entering the profession. It addresses how their family origins, social context, and previous work experiences may inform participants' understandings and approaches to working with parents. The theme title reflects the quality of this experience as somehow inseparable in that the past informs the present and future knowledge, experience and its impact on identity, both personally and professionally.

Within this master theme, three subthemes were identified to help explain the experience of social workers assessing parenting capacity. Firstly, the participants reflected on their ties to their family origins, and social context which seems to explain the influence of the past. Participants' past family backgrounds seemed to be brought forth in their current outlook towards working with parents around safeguarding. Secondly, the participants reflected on their previous work experiences before entering the social work profession. The evolving professional identity subtheme represents the present stance and informs their knowledge, views and approaches when working with parents. Thirdly, participants reflected on their values that guided the way they assess and support families. There was a sense that this formed a starting point or a driving force in their practice. Their evolving professional

identity seemed to be connected to and driven by their values and ethics when working with families. Being driven by personal values may go towards explaining how their future professional identity develops.

Natasha's account highlights her understanding of her personal and work experiences, combining to form biases that inevitably impact her view unless met with a considerable level of self-awareness, reflection, and effort to understand the impact on her practice.

Becoming a parent has perhaps changed the way I see things as well. So I definitely think that each of us as workers have a bias. And actually, it makes it very difficult for families, because each worker works in a different way, from their own experiences, whether that's with their own personal experiences, or parenting, their personal experiences, or parenting their own children, or the different families they've happened to work with.

My experience parenting, the amount of siblings I have, the environment that I grew up in is absolutely going to shape my views... I know, for example, that based on my own childhood, there are certain triggers that I have to look out for, there are certain things that I might find slightly more difficult. And I need to put more effort into doing that piece of work or understanding how my own views or not my own experiences that have shaped that intervention or that work. (Natasha)

Natasha reflected on how intertwined past personal experiences are with present and future experiences at work. These past experiences form the foundations of participant's values and their evolving personal and professional identities.

Subtheme 1.1: Tied into Family Origins and Social Context

This subtheme reflects participants' connections to their family origins and social context when thinking about how this relates to their work safeguarding families. The way their family background influenced participant's views of parenting and their work with protecting children is the concern of this subtheme. For three participants, the connection

was specific experiences such as growing up in a household with parental conflict, domestic abuse or having a parent with an "issue with alcohol" (Courtney). The ties to their past were broader for the other two participants and related to their social context, particularly social class.

Natasha spoke candidly about her experiences of living in a household with significant domestic abuse. She shared her own experiences of her mother being "*very emotionally attuned*" to her and her siblings, which she viewed as somewhat mitigating the impact of witnessing parental conflict and domestic abuse. During Natasha's interview, she referred to the importance of *'balancing risk'* several times, a commonly conceptualised way of managing risk. However, it may have also been a personally meaningful way that she experienced risk and mitigating effects.

> *So I grew up in a household where there was quite significant domestic abuse. And with my mother as the victim and I have siblings that are extremely traumatised and struggled to function as adults as a result and myself included, there was there's been a significant toil on me too. And then trauma that I've experienced, I reflect on that. And I think about how, you know, when we're looking at balancing risk, actually, I had one parent who was very emotionally attuned to us as children, and was able to try and balance that out with the abuse. But also how, if I hadn't had that, the emotional toll that it would have taken on me would have been far greater than what I have experienced. (Natasha)*

There seemed to be a varying degree of self-awareness, reflections or perhaps a willingness and discomfort to share the connections between personal past experiences and how this informs professional experiences during the interview. Courtney eventually shared how she worked with a family that resonated with her about her childhood experience.

> *And so I grew up in a household where my dad was an alcoholic, but I didn't know it, but I just knew that he had an issue with alcohol. So it always made me feel a certain way, if I found hidden liquor bottles of his, so I would show my mom be worried about my mom's reaction to them. And I was working with a family where*

mom was drinking quite a bit. And she would blame the kids' behaviour on her

drinking. (Courtney)

Interestingly both Natasha and Courtney start their accounts the same way: '*So I*

grew up in a household', like the phrase '*once upon a time*', to situate the historical tale

about to be told. There was a sense that the effect of living in an environment where there is

abuse is not always apparent straight away, in both accounts, with Natasha highlighting this

through her identification with a child living in a household with domestic abuse.

So yeah, you know, I definitely looked at my own childhood experiences. And I

definitely, I know what it sounds awful. But I know what it feels like to be that

child living in a house, where there's, you know, psychological abuse and violence. I

know what it's like to be that adult who has been traumatised by that, but didn't

necessarily show it at the time. And so, you know, the effects of living in an

environment where there's domestic abuse, aren't always apparent straight away.

(Natasha)

Two participants shared accounts of their connections with their social class and how this

interacts with how they may relate to their families. Marie reflected that she had *"exceptional*

parents" and shared how *"good my parents were at being parents"*. Her account highlights

the impact of her social class on finances and how she does not draw on this frame of

reference with families she works with who may come from disadvantaged backgrounds.

I've had a really like stable upbringing, very supportive loving parents and also you

know, middle class with enough money always provided for so I think, because of

maybe my degree in social sciences and also the work that I did before I trained as a

social worker I'm kind of quite aware that I was quite setup in terms of my

background and my support networks that my family had that kind of thing means

that you know that I've been very lucky to have been born into the family that I was

and not that being middle-class means that nothing would go wrong I just think you

know benefited from a lot of conditioning so like I do feel like aware of that and I'm

quite aware of how that's not the case for lots of children and parents (sigh) (Marie)

Marie's use of *"setup"* and *"conditioning"* indicates a sense of awareness of her predisposed privileged background and how this influences her experience of being parented. Marie's account is typical of other participants making connections between their family background, social class, education and previous occupation to form their frames of reference when working with parents.

This subtheme connects the past in how participants viewed their backgrounds, whether similar or different, to influence how participants thought about parenting, how they may have understood risk, and potentially how they approached their work with families. The following subtheme goes further to shedding light on how participant experience of assessing and supporting parents has seemed to have evolved through their previous experiences.

Subtheme 1.2: Evolving Professional Identity

This subtheme represents participants drawing on their previous work experiences. Participants shared accounts of both within and outside social work to understand their professional identity. The different training routes into social work informed participants' sense of professional identity and values. For example, Joanna's 'step up to social work' relied on her previous experience working with families and children.

> *So it was a one year kind of rail railroad, runaway train, journey through   social work, rather than a three year four-year undergraduate course that, you   could take time on. So I already had experience, working in a Children's Centre, so we were, helping parents with their parenting and doing parenting courses. So we already had the bare bones have those skills. And, and that's why I said to my practice educator, I work with people, you know, I do I help them. I don't, I don't analyse them, if that makes sense. I saw it was the big thing that you did (Joanna).*

Joanna used the metaphor of runaway train through social work training to indicate the speed of her training, in contrast to the considerably longer undergraduate course. She later uses the analogy of the 'bare bones' of social work skills she acquired, perhaps

minimising her skills and indicating how unequipped she felt to transition from an intervention-based, therapeutic role to an evaluative, statutory role.

All participants recognised that with time, they had grown in confidence and experience. Over time, a sense of clarity in their professional roles seemed to have occurred. Being a parent seemed to be related to a sense of knowledge that appeared to frame participants' thinking when considering parenting.

For Marie, she felt that she lacked experience when assessing parenting as a newly qualified social worker. Marie started and ended the interview drawing attention to not being a parent and questioning if she lacked the knowledge needed to assess parenting. She raised this at the end of the interview when asked about anything else she wanted to add.

> *the fact that I'm not a parent I just wonder how much that, well you know how much parents they might guess … based on my age or whatever, but so that's I guess something that that we didn't go into much (Marie)*
>
> *I: is that something that you're particularly aware of?*
>
> *It is at the moment because one of the families and I'm working with, the mum asked me if I had kids which no one has asked me before but (…) part of me is like even if I had a kid like would that really make much difference, I have a lot of experience of to do with families in other ways, but I do know that there are things that people who have children just like know about even like just quite practical things to do with you know like babies in whereas I would have to like read up on it which I guess parents do and then they just know it …because like I feel like I don't I don't know much about children of different ages (Marie)*

Marie's bookmarking mention of not being a parent and this contemplative dialogue suggests an unresolved sense of uncertainty of what this means for her evolving role. Her lack of experience seemed to create a compounding impact on feeling deskilled given her non-parent status. This was less evident with the only other non-parent participant who was three years post qualification. Instead, Courtney seemed to draw on her previous experience as a drug and alcohol worker.

For Courtney, when working with a family where the safeguarding concern relates to drug and alcohol abuse, she draws on her previous experience in a way that instilled hope within the work.

> *my history is in drug and alcohol, so I'm able to give some advice to parents. For example, if I had a mom on methadone previously, and it was when we did talk about a drug use, it was all about like, you know, have you lapsed, have you relapsed, because sometimes, you know, they could lapse, and it's important to make them aware that it there's a difference between lapse and relapse, so, not to get down on yourself. Not to think that you failed, you know, pick self up kind of thing (Courtney)*

Courtney's previous work experience helped her use a harm minimisation framework to distinguish between *"lapse"* and *"relapse"* when working with parents struggling with drug misuse. It may be that Courtney felt able to draw on this previous experience in a way that enabled more opportunities to take positive risks with parents and perhaps make changes possible. Her approach and values of holding hope for change and establishing a therapeutic relationship to facilitate changes seemed connected with her previous work experiences. Personal knowledge from her own parenting experiences seemed to relate to the current evolving sense of professional identity-forming for her and other participants.

This subtheme of evolving professional identity was related to how participants made sense of working with parents and assessing their capacity to parent. Participants' professional identity seemed to form prior to entering social work profession. Their previous experiences of connecting with families or their training experience, appeared to form a basis to how they understood their work with parents. There was also a sense that all along the past personal experiences whether in terms of their family background or occupational background, an echoing of participants' values intertwined in their accounts.

Subtheme 1.3: Being Driven by Personal Values

This subtheme reflects the combination of participants' reflections on their values and their preferred ways of working with parents. Participants seemed to be informed by a range

of values that they enact in their practice. For instance, Marie's knowledge and attempts to make sense of the experience of parents she works with was at times complex.

> *with that awareness … I've tried to like unpick what's environmental and   what's more like I guess personal but obviously they're so interlinked it's hard to do that. I think that it impacts how I write assessments how I like talk about parents experiences and try to frame it in a in a way that's that isn't blaming of them, cause I worked in a charity sector for a bit and a lot of that was around supporting parents and recognising that abuse and neglect is often comes from stresses from parents lives. So I guess all of that has made me quite,…sympathetic to the way parents struggle kind of because of the wider factors is impacting on their parenting so I think all that impacts how I then see parents (Marie)*

Marie considered the wider systemic factors that may impact parenting and valued holding a non-blaming stance when thinking about, talking to, and writing about parents' capacity to parent. The rippling effect that Marie's awareness and values appear to be guiding her practice suggests that it is a driving force in her work. Similarly, Maggie's account indicated a starting point, to be non-judgemental in her approach and traces its roots from her mother's values.

> *And in my life, my mother brought me up with a Sermon on the Mount. Everybody's   equal. Not fond of paedophiles and things like that, but everybody is where they are. So I think where I'd like to start from is not to be judgemental, to treat people as they are. And people where they come from, it doesn't put people down. Yeah, that to me is important. (Maggie)*

The importance of personal values was viewed as a grounding principle that some participants kept coming back to at times of difficulties. For instance, Joanna stressed the importance of honesty, transparency and accountability with the parents she worked with throughout safeguarding. Joanna demonstrated transparency by "*explaining the rules of the game before you start*", sharing and demystifying the entire safeguarding process,

sometimes visually through a ladder showing the different steps escalating to losing parental rights.

> *it's almost like playing a game of chess, where you have to think two or three steps ahead of where the family is so that you can sort of encourage them and empower them. But then if they don't accept that opportunity, you have to hold them accountable to it…So you're trying to make it collaborative and supportive…But ultimately, if the family don't accept that help, things are only going to go one way, the law says things can only go one way. So you have to be very upfront about that. And I always say to families, you know, I will be completely honest with you, completely honest to you, you will know exactly what we're thinking as a system within your family. And where things are going and what direction it's heading in. And you will have multiple opportunities to change the direction you want that to go… I think it comes back to transparency. But transparency without professional jargon…It's got to be clear, and understandable, simple and accountable. They're the things I hold dear to myself, so to speak. (Joanna)*

Her account using the analogy of playing chess and needing to think ahead of the family providing options was significant in how her values sustained her practice. Furthermore, when cases went "badly" and that "they were staring court in the face", values of honesty, transparency and accountability served an important ethical function for Joanna. That even if the outcome felt unfair, the process she carried out was guided by fairness.

This subtheme encapsulates how participant's values are a driving, guiding force in how participants relate to, support and work with parents. Participants preferred to work with parents drawing on their own values to help them navigate and balance the often challenging and competing tasks they faced.

Master Theme 2: Delicate Balancing Act

This master theme reflects participants' experience of carefully holding and balancing competing aspects of their role. All participants shared the many juxtaposing positions they

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faced and the ethical dilemmas this brought up. Participants stressed that the common

purpose of the parenting assessment was as an intervention to support parents, thus

allowed them to adopt a therapeutic role in their work. Within a therapeutic role, there was a

desire and a hope to support parents to make adequate sustained changes to facilitate the

safeguarding of the family. However, if concerns regarding child risk were too high or

escalated and there was a difficult parental engagement with support services, then the use

of parenting assessment would need to involve collecting evidence for the escalation through

the safeguarding process, thus adopting a statutory role. Throughout the safeguarding

process, there was a need to balance engaging families enough to support them and monitor

the child risks against being mindful of the child milestones. Another factor that participants

highlighted was the impact of time on their ability to balance the various responsibilities.

There was a sense of time pressure generally felt by all participants, more specifically,

experiences when a parenting assessment was requested for court which has tighter

timescales.

Natasha's account is typical of the challenging balancing act that all participants shared

when reflecting on their experiences of assessing parenting.

> *And it can be very challenging during the parenting assessments because*
>
> *what   you're trying to do is both judge someone's parenting, while trying to*
>
> *support them in their parenting at the same time. And within child protection, we*
>
> *always have the conflict between supporting families to reach the kind of that*
>
> *level of good enough parenting and achieve that and support them to kind of make*
>
> *those changes in their lives while still being mindful of the risks. And, you know, it's a*
>
> *very hard balance between the parenting assessment for court and a parenting*
>
> *assessment as an intervention. (Natasha)*

Three subthemes emerged from this super-ordinate theme to explain the delicate balancing

act that participants needed to perform in their work with parents:

1. The participants' experience of being pushed and pulled by different forces explains

    participants' experiences balancing various aspects of their role.

2. The way participants seemed to engage with parents involved navigating between their identity and professional identity to help them relate with parents.

3. Participants experienced a sense of ethical struggle, which had an emotional impact on their ability to balance various ethical dilemmas when working with parents.

Subtheme 2.1: Being Pushed and Pulled in Different Positions

This subtheme describes the tensions experienced in participants roles, including the pull of the therapeutic role perhaps being a preferred one for participants against being pushed into the more evaluative and statutory role. There was a conflict raised between the therapeutic role and the statutory role. The use of parenting assessments as interventions to help parents improve their capacity to parent, which involved adopting a therapeutic role, was in direct conflict with the statutory role requiring the use of the parenting assessment as evidence as Courtney mentioned several times interview. Marie explains how her training seemed to prime her to consider the parents in the context of intergenerational trauma and the therapeutic aspect of using parenting assessments as interventions appealing.

> *because, it's very much encouraged in the training that, the parents, were*
>
> *children themselves and often they experienced trauma…it does sometimes feel like*
>
> *a bit of a clash between the, the more, therapeutic role and the statutory role (Marie)*

Marie uses the phrase *'bit of a clash'* to initially minimise its impact, yet uses 'clash' to indicate the incompatibility and perhaps indicates how these two roles collide. The process of navigating support for parents while evaluating them was experienced as complicated by participants. Interestingly, some participants like Joanna spoke about the therapeutic role with warmth, fondness and clarity, suggesting a preference for this position.

> *…if you know, someone's been through a really hard childhood of their own or, you*
>
> *know, a hard relationship with their own, they've got to open up to you. So you've got*
>
> *to be almost like a counsellor with a small c rather than a social worker in that*
>
> *point, if that makes sense. …parenting assessments are more like a mini therapy*
>
> *session, not an analysis of their life. And then the analysis comes later. (Joanna)*

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Joanna stresses the interdependency of needing parents to be open during assessments so that she can understand their needs and support them. Also, to separate the therapeutic role from the more analytic, evaluative statutory role, which she indicates happens post sessions. Participants reflected that adopting the statutory role was entangled with the power. Marie highlighted how the power held within the statutory role meant that parents disliked her.

> *I don't like not being liked, and I feel like, with the statutory side of it, like that is a lot of what happened in the parents don't like you. It was, I feel like, when you're just doing therapy stuff, it's very, you know, it's not, it's not, you don't have to come up against that. So yeah, there's more difficult conversation. And like, having to assert, like, authority, and Yeah, that's the ethical stuff comes up. (Marie)*

Maggie, Joanna and Natasha acknowledge the need to use the power associated with their role to safeguard children. They seemed to communicate less discomfort with this use of authority within their role, sometimes even before entering the legal process and formalising court arrangements. Natasha shared her account.

> *And it's fair to say that sometimes we have to use that power. So I do have to say to people, there are consequences for these behaviours. And these are the consequences and I have to put these in place…I do have to say to fathers or to parents or mothers or to siblings, you can't see the child in the way that you want to because it's not safe.*

> *And there is a power in that and what I do try to do is balance that with honesty and transparency, by explaining the processes explaining how these decisions have been made. And I'm not making them in isolation, and (pause) to try and remove some of that power from me. And I want to say give it back. But that sounds like I still hold the power... to an extent it is trying to kind of push back some of that power that I might hold to them by giving them as much information as I can… (Natasha)*

A complicating factor in navigating the balance between the therapeutic and statutory role is also the pressure of time cited by all participants often throughout their interviews. *You know, which, when you've got however many cases and however*

many crises, and it's a it's very hard to, you know, to not clock watch when you are doing parenting assessment. So, yeah, you've got to be very good balance a lot of different things. (Joanna)

Courtney reflected on the importance of taking a critical perspective on the information gathered from parents and considering this in light of other sources of information, including working with the children and looking at the history. Interestingly, she shifts from an analytical stance to how difficult it is to manage when working with a parent you like.

So I think that's difficult, and I think I really struggled with that. In my last case that went to court because mum is very likeable. But at the same time, she was frustrating me, you know, at the same time because of the lack of insight and the damage that she's that she has had on her six children, who some of them may never recover. So yeah, it's an it's something that I bring up in supervision all the time. It's really important to, because if you don't, it could have an impact on how you write your reports. And what you listen to and what you don't listen to, even when it's unintentional. You know what I mean? It's like an unconscious bias, because maybe she reminds me of, of my sister, or a friend of mine, or, or maybe she's going through something that I went through in the past. So I want to look at her in a more positive light, for example. (Courtney)

Courtney's repetition of 'at the same time' suggests the duplicity of her experience of both liking a mother personally yet also being frustrated, perhaps even angry at the mother for the potentially unrecoverable damage she may have caused her children. She reflects on the importance of checking in on her unconscious biases in supervision, highlighting how she navigates her personal biases with her professional judgements and decision making.

This subtheme represents participant's sense of being pushed and pulled in different positions. To balance these forces, there needed to be a level of consideration and skilful navigation, both personally and professionally.

Subtheme 2.2: Navigating Personal and Professional Identity

This subtheme reflects participant's way that they used their self in their work, through their selective personal disclosure. This was related to the need to form a therapeutic relationship with the parents they worked with and using selective disclosure as a 'tool' to foster senses of shared experience through *"parenthood".*

> *I must admit, since having kids, I use having kids more in the work that I do. And I don't know that that's necessarily fair, or is appropriate. But for me, it's a tool that works and I'm like, I have kids, I get it, but this is still not okay, I do get it, or I have kids, I get it, I won't come at eight o'clock in the morning to visit you, I'll come at 10. (Natasha)*

> *And I think I'm a bit of a naughty social worker in that I give quite a lot of my own information to parents or give certain information to certain parents should I say, don't tell everyone my life history. But if I have a trusting working relationship with them (parents), I will give them a little bit more of an insight. And if I think it will help (Joanna)*

This subtheme represents how participants need to engage and form a therapeutic relationship with parents who may have a difficult relationship with help, which seemed to invite some participants to use selective personal disclosure in their work. Natasha account shows how she fosters a sense of shared experience through 'parenthood'.

There was a sense of hesitation in Natasha and Joanna accounts, yet they seemed the most open and willing to discuss self-disclosure among the participants. Natasha and Joanna both shared that they had valued the use of personal therapy in their personal life. There was a sense they attributed therapy as enabling a greater sense of self-awareness key to feeling comfortable and safe to integrate different aspects of ones-self.

For Courtney, sharing personal information was something she vowed never to do after sharing her bad disclosure experience with a parent, perhaps when she felt like she connected with the children.

> *And I it was the worst mum to say this to her because she was smart. And she came*
>
> *right back and said, You should not bring in your personal life into our sessions, as*
>
> *she said that in front of other professionals that are meeting and I'll never ever, ever*
>
> *talk about my life, you know, or will compare (Courtney)*

Navigating the personal and professional was considered particularly important and challenging concerning families' expectations of social workers. Maggie reflected that some families *"could see you as part of their family rather than as a social worker"*. This blurring of personal and professional boundaries was experienced as *"exceedingly difficult to manage"* even for a highly experienced social worker like Maggie.

The difficulty of navigating personal and professional views also related to the idea of 'good enough parenting' in relation to safeguarding thresholds. Courtney and Marie both gave accounts of how organisational decisions impacted parenting assessments and their professional judgements which may have been at odds with their personal views of what is good enough for a child/family. Courtney's account describes how local authority's thresholds may differ according to areas.

> *So what may be good enough parenting for us is not good enough parenting for say,*
>
> *XXXXX, what's good enough parenting in XXXXX would horrify people in XXXXX*
>
> *(our service). It all depends on the budgets of the local authority… They just have to*
>
> *hold more complex, more harrowing cases than us typically. So they can only take on*
>
> *so much. (Courtney)*

The challenge of navigating personal and professional identity and its interconnection with the need to establish a positive working relationship with parents does not seem to get easier with experience and time. Perhaps, indicating that the professional role has complexities which participants highlighted. These complexities included the ethical dilemmas faced by participants and their impact on them emotionally.

Subtheme 2.3: "You're at war with yourself" - Enduring Ethical Pain and its Emotional Toil

This subtheme encapsulates the participants' accounts of ethical dilemmas, the discomfort and its emotional impact. All participants spoke about the various ethical challenges they faced in their work and how this impacted them emotionally. All five participants spoke about the emotional impact of their work in varying degrees. The most commonly cited emotions expressed were frustration often directed at the lack of parental change despite both the workers and parents' best efforts. Other emotions expressed by participants included feeling anxious, guilty and overwhelmed, particularly when assessing complex families where there are multiple risks and vulnerabilities, against a backdrop of limited resources and time. The gravity of the decision and its long term impact was an essential aspect of the ethical struggle and emotional impact, as highlighted in Marie's account.

> *I wrote a court statement, of these children to be removed from a mother who   I hadn't met many times, but that felt really, really, like, awful for me to do that. But then reflecting on it. I think it was the right thing for the children, but at the time, I just felt so guilty. And like, that, the mother had been through so much herself, and then she was going to lose her children. I think also, like, for me, hearing stuff about like the care system and knowing what like if you, you know, if you make a negative outcome for parents, what that could mean for that child, which is that they go into care, and is their life likely going to be much better in care, realistically.. (Marie)*

For Marie, the experience of working with parents with different needs brought about the ethical dilemmas of meeting the needs of vulnerable parents and the need to protect vulnerable children. Like other participants, Marie shared her sense of inner conflict, raising a critical question of 'who is the victim'.

in terms of domestic abuse that's quite an interesting one because the whole kind

of narrative of like often it's the mother who is a victim but she is ultimately seen by

us as the perpetrator, we saying that she's not protecting her children from be father

or partner so that's a very so I'll find that very challenging because even though she's

the Victim herself you know when it comes to the children we are saying she's not

keeping them safe which I do find a really really tricky position to be in. Because I do

think it's correct, because she is putting the children at risk by being in that

relationship but, then in a way she is keeping herself safe because you know if you

leave an abusive partner you're more likely to be injured or killed so like that whole

like who's the Victim. It's often verges on victim blaming of mothers which (I) find

very ethically challenging. (Marie)

Feeling overwhelmed about managing competing needs and feeling like although

prioritising the child needs, it still leaves one with a deeply felt sense of inner ethical struggle,

when working with vulnerable parents as Natasha's' account highlights.

And it's just overwhelming to have to kind of then work out everyone's individual

needs, how to meet those individual needs, while still managing the meetings and all

the other stuff in the parenting assessment sessions and, you know, other families

that you're working with at the same time. So it can be very hard to keep things kind

of straight. And at one point, I think, you know, you kind of wonder, well, how am I

supposed to meet everybody's needs in this situation? And, you know, how am I

supposed to balance this? So, I think emotionally, it takes a bit of a toil when you've

got a very complex situation, with multiple needs and vulnerabilities,, kind of their

ethical dilemmas because they're a vulnerable adult. And, I'm kind of, prioritising the

child, which is right, but it feels ethically kind of challenging, because actually, this is

a vulnerable adult themselves. So, yeah, so it's kind of you, you're at war with

yourself sometimes with those kinds of families. (Natasha).

In contrast, Joanna's experience and expectations of parents that she works with

often having a history of mental health difficulties, domestic abuse and drug and alcohol

issues provided her with a level of being *"desensitised"* to the emotional impact of it reflecting "*most of the time, it's very rare that the doesn't come up somewhere. And so I suppose it doesn't take me by surprise anymore…because you're not surprised by it. You don't have that emotional… Shock."* (Joanna).

The intensity of anxiety and guilt had a profound impact on Marie. She shared and interpreted a dream that symbolically representing '*taking children and ruining parents lives'.*

> *I've had dreams, about families which I guess suggest that I'm thinking of you*
> *know and often that's around guilt, well guilt and anxiety I guess. I had a dream I like*
> *basically there was a mother with two newborn babies and I was like helping her with*
> *them and then one of them fall to it's death And then the mother fall with it and then I*
> *was left with the one baby… umm (nervous giggle) that's quite symbolic of feeling like*
> *guilt, yeah and like taking children and ruining parents lives. (Marie)*

Another way that ethical dilemmas and emotional toil is described is through difficult relationships with other professionals working with the family. Maggie reflected on how difficult it can be to work with other professionals who may *"denigrate"* and undermine Maggie. Maggie's use of self-deprecating humour in the middle of her speech may have bridged the discomfort of her experiences with other professionals and families with the impact this had on her wellbeing.

> *So then your relationship with the family changes and to work them is almost*
> *impossible because everything you're saying or as Mum said, 'what's the point*
> *because the judge won't believe anything you say'. So it's that denigration*
> *from other professionals. It makes it difficult for you to then work with the family.*
> *Yeah, I'm getting there because I'm an awkward, obstinate, determined old lady, but*
> *it is hard work and cost me a lot of physical and probably emotional upset. (Maggie)*

All five participants spoke about the emotional impact of their work in varying degrees. The most commonly cited emotion expressed was frustration often directed at lack of parental change despite both the workers and parent's best efforts. Frustration and sadness seemed to be related, perhaps to the overt feelings of frustrations expressed by

participants, perhaps hidden beneath feelings of sadness and a sense of being stuck and helpless. These intense emotions may have been experienced not just by the worker but also the parents, as Natasha shares her team's reflections:

> *And one of the things that we're always reflecting on in my teams, is that how, you know, there's that saying how art imitates life? Well, our organisations often imitate the families that we work in, sometimes in terms of the chaos, but also in terms of as workers, you know, if I'm looking at myself as a newly qualified worker, and I'm staying in one position, and I don't know how to move out of that, well, actually, we have families that are stuck, and are stuck in place and can't move from that position. Because they don't know what else   is available, they don't know how to move from their position, they don't know that it's safe to move from that position, they don't have confidence, because this position is the only position they've ever known. And they need other people, they need external influences, training, peers, other organisations, managers to support them to gain that confidence to start exploring, and take those risks." (Natasha)*

The participants provided ample rich and deep reflections of the various ethical dilemmas and the emotional toil this had on them. Participants may find themselves in a perhaps precarious position of this balancing act, at a more extreme side of working with parents. In cases where there was trauma within the parent-child relationship, there was a sense played out in the internal worlds of participants as professionals and within services.

Master Theme 3: Sustaining Oneself in a Maligned Profession

This master theme reflects participant's experiences of what seems to help them cope in their role as children social workers in the highly scrutinized profession of child protection. Being part of a disliked and maligned profession was frequently raised by participants, and that had made their engagement with often involuntary service users *"exceedingly challenging"*. As Maggie remarked "*You're a social worker, as my brother keeps telling me, who likes social workers? No one. So you that to play with as well.*"

The master theme reflects the efforts participants have taken to cope and sustained their challenging roles in different ways. Three subthemes emerged to explain the measures participants took to sustain oneself in their profession, including:

1. Learning to disconnect (consciously or unconsciously)

2. Developing self-awareness and self-preservation practices.

3. 'Being seen' through different relationships.

Subtheme 3.1: Learning to Disconnect

This subtheme relates to working with parents in child protection being experienced as ethically challenging and emotionally demanding work for most participants, which required coping strategies, of which disconnection was one. Three participants explicitly spoke about using a morbid or warped sense of humour to cope with the unpleasant and uncomfortable emotions involved when working with some parents.

> *I think it's reassuring that I'm not the only one, struggling with the with the workload and having complex cases for sure. I think most of my colleagues, if a really, if a really serious situation happened, which everyone outside a social worker probably be horrified, or even really upset about, we would somehow find something to giggle about, you know, and laugh. And I think that's really needed, you know, to have that humour. (Courtney)*

Marie reflected that she might reach out to a colleague following a complicated interaction with a parent. Marie shared that this serves the function that "*it takes the edge off it*", by venting and disconnecting from the intensity of the experience.

For Natasha, the work's emotional impact has meant that there is a need to adapt and develop coping strategies of which a dark sense of humour is one way she and her colleagues have managed the emotional toll. Natasha's account makes an apparent insider and outsider distinction that those outside of her professions would not understand, relate to this sense of humour, and comment that outsiders would be '*horrified*'. Whereas, Marie, a

newly qualified social worker, seemed to become socialised into a culture and its sense of humour.

> *So you know, I get sad, I get very frustrated, immensely frustrated working with my families so you end up developing quite a morbid and kind of warped sense of humour doing this job. And I think that if people who didn't do this job heard some of the conversations that we, my colleagues have, they would be horrified. Because, you know, we sometimes joke about things that really aren't a joking matter. But it's a coping mechanism for the frustration for the emotional kind of toil the job takes on you having to be available having to be open, having to take on someone else's, you know, kind of emotions, whether those be positive or negative, you have to kind of allow that to wash over you. (Natasha)*

Learning to disconnect seemed like an essential coping mechanism for participants, whether through unconscious ways such as humour or conscious efforts to de-mark work and home-life. Participants felt that they had learnt to be good at compartmentalising when they were with their families and make a conscious effort to switch off from work, acknowledging how all consuming the nature of their work was. Both Natasha and Joanna spoke about learning or developing ways to disconnect as a process they have acquired over time. The necessity to disconnect seemed to be a way of buffering against emotional exhaustion, work overload, and reducing the risk of burnout. Joanna likened this necessity to breathing as she said "*This is not automatic, definitely not. But ultimately, it's absolutely vital. You know, it's, as vital, as breathing in and out. Otherwise, you will lead yourself absolutely crazy. And you will burnout*".

Whether consciously or unconsciously, learning to disconnect was viewed as a central process by which participants seemed to cope and sustain themselves in such a challenging profession. In contrast to disconnection, there was a sense that developing self-awareness as a means of self-preservation was also a crucial sustaining practices for participants.

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Subtheme 3.2: Developing Self-Awareness

The subtheme of developing self-awareness described participants discussing the value of developing self-awareness differently. For Natasha and Joanna, developing self-awareness has come about through the need to process challenging personal experiences. They both mentioned the benefits of accessing long term therapy in their personal life and the rippling effect on their professional practice.

For Natasha, reflecting on her own experiences seemed to increase her awareness of potential triggers that she faced in supporting parents and assessing their parenting capacity. For Joanna, personal therapy had provided her with a safe place to process her difficult life experiences. Personal therapy was a means of developing self-awareness for these two participants. Other ways that self-awareness was developed and enacted amongst participants were recognising the need to be disciplined about self-care. For instance, the reduced caseload of being newly qualified allowed Marie time to balance between work-life commitments.

> *I tend to walk a lot, I make sure I take breaks in, I don't work late I tried to be boundaried with making sure that I walk for an hour a day, trying to meditate, I'll make sure I have my life, it which feels possible at the moment but I think as my caseload increases that will feel more difficult that helps. (Marie)*

In contrast, Maggie, the most experienced social worker in the study, commitment to work seemed to infringe on her personal life in different ways. For example, when working on a parenting assessment for court, the timescales impacted the boundaries of traditional working hours. Maggie reflected that she had to *"put in many hours"* on a parenting assessment for court.

> *quite a lot of hours every single day, Saturday and Sunday, including… So you just have to get on with it. But for me, if I could use that as an example, I would go for the weekend so that I could have seen how things were. Morning, noon and night. So I like to look within my parenting assessment, not just oh let's have six sessions between two to four. (Maggie)*

Another way that participants processed self-awareness was through negotiating their diaries and taking annual leave. Working with families where risks escalate from child protection to court proceedings sometimes means that workers have to work to the timescales set by the court. Joanna shed light on this complicated process of sharing diary appointments and commitments with her manager to help her take her annual leave. Both worker and manager required openness to work together against a pressurised timetable with little room for flexibility.

This subtheme referred to the value of developing self-awareness. For some, self-awareness was possible through personal therapy and others through a de-marking work-life, taking annual leave, etc. For Maggie, this was more challenging to achieve at times due to the time pressure of completing a parenting assessment for court.

Subtheme 3.3: 'Being Seen' – Through Different Relationships

This final subtheme of sustaining oneself in a maligned profession is "*Being Seen*" – through different relationships, comes from Joanna's' account and seemed to illuminate other participant's accounts. Joanna shared an account of receiving a compliment and personal message from the director of children's services regarding how well she coped with a challenging case. When asked what this means for her, Joanna provided a rich account saying *"being seen, valued and supported"*, contributing to her "*sense of job satisfaction*" over time. The phrase *"Being Seen"* seemed to explain other participant's accounts and was understood to relate to participants' experiences of working with families and colleagues. Thus, relationships were crucial for participants to fulfil their roles when assessing and supporting parents. Several participants highlighted their relationships with other colleagues both within social work and multi-agencies as crucial in sustaining their practice. Participants considered formal and informal working relationships with a range of professions as integral to participants' ability to support and assess parent's capacity and risks to children.

The worker-colleague relationships were considered significant in informal ways through peer support. Since interviews were conducted during the COVID-19 pandemic

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when participants worked from home, perhaps not physically and opportunistically, seeing their colleagues made participants appreciate informal connections. Several participants spoke about the impact of not being in the office on their sense of connection with their colleagues informally. For instance, Joanna reflected on her recent experiences of missing the informal contact she has with colleagues in the office and the vital function in processing challenging sessions. Given the sense of isolation expressed by some participants that their family and friends "*outside of social work don't really get it... Don't get the nuance and all the subtleties of how it can affect you" (Joanna)* - it was imperative to connect and gain peer support.

The sense of *'being seen'*, valued both personally and professionally, was thought to be important by some participants, like Courtney's account of bringing her whole self to reflective supervision and to be appreciated as a whole feeling person:

> *…the personal supervision is about how are you feeling? You particularly worried about anything in your cases? How are they impacting you? How are you and your personal life, I'm very, very lucky, I have a manager that I really like, and I trust. And if I flip out one day, and start crying or screaming at her, I know that she's not going to then worry and think she can't do a job. Because I'm able to process it. And she has appreciated how honest I am about my feelings. So then she probably worries a little bit less. So that's really down to her. (Courtney)*

Several participants referred to valuing managers who *"has your back",* which speaks to the experience of wanting unwavering support against highly scrutinise professions. Having a supportive *"approachable manager, and a responsive manager rather than a reactive manager"* as highlighted by Joanna, was highly valued and helped to sustain participants in their role.

The subtheme of "*Being Seen"* described the accounts of participants feeling valued and supported in their relationships, both formally and informally, with peers and managers having a critical sustaining function to their role.

Final Thoughts

During the interview analysis, two particular quotes encapsulated the challenge of pinpointing how participants experience parenting assessments yet the ease at which a participant felt able to talk free to explore this phenomenon. To close this chapter, here are Courtney and Joanna words:

> *It was a lot harder to express or to explain or to put into words how I sometimes felt around the link between my childhood and the parenting assessment, so I know what I'm feeling and trust what I'm feeling does not impact the assessments and me and the reports, but it was difficult for me to word that and it was just difficult for me to really explain to put it into words for you to use in your research yeah. (Courtney)*

> *Your questions have been the most helpful and, gives space to talk about it. You know, they're the least directive, which is a good thing. And they're the openly worded questions… about the system....if we categorise what we've talked about, we've talked about a lot of massive topics. We've talked about personal ethics and values, the systemic approach, the macro, the micro, you know, literally everything, a really well-constructed interview. (Joanna)*

Chapter 4: Discussion

Overview

The current study explored social workers' experiences of assessing parenting in a Family Safeguarding Service. The following master themes describe social workers' experiences assessing and supporting parents:

- Master Theme 1: Bringing the past into the present and future identity;

- Master Theme 2: Delicate balancing act;

- Master Theme 3: Sustaining oneself in a maligned profession.

This chapter answers the research question by analysing the findings in relation to existing theory and literature, and considers the study's implications, strengths, limitations, before making future research recommendations. Lastly, it provides personal reflections and conclusions.

Revisiting the Research Questions

This study's primary research question was:

- How do social workers experience assessing parenting capacity?

Three secondary questions helped refine the scope of the primary research question:

- What frames of reference do social workers draw on when assessing parenting?

- How do social workers experience engaging with parents around parenting assessment?

- What are social workers' experiences of support and coping strategies in their role with parents and generally in their profession?

Findings are presented separately for clarity. However, the three themes collectively describe participating social workers' whole experiences. Therefore, the connections among the themes are acknowledged and discussed.

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Connections of Themes

The master themes combine to demonstrate how the experience of supporting and assessing parents in a family safeguarding context had a personal and professional impact on social workers in this study. In participants' accounts of their experiences, the sense of connection and disconnection is a significant thread between themes. The most evident example relates to Master Theme 3, where two of its subthemes are in polarised positions - *learning to disconnect* (subtheme 3.1) and *developing self-awareness* (subtheme 3.2).

Furthermore, the sense of connection and disconnection relates to how each participant described feeling able to integrate and navigate their personal and professional identities (subtheme 2.2). Such experiences could perhaps be explained by the presence of a *"historical and overriding view"* that to be professional is to disconnect and not suffer *"any emotional reactions"* (Waters, 1992, p.31) within organisational and professional cultures (Fook & Askeland, 2007). In this study, social workers with more experience were better able to integrate and navigate their personal and professional identities within the organisational culture (O'Connor & Leonard, 2014).

Time is another significant thread between themes. Temporally, time applies to Master Theme 1 by connecting periods of social workers' lives. For instance, participants' reflections on family ties and social context (subtheme 1.1) and their evolving professional identity (subtheme 1.2) were often in distinct phases of their lives, which are connected through time. Time is also significant as an experience; feeling time pressure to describe *being pulled and pushed in different directions* (subtheme 2.1). Social workers in this study consider time a valuable asset to their wellbeing, work-life balance, and supporting private and professional relationships (subtheme 3.3).

The next section outlines how each master theme contributes to answering the secondary research question, discussing how the findings apply to existing theories, literature and extend the current understandings.

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Master Theme 1: Bringing the Past into the Present and Future Identity

This section uses attachment theory to interpret how social workers' past personal and professional experiences intertwine with their present and future identities (Theme 1). Next, a discussion of the contextual influences on social workers ability to integrate the personal and professional identity; understanding how family backgrounds, social context, training, and previous work experiences appeared to come together in the form of their values, informing their identity. This section concludes by conceptualising values rather than skills as central to developing effective working relationships between social workers and parents.

Attachment theory offers one way of understanding how family and past work experience forms a frame of reference for social workers when assessing parenting (Bowlby, 1988). All social workers in this study reflected on their family background. For some, like 'Natasha', 'Courtney' and 'Maggie', how they relate to families they work with through their shared adverse childhood experiences or parental struggles. The connections made with a primary caregiver through these frame of references extend to other family relationships, with potential lifelong effects including long-lasting schemas that guide cognitive, affective and behavioural responses (Bowlby, 1988). Professionals may draw on strategies likely to have first developed at infancy to manage distress, separations, unfamiliar environments, and threatening events. Some remain in an insecure adult attachment style, which is likely to affect their inter-personal relationships, behaviours, and functioning (Hesse, 2008), potentially impacting engagement and relationships with parents, children, and colleagues. The influence of attachment systems can last into adulthood and thus persist within professionals' attachment systems (Lowe, 2016). Therefore, practitioners' personal experiences may impact their practice alongside new experiences in the form of earned security.

Research indicates that individuals can move from an insecure childhood attachment pattern to an 'earned secure' attachment pattern through life experiences and relationships (Lowe, 2016).In addition to personal experiences, participants in this study acknowledge how

work experiences influence their approach to engaging with parents, their parenting beliefs, and values. Thus, professional histories appear to have long-term impacts on social work with families. There is concern towards this, regarding the potential for unconscious judgements to have negative implications for families and children's engagement, offers of interventions, and decision making (O'Connor & Leonard, 2014). However, based on their backgrounds or past work experiences with families, workers may form blind spots and have instances where they may overlook circumstances that resonate with their experiences, assumptions and values.

The process of navigating and integrating one's own personal and professional identity is complex, requiring self-awareness and perhaps a willingness to take professional risks (Critchley, 2020; O'Connor & Leonard, 2014). Hesitation and potentially avoidance towards owning a personal stance might relate to assumptions about objectivity in professional practice. An individual's experiences and backgrounds, value judgments, and emotional reactions (Fook & Askeland, 2007) are often aspects of practice considered 'unprofessional' and discounted in terms of validity (Fook, 2004). There tends to be a preference for what Schon (1987) termed technical rationality, which refers to knowledge gained through formal education. This technical knowledge tends to be privileged over personal and emotional experiences that form frames of understanding (Fook & Askeland, 2007). The present findings showing the difficulties of navigating personal and professional identities, which is unpacked in the discussion of the *delicate balancing act* (Theme 2).

The finding that social workers appear driven by their values helps explain their motivations towards supporting families during parenting assessments. Social workers hold values rooted in their upbringing, past personal and professional experiences as a guiding framework to connect with parents and children. These findings echo those discussed in the systematic literature review that explore social workers' therapeutic, communication, and listening skills when working with parents (Ferguson, 2016; Forrester et al., 2008a; Forrester et al., 2008b; O'Connor & Leonard, 2014; Platt 2008; Witt & Diaz, 2019). Social workers in this study express how they value honesty, transparency, being non-judgmental in their

approach with parents throughout the challenges of their engagement in the safeguarding process.

Earlier research differs from present findings by focusing on skills, whereas values appear to offer a better explanation for the experience of social workers participating in this research. The conceptual differences, between skills and values in these findings may be an artefact of different methodological approaches; the current study uses IPA, which enables a detailed examination of the phenomena and the social workers' lived experience (Smith et al., 2009). Furthermore, present findings suggest social workers' values are intrinsic to personal and professional experiences, with long-term impacts on their future relationships with families.

A particularly striking finding was participants' passion when speaking about their motivation to make a difference in children's lives, which appears to enable acceptance or at least tolerance of the emotional and ethical impact of the work. Earlier research shows a similar finding that social workers find it rewarding helping others, having a commitment to child welfare with the belief that one's labour is making a difference (Stalker et al., 2007). In the words of Joanna, this contributes to *"job satisfaction"*. Those whose work aligns with their values have a greater sense of job satisfaction, lower emotional exhaustion and burnout, and have longer careers (Stalker et al., 2007). Given social work difficulties with staff retention (Barak et al., 2001; DePanfilis & Zlotnik, 2008), this is an important area to consider. However, this research provides valuable insights and suggests implications of considering social workers' ability to take positive risks and work in accordance to their values. Enabling social workers to connect and work according to their values could be a fruitful means of managing the emotional toil and sustaining value-based ethical practice.

Master Theme 2: Delicate Balancing Act

This section focuses on the *delicate balancing act* (Theme 2) in relation to policy and existing research about the social worker role. For social workers in this study, even the routine task of assessing parenting was a delicate balancing act, as the perceived power that

social workers hold can make it challenging to engage with parents even with low-risk concerns. This section also explores the concept of 'good enough parenting' to consider the balance between personal and professional views that emerges when assessing parenting. This is followed by drawing on theories of ethics in professional practice to make sense of participants' experiences of engaging with parents around parenting assessment, which places social workers in various precarious ethical positions, which has an emotional impact on them.

Social workers in this study describe experiencing tension managing the need to adopt a supportive therapeutic role regarding empowering safe, good enough parenting, whilst also maintaining the statuary, evaluative and authoritarian stance to safeguarding. Research and policy guidance (Laming, 2003, 2009; Munro, 2010; 2011; Platt, 2008) recommend adopting a therapeutic, supportive stance towards the parent alongside a critical analytic perspective while gathering information from multiple sources. Research supports these findings in different contexts, such as the experience of working with parents with learning disabilities (Lewis et al., 2015), mothers impacted by domestic abuse (Witt & Diaz, 2019), and more generally concerning assessment (Platt, 2008). It is unsurprising that, as individuals entering the helping profession, social workers may prefer the therapeutic role where they can practice in line with their values. Some participants like 'Marie' experience the need to adopt an authoritarian, evaluative stance to safeguard children with significant discomfort of the power dynamics.

Also in line with previous research is a perceived "power imbalance" participants describe as contributing to their engagement and child protection work (Lewis et al., 2015 p.331).This research contributes to the existing knowledge base by highlighting that this tension can derive from power inherent to the role that participants experience even in the routine work of assessing parenting, not just in the higher-risk or crisis-based aspect of the role. There appears to be an intrinsic tension in the role and within the worker-parent relationship. This tension may also be related to parent perceptions of social workers assessing their parenting as a threat to their role.

There is little agreement regarding a definition of a good parent (Eve et al., 2014). However, the literature generally agrees that parenting is a task in consistently meeting the child's physical, emotional, and cognitive needs (Eve et al., 2014; White, 2005; Woodcock, 2003). The present findings suggest that this is the fundamental principle by which parents are judged in their ability to carry out a reasonable standard of parenting. From a professional stance, this may depend on managerial decisions, organisational budgets, and thresholds, as highlighted by 'Courtney' and 'Marie'. However, this standard of care may not be considered 'good enough' by a worker personally, which feels morally challenging and emotionally painful to bear. Social workers in this study did not seem to hold themselves morally accountable or individually responsible for the outcome of a parenting assessment (e.g. the loss of parental custody). However, they often report difficult emotional responses, such as feeling sad, guilty, and frustrated. Social workers felt restricted by circumstances, namely by the lack of support services recommended to facilitate changes for struggling parents. The concept of moral distress (Weinberg, 2009) can explain this experience of ethical pain and its emotional toil. The experience of being restricted by political and economic circumstances (Featherstone & Gupta, 2020), makes social workers feel deprived of working adequately and justly with families, creating moral distress (Weinberg, 2009).

Present findings reinforce earlier research showing that social workers feel more able to tolerate the discomfort that comes with the statutory position when it justifies safeguarding a child or family (O'Connor & Leonard, 2014) - again connecting to individuals' values and motivations within their personal, professional identities. However, an unexpected finding is that social workers, regardless of their years of experience, still struggle with the ethical conundrums and emotional distress they face when assessing parenting.

The concept of ethical trespass (Weinberg, 2009) introduced in the first chapter may explain the inherent tension social workers experience working with parents, particularly those considered vulnerable and children in child protection or care proceedings. Since social workers are responsible to more than one person, they may experience a sense of trespassing their ethical intentions due to the need to follow the rules (i.e. the law) regarding

child protection as paramount, or managerial decisions as part of safeguarding (Weinberg, 2009). Given the inherent tensions within the social worker role and the complex decisions they make where the outcome may harm another person, it is unsurprising that this comes with a sense of ethical and emotional pain. Several studies highlight the emotional impact child protection work has on social workers (Critchley, 2020; Ferguson, 2016; Lewis et al., 2015; Lynch et al., 2019; O'Connor & Leonard, 2014; Pollard, 2018).

The current findings focus on the ethical struggles at the individual level between workers assessing and supporting the parent. Most accounts in this study focus on how difficult it was for social workers to work with parents who were vulnerable themselves, such as parents with learning disabilities (Lewis et al., 2014) or those experiencing domestic abuse (Witt & Diaz, 2019), which reinforces the existing literature. Additionally, social workers felt that parents with mental health difficulties and drug and alcohol abuse present additional challenges when it comes to assessing parenting capacity, and that there is a need to balance parent's needs with the children's (Rutherford & Keeley, 2009). The ethical challenges social worker face and feeling organisationally and professional constrained have a profoundly personal emotional impact on most participants in this study, albeit in different ways. The IPA methodology is advantageous here, providing a well-developed open interview schedule to uncover new insights into the emotional impact of the moral distress experienced when assessing parenting.

Integrating the personal with the professional self requires time for reflection and safe, appropriate supervision. For some participants, time refers to how their experience afforded them opportunities to reflect, evolve and integrate their personal and professional identities. In contrast, others felt they need time within their roles to practice in their preferred ways. For example, participants often cited shared desires to spend more time with families to establish a good working relationship, work with families in the community, and prepare and reflect on sessions. The perceived time pressure social workers feel is an internationally recognised experience of child protection (O'Connor 2020).

This study demonstrates the experience of time pressure to complete various bureaucratic tasks is common among social workers and appears to place a barrier between social workers and families. Ferguson (2010) suggests that this distance is an avoidance technique individuals and organisations use to defend against the anxiety associated with hostile contact with parents. Research indicates that administrative demands in child protection can take up 25-80% of social work time (Baginsky et al., 2010; Homles et al., 2009; Holmes & McDermid, 2013; White et al., 2010;). Research and policy are concerned with social worker's administrative demands distracting them from directly working with children and families (Audit Commission, 2002; Munro, 2004, 2011a; Holmes & McDermid, 2013). The task-focused orientation of child protection work, along with the limited time available for reflection, may contribute to a culture that has indirectly helped social workers avoid scrutiny of their performance (Fook & Askeland, 2007).

Master Theme 3: Sustaining Oneself in a Maligned Profession

This section discusses participants' experience of *learning to disconnect* (subtheme 3.1), unconsciously through using morbid humour in relation to the literature on the psychology of humour. The discussion draws on social work literature related to emotional expression and resilience to understand the study finding of *developing self-awareness* (subtheme 3.2). Good relationships with families they work with, colleagues, managers, and the wider organisation influence social workers' sense of being valued. The concept of 'mattering' helps to understand the experience of *being seen* (subtheme 3.3).

*S*ocial workers' responses to ethical and emotionally demanding work through learning to connect and disconnect, consciously or unconsciously, is an overarching thread in the study. The need to disconnect intentionally and unconsciously is a means of self-preservation to relieve stressful situations involving assessing parenting or generally within their role. The use of humour and its relation to unconscious processes in this study is a novel finding for social workers considering parenting not found elsewhere in the literature. Therefore, exploring other avenues of research around this is valuable. The origins of the

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psychological use of humour and its relation to unconscious processes is found in Freud (1960,1905), where jokes are considered a strategy to cope with discomfort. According to participants in this study, a warped sense of humour is part of the professional culture to, as Marie said, *'take the edge off'* the challenging encounters when assessing parenting. Social workers who experience aggression, hostility and even violence from parents respond by minimising and under-reporting these experiences to downplay them (Stanley & Goddard, 2002). Thus, social workers can use morbid humour with colleagues as a skilful means of survival to communicate and release their emotional distress and sustain themselves and others. Often the use of humour is relationally experienced with those we feel comfortable and safe. Furthermore, humour may serve a useful function for social workers and teams. Research into the use of humour in organisations has found benefits in team morale (Gruner, 1997), that it can enhance group cohesiveness (Duncan, 1982), stimulate individual and group creativity (Murdock & Ganim, 1993), and create a more positive organisational culture (Clouse & Spurgeon, 1995).

The present study also provides evidence of social workers valuing and *developing self-awareness* (subtheme 3.2) of their emotional responses to their interactions with parents. Personal therapy and supervision are two methods they used to develop self-awareness and critical reflections, which have long-term impacts on their work. Kinman and Grant (2011) found that social work students who are more skilled at expressing their emotions were more resilient to work stress. They show the expression of emotion is associated with emotional knowledge and regulation, which aids resilience at work within clear emotional boundaries. The current study's findings concurs that participants' accounts of exploring and expressing their emotions both personally and professionally functioned to sustain themselves in their work. However, developing self-awareness and willingness to express emotions should not be the sole responsibility of the individual. Organisations should support social workers to develop these skills and create a culture that facilitates this on an ongoing basis. Suggestions for this are provided in the implications section.

Another way participants describe feeling sustained in their work and profession is through their relationships with others, including professional, formal, informal, and socially. The sustaining effect of relationships are critical in supporting families and includes developing effective working relationships with parents, supportive colleagues and managers, and working with multidisciplinary teams. The frequent mention of needing a supportive manager that participants remarked *'has your back'* suggests social workers request managers and organisations to stand in solidarity with them and for peers to *shoulder* each other as allies to sustain themselves in ethically demanding work (Reynolds, 2019). A culture of collective ethics and shouldering each other up in a sustainable way can be powerful for those working against social injustice and coping with state injustices, including poverty and the impact of austerity (Bywaters et al., 2017; Featherstone et al., 2016; Gupta et al., 2018; Gupta, 2018; Reynolds, 2010).

The sustaining power of "*Being Seen*" (subtheme 3.3), feeling supported and valued by others, particularly the organisation, is an important finding of this research. The moral, social, and political responses to risk and welfare expose social workers to this social environment's *"emotional politics"* (Warner, 2015, p.6). As described earlier, social workers operate within a highly politicised, media sensationalised, and criticised context. The literature acknowledges that social workers' limited use of empathic therapeutic communication skills are so commonly observed in studies that it is thought to be due to systemic factors (Critchley, 2020; Ferguson, 2016; Pollard, 2018). However, research does not go into more detail nor specifically highlight the influence of systemic factors, such as time or being valued by the organisation as shown in the present findings.

The concept of *"mattering"* refers to feeling valued and offers inspiring and energising ideas to help sustain an ethical value-based practice. It can also explain the subtheme (3.3) "*Being Seen*". Rosenberg and McCullough suggest that *"mattering is a motive: the feeling that others depend on us, are interested in us, is concerned with our fate, or experience us as an ego-extension exercise a powerful influence on our actions"* (1981, p. 165). Their research shows that adolescents who feel they matter (to their parents) are less likely to

commit delinquent acts regardless of their self-concepts. Although their study focused on adolescents, the concept is applied elsewhere, including adult learners (Scholossberg, 1989), and has come into child welfare, family therapy, and organisational resilience literature (Gilisson & Hemmelgarn, 1998; Madsen, 2014). Mattering can exist at different levels of interactions, with research supporting a parallel process. For instance, social workers who feel they matter in their interactions with colleagues, supervisors and organisations are more likely to engage with children and families in way reciprocates this. The broader context of family safeguarding organisations is required to reflect mattering practices in their supervisory and organisational support (Madsen, 2014).

Suggestions for Implications

This research has important clinical implications for social workers, clinical psychology, supervision, professional teams, training and continuing professional development. The applicability and suitability of these will vary according to individual, organisational and community cultures. Also, the economic and political climate which restricts services and resources mean significant change is unlikely to happen soon. Nevertheless, and with the spirit of pragmatism in line with this research's epistemology of critical realism, this section presents practical implications for improving the experience of social workers, families and teams working in family safeguarding services.

Suggestions for Social Workers

This research highlights the interplay between personal and professional experiences for social workers to support and assess parents. History and culture within child protection work encourages social workers to adopt a professional distance that limits opportunities to connect with emotions and experiences relationships authentically (Fook & Askeland, 2007; Waters, 1992). Recognising social workers as individuals with different levels of vulnerability highlights that there is value in considering our psychological influence in the therapeutic

relationship (Lowe, 2016). Practitioners are encouraged to reflect on their personal experiences.

Experiences of parenting and childhood resonate when working with families over time, especially when workers' personal milestones, such as becoming a parent or losing a parent, interact with their work. Participants recognise individual therapy as professionally and personally beneficial, suggesting that social workers may find it beneficial to seek therapy during times of personal and professional hardships to manage the work's emotional impact. Employee support services offer psychological therapy for social workers, commonly in response to emotional burnout. However, more proactive offers of psychological support are preferred to prevent burnout, retain and sustain workers.

Suggestions for Inter-professional working, Clinical Psychology and Supervision

Relationships are fundamental in everyday social work practice, including with families, supervisors and professionals within and outside of organisations. This study shows that social workers distinguish between management supervision and reflective supervision. According to Kadushin (cited in Payne, 1994), the function of supervision has three components: the managerial and administrative; the educative and the supportive; and leadership. Social work practice has developed sound case management systems focused on monitoring and reporting risk. There is a need for social workers to proactively manage and balance risk and needs, including the need to agree early on about the goals to be met and adequate services that will support the parents in meeting those (Ward et al., 2014). However, this is based on rational thinking frames and procedures and can miss valuable information based on intuitive reasoning. Equally, without space for personal reflection, one's judgement may be influenced by unconscious biases and emotional reactions (Spratt et al., 2015). Therefore, a combination of reflective and managerial supervision would strike a balance between the two paradigms of knowledge.

Reflective supervision does not need to be one-to-one supervision; there may be benefits to reflective supervision in groups or indirect consultation. Clinical psychology can

offer a social workspace for reflective practice or indirect case consultation, which many local authorities seek out and value for their staff teams. Clinical psychologists working with Family Safeguarding Teams may be well-placed in terms of their psychological knowledge related to clinical practice, group dynamics, and facilitation skills to run reflective practice groups and collaborative consultations. Systemic based consultation groups, such as collaborative consultation model, can encourage practitioners to form connections and partnerships with other agencies (Fredman et al., 2018). Clinical Psychologists and Social Workers can inter-professionally work together to map out relationships and connect with the culture of the consultee's and family contexts to enhance collaborations, support and galvanise resources (Mattison & Fredman, 2018). Clinical psychology may be able to provide specific consultation regarding parenting assessments through utilising relational-collaborative approach to risk management (Aggette & Messent, 2019). Thus, by clinical psychologists collaborating with social workers regarding risk management and parenting assessments, this can provide social workers with the sense of being valued and 'being seen', an important finding of this research. Furthermore, this could have valuable implications as it would help improve risk management and arguably support for parents by considering multiple sources of knowledge, expertise, and offers of interventions.

In addition, the emphasis by social workers for managers to 'have their back' relates to managing the constraints of the role, regarding limited resources and the moral distress this causes them. An often-overlooked aspect of supervision is the mediation role for the more commonly emphasised personal support needs being identified when staff are struggling with resources constraints (Stanley & Goddard, 2002). Richards and colleagues (1990) describe the needs of frontline staff to be communicated in terms of identifying resources constraints and coordination issues so that managers are representing their team externally and internally.

Research has also shown the importance of organisational leadership in facilitating a reflective approach to supervision (Lawlor, 2013). The study's findings suggest that social workers experience emotional and moral distress when working with families due to

organisational constraints. Given the importance of sustainability in value-based ethical practice, there is a need to consider alternative and innovative approaches to supervision such as 'supervision of solidarity' (Reynolds, 2010; 2011a). Reynolds brings together activism and solidarity practices with therapeutic supervision to offer a way of contributing to workers' collective sustainability through connecting with their collective ethics. Through offering supervision, workers are invited to share "collective accountability and by honouring our resistance against the way society is structured unfairly" (Reynolds, 2010, p. 255). This practice has the potential to not only facilitate and enhance reflexivity whilst acknowledging and attending to the ethical pain workers may experience in their work due to organisational restrictions and its moral distress. It can also offer a way of creating and sustaining teams by encouraging members of the Solidarity Group to witness, reflect on and weave connections in the group.

Suggestions for Training and Continuing Professional Development

An essential suggestion from this research is to cultivate self-awareness and reflection in the training culture of social work and their continuing professional development. According to participant accounts, more experienced social workers support junior colleagues in both formal and informal ways. Formally, two participants were consultant social workers who offered supervision and guidance to other practitioners. In light of this and drawing on the social work early apprenticeship model, where those less experienced learned through observation and instruction (Davys & Beddoe, 2010). One suggestion for organisations is to offer a mentorship scheme where experienced workers can offer ongoing peer support to less-experienced colleagues. More contact and support can be mapped for career stages when most social workers leave child protection. For example, after a year post qualification, between three to four years of practice, six to seven years just before the estimated average of eight years when many social workers leave the profession (Cutis et al., 2009).

Critical Evaluation of Study Quality

As outlined in the Introduction chapter, there is a clear rationale for this research topic, given the gap in the literature for knowledge of social workers experience of assessing parenting. This study provides social workers' first-person accounts of their experiences of assessing parenting in the context of family safeguarding. This research offers new understandings to several stakeholders, including social work trainers, social work practice and their organisations, thus representing a meaningful contribution to the field.

Strengths of the IPA methodology is that it enables an in-depth exploration of participants' lived experiences. This detailed analysis of each interview ensured rigour and facilitated the interpretation of the text whilst encapsulating individual experiences. This study's small sample size meant that the idiographic nature of IPA was met (Smith et al., 2009) and representing participant accounts through verbatim resonating quotes in the results chapter. Furthermore, using IPA may have contributed to a detailed understanding of social workers-parent relationships, better understood through values and contributing to the existing knowledge base, which highlights the importance of therapeutic and communication skills in their working relationship. Additionally, strength in the study lies in the development of the research questions and interview schedule. Through consultation with the supervisory team, parents who have lived experience received parenting assessment and a professor in social work—helping to incorporate multiple perspectives into the research design and contributing to well develop interview schedule. Moreover, a pilot interview conducted with an experienced social worker provided helpful suggestions to the final interview schedule.

The following section considers the challenges and opportunities related to recruitment. The evaluation of the quality of the study follows, using the "Big-Tent" Criteria for Excellent Qualitative Research (Tracy, 2010) in the same way as had been applied to the literature in the systematic review (Appendix B). This section ends with Table 8 that presents the opportunities and challenges of using online interviews.

Challenges and Opportunities of Recruitment

As highlighted previously, social workers are in a time pressurised and scrutinised profession. Difficulties in recruitment for the research were considered due to time pressures (Audit Commission, 2002; Munro, 2004, 2011; Holmes et al., 2009; Holmes & McDermid, 2013). However, the COVID-19 pandemic in which the study took place provided both opportunities and challenges. The main advantage to recruit was that it was possible to remotely interview participants, which was convenient and reduced the time commitment as no travel was required. A potential factor that may have challenged the availability of social workers during the pandemic was the increased number of families referred for safeguarding assessments. A survey of 15 England Local authorities found higher referrals associated with domestic abuse and more than usual higher levels of complexities than during 'normal' times (Baginsky & Manthorpe, 2020).

A total of six potential participants made direct contact with the researcher between September 2020 and February 2021. Three interviews were arranged and conducted with little difficulty. The remaining three proved more challenging to set up; two of the interviews were rearranged multiple times and eventually went ahead in the study's timeframe. However, one potential participant who was initially interested in taking part found it challenging to commit the time despite offering a range of times and offering to interview two sessions if need be. This interview was, unfortunately, unable to go ahead in the end.

Table 7 *'Big-Tent'* **Criteria for Qualitative Quality (Tracy, 2010)**

Criteria (Tracy, 2010)	Evidence for meeting criteria
Worthy Topic The topic chosen for research is relevant, timely, significant, interesting.	- The study questions the assumption that having procedural guidance on what to cover on a parenting assessment is sufficient, and makes a worthwhile contribution to understanding the experience of carrying out a parenting assessment.
Rich Rigor Sufficient richness and abundance of data sources, samples. Rigorous data analysis procedure which is sufficiently complex and in-depth to be able to describe phenomena being studied.	- Initial positioning interview and ongoing bracketing interviews with supervisor and peer IPA researcher. - Data from five participants fit within the recommended amount for IPA studies (Smith et al., 2009). - Enough time was allowed for interviews to gather interesting and significant data, with most interviews being on average 90mins. - Extensive reflective and field notes made at various stages of the research. - Regular discussions of data analysis, interpretation, and conceptualisation with supervisory team. - Table indicating representation of master and sub-ordinate themes across participants (Appendix J).
Sincerity Self-reflexivity about researcher's biases, goals. Honesty, transparency about research process including mistakes	- Researcher provides her personal and epistemological positions and perspectives. - This allows the reader to perceive the research's values and perspectives and the role in the inevitable double hermeneutic of making sense of participants' accounts.

	- Regular supervisory meetings and discussions with a peer IPA researcher and regular reflective journaling provided critical self-reflexivity processes such as bracketing and maintaining stringency in the analytical process.
	- Transparency regarding own position as researcher.
	- Transparency also demonstrated by including direct quotes from participants and providing extract of coded transcript (Appendix I).
Credibility Study demonstrates trustworthiness and plausibility of research findings.	- Through using expert by experience consultation in the research development.
	- Supervisory team included a Clinical Psychologist working in a Family Safeguarding Service.
	- Meaningful direct quotes from participants support the credibility of findings.
Resonance Study's ability to influence or move reader by presenting text which is clear, evocative, and promotes empathy and identification. Study's ability to generate knowledge resonance for different contexts, situations, audiences.	- Efforts were made to accurately represent the participants' accounts and embed particularly emotive and resonating quotes in the narrative presented in the results chapter.
Significant Contribution Study makes important contribution to the	- Extends knowledge related to social work and parenting assessments by exploring how social workers

field by improving/extending knowledge, theoretical understandings, or clinical practice		experience assessing parenting capacity to complement literature on the process of conducting a parenting assessment.
	-	Provides pragmatic recommendations to improve social work practice and explores ways that clinical psychology can facilitate this through theory and joint working.
	-	This research contributes to generating ideas for future research.
Ethical		
Adherence to professional/research ethics guidelines, responding ethically to issues which arise in research process	-	Research design and methodology met the standards required by university ethics committee, demonstrating awareness of relevant ethical issues (protocol number: LMS/PGT/UH/04199).
Meaningful Coherence		
Whether study achieves its stated aims.	-	Semi-structured interviews and IPA are appropriate methodologies and techniques for the research aims.
Coherence between epistemological position of research and research design, data collection, and analysis	-	Interpretation of findings supported by linking present findings and prior research through a broad literature review.
	-	Discussion chapter offers meaningful theory-practice links through to suggestions for implication for practice.
	-	Practical recommendations derived from present study demonstrates the connection between theory and practice.

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Table 8: *Opportunities and Challenges of using Online Interviews*

Opportunities	Challenges
➢ Requiring less time to participant due to the lack of travel time.	➢ Challenging to discuss sensitive topic, that need self-reflection & disclosure.
➢ Accessibility and convenience for both researcher and participants	➢ Internet connectivity issues may disrupt the flow of emotional conversations. However, with testing the internet connections regularly helped to reduce its impact on conversations.
➢ Participants were familiar with Zoom and MS team due to remote working. ➢ Familiarity meant participants were comfortable and willing to discuss important matters.	➢ Use of platforms for work purposes might have made it difficult for participants to switch from their professional stance and access their personal stance.

Suggestions for Future Research

Since this research was explorative, broadly constructed through its questions, it has provided meaningful insights into the experience of social workers assessing parenting capacity. There remain potential avenues within the research topic that is ripe for further exploration, including:

➢ How do social workers and other professionals working in family safeguarding services understand, construct, and use emotions in practice. A recent literature review indicates a gap in empirical studies in this area (O'Connor, 2020).

➢ Future research could explore the extent to which the frames of reference social workers use vary according to ethic and cultural backgrounds, and between women and men.

➢ To what extent does using self-reflection, interpersonal skills, and personal experience to relate to families influence practice outcomes? How do families experience social workers who consciously work in this way, and what are the effects on the therapeutic relationship from the client's perspective?

Reflection

I approached this project with curiosity, wanting to centre my previously peripheral perspective on social workers' experiences with parents, and with a motivation to be pragmatic with the research scope. Having an external supervisor connected to a family safeguarding service provided a crucial insider's perspective while supporting recruitment, my thinking during analysis, and disseminating findings.

I started this thesis journey holding in mind my clinical experiences of working with service users and social workers in family safeguarding. I felt unsure of my outsider position to the research participants. I wondered if participants felt a sense of pressure to maintain their professional stance in the first part of the interview; it seemed to take them some time to feel comfortable discussing personal and professional connections. Even still, all participants generously shared their time, thoughts, and inner struggles regarding working with parents. I sensed they wanted to reduce the impact of inevitable biases on their views and work with parents, which requires self-awareness, reflection, and effort to understand its impact on their practice. The research helped transcend my assumptions of social workers' as clinical, detached, and procedural in their approach towards families. Through using IPA rigorously, I gained an insight into the essence of their experience; one that goes beyond the dominance of the technical-rational into the intuitive, messy paradigm. I now wonder if my 'outsider' position as a psychologist meant that they felt less concerned about my tacit knowledge and allowed them to freely explore and make sense of their experiences.

Though initially confident about completing the project within the timeframe and constraints of the Doctorate course, my experience writing this thesis was challenging. Becoming a new mother on training and the restrictions and isolation related to COVID-19 all placed limits, challenges, and possibilities in my path. These obstacles were profoundly transformative in their own right, although experiencing them collectively was at times overwhelming. I found myself going through the motions—progressing the thesis one task at a time, doing as much (or of late as little) as I can to be 'good enough' for my family while

enduring the anxiety, uncertainty, and isolation of lockdown. More than ever, I appreciated the solace of my relationships. I found ways of connecting with others virtually and with nature daily, to ground myself through the ebbs and flows of a range of emotions during this journey. During this journey, I reconnected with my childhood and with the African proverb, '*it takes a village to raise a child'*, resonates with me as a parent.

Conclusion

This research aimed to explore social workers' personal and professional impact of assessing parenting capacity in family safeguarding services. An in-depth qualitative analysis of five social workers using IPA methodology demonstrates the profound effect of participants' personal and professional experiences. The idiographic and phenomenological nature of this study goes beyond broad generalisations to develop a deeper understanding of this phenomenon.

This study contributes to an emerging literature examining the experiences of social workers in the UK working with parents. This research improves understanding of the personal experience involved in supporting and assessing parenting for social workers, conceptualising therapeutic and communication skills as grounded in values. Findings demonstrate that a parenting assessment is more than a procedural task. Instead, it is relationally-based between social workers and parents, colleagues, managers, organisations and society.

The research offers important suggestions for training, teams, management, and social workers; centred on the value of self-reflection, peer support and organisations responsibilities to sustain this. By sharing the experiences of five social workers supporting and assessing parenting within family safeguarding services, this research enables readers to gain insight into an often-misunderstood profession. To stimulate personal reflection and inspire open, creative, collectively sustaining practices to enhance social work's ethical value-based traditions in communities.

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References

Adcock, M., & White, R. (Eds.). (1985). *Good-enough parenting: A framework for assessment.* London: British Agencies for Adoption and Fostering.

Ahern, K. J. (1999). Pearls, Pith and Provocation: Ten Tips for Reflexive Bracketing. Qualitative Health Research, 9 (3), 457-411.

Aggett, P., & Messent, P. (2018). Soapbox: Technical, relational and relational-collaborative approaches to risk management. *Clinical child psychology and psychiatry*, *24*(3), 642-649.

Archibald, M. M., Ambagtsheer, R. C., Casey, M. G., & Lawless, M. (2019). Using zoom videoconferencing for qualitative data collection: perceptions and experiences of researchers and participants. *International Journal of Qualitative Methods*, *18*, 1609406919874596.

Audit Commission (2002), Recruitment and Retention: A Public Service Workforce for the 21st Century, Audit Commission, London.

Aunos, M., & Pacheco, L. (2020). Able or unable: How do professionals determine the parenting capacity of mothers with intellectual disabilities. *Journal of Public Child Welfare*, 1-27.

Azar, S. T., Lauretti, A. F., & Loding, B. V. (1998). The evaluation of parental fitness in termination of parental right cases: A functional-contextual perspective. Clinical Child and Family Psychology Review, 1, 77–100.

Banks, S. 2008. "Critical Commentary: Social Work Ethics." *British Journal of Social Work* 38
(6): 1238–1249.

Banks, S. (2016) 'Everyday ethics in professional life: Social work as ethics work', Ethics and
Social Welfare, 10(1), pp. 35–52.

Baginsky, M., & Manthorpe, J. (2020). Managing through COVID-19: the experiences of
children's social care in 15 English local authorities.

Baginsky, M., Moriarty, J., Manthorpe, J., Stevens, M., MacInnes, T., & Nagendran, T.
(2010). Social workers' workload survey: messages from the frontline: findings
from the 2009 survey and interviews with senior managers. Retrieved from
https://core.ac.uk/download/pdf/4152168.pdf

Barak, M., Nissley, J. and Levin, A. (2001) Antecedents to retention and turnover among
child welfare, social work, and other human service employees: what can we
learn from past research? A review and metanalysis. Social Service Review 75
(4), 625–661.

Barker, N. C., Pistrang, N., & Elliott, R. (2002). Foundations of qualitative methods.
*Research methods in clinical psychology: An introduction for students and
practitioners*, 5-72.

Belsky, J., & Vondra, J. (1989). 'Lessons from child abuse: The determinants of parenting.'
In Cichetti, D. & Carlson, V. (eds.), Child Maltreatment:Theory and Research on
the Causes and Consequences of Child Abuse and Neglect, Cambridge,
Cambridge University Press.

Biggerstaff, D., & Thompson, A. R. (2008). Interpretative phenomenological analysis (IPA): A qualitative methodology of choice in healthcare research. Qualitative Research in Psychology, 5(3), 214-224.

Bettelheim, B. (1987). *A good enough parent*. New York, NY: Alfred A. Knopf.

Beveridge, W. 1942. Social Insurance and Allied Services (Beveridge Report). London: HMSO.

Bilson, A., & Martin, K. (2016). Referrals and Child Protection in England: One in Five Children Referred to Children's Services and One in Nineteen Investigated before the Age of Five. British Journal of Social Work, 47(3), 793–811

Bowlby, J. (1988). Clinical applications of attachment: A secure base. London: Routledge, 85

Brandon, M., Bailey, S. E., & Belderson, P. (2010). *Building on the learning from serious case reviews: a two-year analysis of child protection database notifications 2007-2009*. London: Department for Education.

Budd, K. S., Poindexter, L. M., Felix, E. D., & Naik-Polan, A. T. (2001). Clinical assessment of parents in child protection cases: An empirical analysis. Law and Human Behavior, 25, 93–108.

Bunting, L., McCartan, C., McGhee, J., Bywaters, P., Daniel, B., Featherstone, B., & Slater, T. (2017). Trends in child protection across the UK - a comparative analysis. British Journal of Social Work, 48(5), 1154–1175.

SOCIAL WORKERS' EXPERIENCES OF ASSESSING PARENTING

Burton, J. and van den Broek, D. (2008), "Accountable and countable: information

management systems and bureaucratization of social work", British Journal of

Social Work, Vol. 37 No. 7, pp. 1326-42.

Bywaters, P., Brady, G., Bunting, L., Daniel, B., Featherstone, B., Jones, C., Morris, K.,

Scourfield, J., Sparks, T., & Webb, C. (2017). Inequalities in English Child

Protection practice under Austerity: A universal challenge? Child and Family

Social Work, 23(1), 53-61.

Cater, J. K. (2011). Skype a cost-effective method for qualitative research. *Rehabilitation

Counselors & Educators Journal*, *4*(2), 3.

Charmaz, K. (2006). Constructing grounded theory: A practical guide through qualitative

analysis. London: Sage.

Children's Commissioner for England (2018) 'Stability Index 2018', Retrieved from:

https://www.childrenscommissioner.gov.uk/publication/stability-index-2018/.

Chief Secretary to the Treasury (2003) Every Child Matters, Cm 5860, London, Stationery

Office.

Clarke, V. & Braun, V. (2014) Thematic analysis. In A. C. Michalos (Ed.), Encyclopaedia of

Quality of Life and Well-Being Research (pp. 6626-6628). Netherlands: Springer.

Cleaver, H., Unell, I., & Aldgate, J. (1999). *Children's needs: Parenting capacity: The impact

of parental mental illness, problem alcohol and drug use, and domestic violence

on children's development*. London: Stationery Office.

Cleaver, H., Ward, H., Scott, J., Rose, W., & Pithouse, A. (2008). *The Integrated Children's System: enhancing social work and inter-agency practice*. Jessica Kingsley Publishers.

Clouse, R. W., & Spurgeon, K. L. (1995). Corporate analysis of humor. *Psychology: A journal of human behavior.*

Community Care. (2005). Child protection. Retrieved from: http://www.communitycare.co.uk/2005/03/15/child-protection-3/

Condie, L. O. (2003). Parenting evaluations for the court: care and protection matters. New York: Kluwer Academic/Plenum Publishers.

Critchley, A. (2020). The lion's den: Social workers' understanding of risk to infants. *Child & Family Social Work*, 25, 895-903

Crossley, M. L. (2000). Introducing narrative psychology: self, trauma, and the construction of meaning. Philadelphia: Open University Press.

Curtis, L., Moriarty, J., & Netten, A. (2010). The expected working life of a social worker. *British Journal of Social Work*, *40*(5), 1628-1643.

Davys, A. & Beddoe, L. (2010) Best Practice in Professional Supervision: A Handbook for Helping Professions, Jessica Kingsley Publishers, London and Philadelphia, PA.

DePanfilis, D. and Zlotnik, J.L. (2008) Retention of front-line staff in child welfare: a systematic review of research. Children and Youth Services Review 30995–41008.

Department of Health. 1988. Protecting Children: A Guide for Social Workers Undertaking a

Comprehensive Assessment. London: HMSO.

Department of Health (DOH) (2000) Assessing Children in Need and their Families: Practice

Guidance. London: The Stationery Office.

Department of Health (2001) Studies Informing the Framework for the Assessment of

Children in Need and their Families, London, Stationery Office.

Department of Health, Department of Education and Employment, Home Office (2000)

Framework for the Assessment of Children in Need and their Families, London,

Stationery Office.

Department for Education. (2011a). The common assessment framework. Retrieved from

www.education. gov.uk/childrenandyoungpeople/strategy/integratedworking/caf

Department for Education. (2011b). The Munro review of child protection. Retrieved from

www.education. gov.uk/munroreview

Dickens, J., Berrick, J., Pösö, T., & Skivenes, M. (2017). Social workers and independent

experts in child protection decision making: messages from an intercountry

comparative study. *British journal of social work*, *47*(4), 1024-1042.

Downes, M. J., Brennan, M. L., Williams, H. C., & Dean, R. S. (2016). Development of a

critical appraisal tool to assess the quality of cross-sectional studies (AXIS). *BMJ

Open*, *6*(12), e011458.

Duncan, W. J. (1982). Humor in management: Prospects for administrative practice and
 research. *Academy of management review*, *7*(1), 136-142.

Edwards, D. & Potter, J. (1992). Discursive Psychology. London: Sage Publications.

Elliott, R., Fischer, C. T., & Rennie, D. L. (1999). Evolving guidelines for publication of
 qualitative research studies in psychology and related fields. British Journal of
 Clinical Psychology, 38(3), 215-229.

Emerson, P., & Frosh, S. (2009). Critical Narrative Analysis in Psychology: A Guide to
 Practice. Basingstoke: Palgrave Macmillan.

Eve, P. M., Byrne, M. K., & Gagliardi, C. R. (2014). What is good parenting? The
 perspectives of different professionals. *Family Court Review*, *52*(1), 114-127.

Featherstone, B. 2010. "Ethic of Care." In *Ethics and Value Perspectives in Social Work*,
 edited by M. Gray and S. Webb, 73–84. Basingstoke: Palgrave Macmillan.

Featherstone, B., & Gupta, A. (2020). Social workers' reflections on ethics in relation to
 adoption in the UK: Everywhere but nowhere?. *The British Journal of Social
 Work*, *50*(3), 833-849.

Featherstone, B., Gupta, A., Morris, K., & Warner, J. (2018). Let's stop feeding the risk
 monster: towards a social model of 'child protection'. *Families, Relationships and
 Societies*, *7*(1), 7-22.

Ferguson, H. (2016). What social workers do in performing child protection work: Evidence from research into face-to-face practice. *Child & Family Social Work*, *21*(3), 283-294.

Fook, J., & Askeland, G. A. (2007). Challenges of critical reflection:'Nothing ventured, nothing gained'. *Social work education*, *26*(5), 520-533.

Fook, J. (2004, October). Social work and civil society: reclaiming links between the social and the personal. In *International Association of Schools of Social Work Conference, Adelaide, October*.

Forrester, D., Kershaw, S., Moss, H., & Hughes, L. (2008b). Communication skills in child protection: How do social workers talk to parents?. *Child & Family Social Work*, *13*(1), 41-51.

Forrester, D., McCambridge, J., Waissbein, C., & Rollnick, S. (2008a). How do child and family social workers talk to parents about child welfare concerns?. *Child Abuse Review: Journal of the British Association for the Study and Prevention of Child Abuse and Neglect*, *17*(1), 23-35.

Fredman, G., Papadopoulou, A., & Worwood, E. (2018). Collaborative consultation in mental health: Guidelines for the new consultant. London: Routledge.

Freud, S. (1960). The Joke and its Relation to the Unconscious. 1905. *Trans. J. Strachey. London: Penguin. The Pelican Freud Library*, *6*.

Gigerenzer, G. (2003). Reckoning with risk: learning to live with uncertainty. London:

    Penguin Gigerenzer, G. (2007). Gut feelings: the intelligence of the unconscious.

    New York: Viking Press.

Gilgun, J. F. (2005). Qualitative research and family psychology. *Journal of family

    psychology*, *19*(1), 40.

Gillingham, P. (2012), "The development of electronic information systems for the future:

    practitioners 'embedded structures' and technologies-in-practice", British Journal

    of Social Work, Advanced online access.

Glisson, C., & Hemmelgarn, A. (1998). The effects of organizational climate and

    interorganizational coordination on the quality and outcomes of children's service

    systems. *Child abuse & neglect*, *22*(5), 401-421.

Goddard, C., & Hunt, S. (2011). The complexities of caring for child protection workers: The

    contexts of practice and supervision. *Journal of Social Work Practice*, *25*(4), 413-

    432.

Gray, M. (2010). Moral sources and emergent ethical theories in social work. *British Journal

    of Social Work*, *40*(6), 1794-1811.

Griffin, A., & May, V. (2012). Narrative analysis and interpretative phenomenological

    analysis. Researching Society and Culture, 441-458.

Gruner, C. R. (1997). The game of humor: A comprehensive theory of why we laugh. New

    Brunswick, NJ: Transaction.

Gupta, A., Blumhardt, H., & ATD Fourth World. (2018). Poverty, exclusion and child protection practice: the contribution of 'the politics of recognition & respect'. *European Journal of Social Work*, *21*(2), 247-259.

Gupta, A. (2018). Punishing the Poor? Child welfare and protection under neoliberalism. *Social Work & Society*, *16*(2).

Gupta, A., Featherstone, B. & White, S. (2016). 'Reclaiming humanity: From capacities to capabilities in understanding parenting in adversity'. British Journal of Social Work, 46(2), 339–335

Haringey. (2009), [The Peter Connolly Case] Serious Case Review, Executive Summary, Haringey Children's Safeguarding Board, London.

Harvey, D. (2007). *A brief history of neoliberalism*. Oxford University Press, USA.

Hefferon, K., & Gil-Rodriguez, E. (2011). Reflecting on the rise in popularity of interpretive phenomenological analysis. The Psychologist, 24 (10), 756-759.

Heidegger, M. (1962/1927). Being and Time. Oxford: Blackwell.

Hesse, E. (2008). 'The adult attachment interview: Historical and current perspectives', in Handbook of Attachment, eds J. Cassidy & P. R. Shaver, Guildford Press, New York, NY, pp. 395 –433.

Holmes, L., & McDermid, S. (2013). How social workers spend their time in frontline children's social care in England. *Journal of Children's Services*.8 (2), 123-133

Holmes, L., McDermid, S., Jones, A. and Ward, H. (2009). How Social Workers Spend Their Time: An Analysis of the Key Issues that Impact on Practice Pre-and Post Implementation of the Children's Integrated System, Department for Children, Schools and Families, London.

Hong, Q. N., Pluye, P., Fàbregues, S., Bartlett, G., Boardman, F., Cargo, M., ... &O'Cathain, A. (2018). Mixed methods appraisal tool (MMAT), version 2018. *Registration of copyright*, *1148552*.

Horwath, J. (2011). See the practitioner, see the child: The framework for the assessment of children in need and their families ten years on. *British Journal of Social Work*, *41*(6), 1070-1087.

Horwath, J. & Morrison, T. (2001) 'Assessment of parental motivation to change.' In J. Horwath (Ed) The Child's World. Assessing Children in Need. London: Jessica Kingsley Publishers.

Houston, S. (2010). Prising open the black box: Critical realism, action research and social work. *Qualitative Social Work*, *9*(1), 73-91.

Husserl, E. (1982). Ideas pertaining to a pure phenomenology and to a phenomenological philosophy. (F. Kersten. Trans.). Dordrecht: Kluwer.Husserl, E. (1970). The crisis of European sciences and transcendental philosophy. Trans. D. Carr. Evanston: Northwestern University Press.

Jordan, B., and N. Parton, eds. (1983). The Political Dimensions of Social Work. Oxford: Blackwell

Jamieson, N., Tranah, T., & Sheldrick, E. C. (1999). The impact of expert evidence on care proceedings. *Child Abuse Review: Journal of the British Association for the Study and Prevention of Child Abuse and Neglect*, *8*(3), 183-192.

Kendall, G. & Wickham, G. (1999). Using Foucault's Methods. London: Sage.

Kinman, G. and Grant, L. (2011). Exploring stress resilience in trainee social workers: the role of emotional and social competencies. British Journal of Social Work 41 (2), 261–275.

Laming Report (2003). The Victoria Climbie´ Inquiry: Report of the Inquiry by Lord Laming, Cm 5730, London, Stationery Office.

Laming Report (2009). The Protection of Children in England: A Progress Report, London, Stationery Office

Lawlor, D. (2013). A transformation programme for children's social care managers using an interactional and reflective supervision model to develop supervision skills. Journal of Social Work Practice: Psychotherapeutic Approaches in Health, Welfare and the Community, 27 (2), 177-189.

Lennings, C. (2005). Risk assessment in care and protection: The case for actuarial approaches. Australian e-Journal for the Advancement of Mental Health, 4, 1–10.

Lewis, C., Stenfert-Kroese, B., & O'Brien, A. (2015). Child and family social workers' experiences of working with parents with intellectual disabilities. *Advances in Mental Health and Intellectual Disabilities*. 9 (6) 2044-1282

SOCIAL WORKERS' EXPERIENCES OF ASSESSING PARENTING

Lo Iacono, V., Symonds, P., & Brown, D. H. (2016). Skype as a tool for qualitative research interviews. *Sociological Research Online*, *21*(2), 103-117.

Lonne, B., McDONALD, C., & Fox, T. (2004). Ethical practice in the contemporary human services. *Journal of Social Work*, *4*(3), 345-367.

Lonne, B., Harries, M., Featherstone, B., & Gray, M. (2015). *Working ethically in child protection*. Routledge.

Lowe, C. (2016). The professional's influence within the client system: Exploring counter-transference and adult attachment within the therapeutic relationships with children experiencing abuse and their caregivers. *Journal of Social Work Practice*, *30*(1), 59-68.

Lynch, A., Newlands, F., & Forrester, D. (2019). What does empathy sound like in social work communication? A mixed-methods study of empathy in child protection social work practice. *Child & Family Social Work*, *24*(1), 139-147.

Maccoby, E. E. & Martin, J.A. (1983). 'Socialisation in the context of the family', in Hetherington, E.M (ed.), Handbook of Child Psychology, vol iv: Socialisation, Personality and Social Development, 4th edn, New York, Wiley.

Madsen, W. C., & Gillespie, K. (2014). *Collaborative helping: A strengths framework for home-based services*. John Wiley & Sons.

Mason, C., Taggart, D., & Broadhurst, K. (2020). Parental Non-Engagement within Child

    Protection Services—How Can Understandings of Complex Trauma and

    Epistemic Trust Help?. *Societies*, *10*(4), 93.

McAuliffe, D. (1999). Clutching at codes: Resources that influence social work decisions in

    cases of ethical conflict. *Professional Ethics, A Multidisciplinary Journal*, *7*(3/4),

    9-24.

Mattison, V., & Fredman, G. (2018). Principles and practices for getting started with

    consultation in mental health. In G. Fredman, A. Papadopoulou, & E. Worwood

    (Eds.), Collaborative consultation in mental health: Guidelines for the new consultant

    (pp. 21–39). Routledge/Taylor & Francis Group.

Merleau-Ponty, M. (1996). Phenomenology of perception. Motilal Banarsidass Publisher.

Moon, K., & Blackman, D. (2014). A guide to understanding social science research for

    natural scientists. *Conservation Biology*, *28*(5), 1167-1177.

Morrison, T. (2010) 'Assessing parental motivation for change.' In J. Horwath (ed) The

    Child's World: The Comprehensive Guide to Assessing Children in Need. London:

    Jessica Kingsley Publishers.

Munro, E. 2011. The Munro Review of Child Protection: Final Report. London: Department of

    Education.

Munro, E. (2010). 'Conflating risks: Implications for accurate risk prediction in child welfare

    services', Health, Risk and Society, 12(2), pp. 119 – 30.

Munro, E. (2004). 'The impact of audit on social work practice', British Journal of Social
       Work, 34 (8), 1075-1095.

Munro, E. (1999). Protecting children in an anxious society. *Health, Risk & Society*, *1*(1),
       117-127.

Murdock, M. C., & Ganim, R. M. (1993). Creativity and humor: Integration and
       incongruity. *The Journal of Creative Behavior.* 27(1), 57-70.

O'Connor, L., & Leonard, K. (2014). Decision making in children and families social work:
       The practitioner's voice. *British Journal of Social Work*, *44*(7), 1805-1822.

Oliver, C. (2011). Critical realist grounded theory: A new approach for social work
       research. *British Journal of Social Work*, *42*(2), 371-387.

Parker, R., Ward, H., Jackson, S., Aldgate, J. and Wedge, P. (eds) (1991) Looking After
       Children: Assessing Outcomes in Child Care. London: HMSO

Parton, N. (2011). Child protection and safeguarding in England: Changing and competing
       conceptions of risk and their implications for social work. *British Journal of Social
       Work*, *41*(5), 854-875.

Parton, N. (2010). 'From dangerousness to risk: The growing importance of screening and
       surveillance systems for safeguarding and promoting the well-being of children in
       England', Health, Risk and Society, 12(1), pp. 51 – 64.

Parton, N. (2009). 'From Seebohm to think family: Reflections on 40 years of policy change in statutory children's social work in England', Child and Family Social Work, 14(1), pp. 68 –78.

Payne, M. (1994). 'Personal supervision in social work', in Performance Review and Quality in Social Care, eds A. Connor & S.Black, Jessica Kingsley Publishers, London and Bristol.

Pietkiewicz, I., & Smith, J. A. (2014). A practical guide to using interpretative phenomenological analysis in qualitative research psychology. Psychological Journal, 20(1), 7-14.

Platt, D. (2008). Care or control? The effects of investigations and initial assessments on the social worker–parent relationship. *Journal of social work practice*, *22*(3), 301-315.

Pollard, L. W. (2018). Social worker experience of fatal child abuse. *The British Journal of Social Work*, *48*(7), 1948-1966.

Prochaska, J.O. & DiClemente, C.C. (1982) 'Trans-theoretical therapy: toward a more integrative model of change.' Psychotherapy: Theory, Research, and Practice 19, 3, 276–288.

Prochaska, J.M. and Prochaska, J.O. (2002) 'Trans-Theoretical Model Guidelines for families with child abuse and neglect.' In A.R Roberts and G.J. Greene (eds) Social Workers' Desk Reference. New York: Oxford University Press.

Quinton, D., & Rutter, M. (1988). *Parenting breakdown: The making and breaking of inter-generational links* (Vol. 14). Gower Publishing Company.

Reder, P., & Lucey, C. (1995). Significant issues in the assessment of

   parenting. *Assessment of parenting: Psychiatric and psychological contributions*,

   3-17.

Reder, P., Duncan, S., & Lucey, C. (2003). *Studies in the assessment of

   parenting*. London: Routledge.

Reynolds, V. (2019). The zone of fabulousness: Resisting "vicarious trauma" and "burnout"

   with connection, collective care and justice-doing in ways that centre the people

   we work alongside. *Context*, *164*, 36-39.

Reynolds, V. (2010). A supervision of solidarity. Canadian Journal of Counselling and

   Psychotherapy, 44(3).

Reynolds, V. (2011a). Supervision of Solidarity Practices: Solidarity Teams and People-ing

   the-room. Context, 116.

Richards, M., Shepperd, A. & Payne, C. (1990) Staff Supervision in Child Protection Work,

   National Institute for Social Work, London.

Rogowski, S. (2015a). From child welfare to child protection/safeguarding: A critical

   practitioner's view of changing conceptions, policies and practice. *Practice*, *27*(2),

   97-112.

Rogowski, S. (2015b). Margaret thatcher's legacy for social work with children and families:

   Critical possibilities? Critical and Radical Social Work, 3(1), 53–65.

Rogowski, S. 2013. Critical Social Work with Children and Families: Theory, Context and Practice. Bristol: Policy Press.

Rosenberg, M., & McCullough, B. C. (1981). Mattering: Inferred significance and mental health among adolescents. *Research in community & mental health. 2,* 163–182

Rutherford, S. J., & Keeley, P. (2009). Assessing parenting capacity: Are mental health nurses prepared for this role? Journal of Psychiatric and Mental Health Nursing, 16, 363–367.

Schlossberg, N. K. (1989). Marginality and mattering: Key issues in building community. *New directions for student services*, *48*(1), 5-15.

Schön, D. A. (1987). *Educating the reflective practitioner: Toward a new design for teaching and learning in the professions*. Jossey-Bass.

Seebohm Report. 1968. Report of the Committee on Local Authority and Allied Social Services (Cmnd 2703). London: HMSO.

Seitz, S. (2016). Pixilated partnerships, overcoming obstacles in qualitative interviews via Skype: A research note. *Qualitative Research*, *16*(2), 229-235.

Siddaway, A. P., Wood, A. M., & Hedges, L. V. (2019). How to do a systematic review: a best practice guide for conducting and reporting narrative reviews, meta-analyses, and meta-syntheses. *Annual review of psychology*, *70*, 747-770.

Smith, J. A. (2004). Reflecting on the development of interpretative phenomenological analysis and its contribution to qualitative research in psychology. Qualitative Research in Psychology, 1, 39-54.

Smith, J. A. (Ed.). (2015). Qualitative psychology: A practical guide to research methods. London: Sage Publications Ltd.

Smith, J. A., Jarman, M., & Osborn, M. (1999). Doing interpretative phenomenological analysis. Dans M. Murray, & K. Chamberlain (Éds), Qualitative Health Psychology: Theories and Methods (pp. 218-240)

Smith, J., Flowers, P., & Larkin, M. (2009). Interpretative phenomenological analysis: Theory, method and research. London: Sage.

Smith, J. A., & Osborn, M. (2003). Interpretative Phenomenological Analysis. In J. A. Smith (Ed.), Qualitative Psychology: A Practical Guide to Methods (2nd ed.). London: Sage.

Spencer, L., Ritchie, J., Lewis, J., & Dillon, L. (2003). Quality in Qualitative Evaluation: A framework for assessing research evidence. London: Government Chief Social Researcher's Office.

Spratt, T., Devaney, J., & Hayes, D. (2015). In and out of home care decisions: The influence of confirmation bias in developing decision supportive reasoning. *Child Abuse & Neglect*, *49*, 76-85.

Stalker, C. A., Mandell, D., Frensch, K. M., Harvey, C., & Wright, M. (2007). Child welfare workers who are exhausted yet satisfied with their jobs: How do they do it?. *Child & Family Social Work*, *12*(2), 182-191.

Stanley, J. & Goddard, C. (2002) In the Firing Line: Violence and Power in Child Protection

Work, Wiley, Chichester and New York.

Starks, H., & Brown-Trinidad, S. (2007). Choose your method: A comparison of

phenomenology, discourse analysis, and grounded theory. *Qualitative health

research*, *17*(10), 1372-1380.

Sullivan, C., Gibson, S., & Riley, S. C. (Eds.). (2012). *Doing your qualitative psychology

project*. Sage.

Sykes, J. (2011). Negotiating stigma: Understanding mothers' responses to accusations of

child neglect. Children and Youth Services Review, 33, 448–456.

The United Nations Convention on the Rights of the Child: How legislation underpins

implementation in England (2010). Retrieved from

https://www.gov.uk/government/publications/united-nations-convention-on-the-

rights-of-the-child-uncrc-how-legislation-underpins-implementation-in-england

Tracy, S. J. (2010). Qualitative quality: Eight "big-tent" criteria for excellent qualitative

research. *Qualitative inquiry*, *16*(10), 837-851.

Tracy, S. J., & Hinrichs, M. M. (2017). Big tent criteria for qualitative quality. *The international

encyclopedia of communication research methods*, 1-10.

Triseliotis, J. P., Sellick, C., & Short, R. (1995). *Foster care: Theory and practice*. Batsford.

Tuck, V. (2004) 'Analysing risk in child protection: A model for assessment.' In V. White and

J. Harris (eds.) Developing Good Practice in Children's Services. London: Jessica

Kingsley Publishers.

Tufford, L., & Newman, P. (2010). Bracketing in qualitative social work. *Qualitative Social Work*, *11*, 80-96

Turnell, A., & Edwards, S. (1999). *Signs of safety: A solution and safety oriented approach to child protection casework.* New York: Norton.

Waller, E. M., & Daniel, A. E. (2005). Purpose and utility of child custody evaluations: The attorney's perspective. Journal of the American Academy of Psychiatry and the Law, 33, 199–207.

Ward, H., Brown, R., & Hyde-Dryden, G. (2014). *Assessing Parental Capacity to Change when Children are on the Edge of Care: an overview of current research evidence.* Loughborough University.

Warner, J. (2015). The emotional politics of social work and child protection. Bristol: Policy Press.

Waters, J. G. (1992). *The supervision of child protection work.* Aldershot: Avebury.

Webb, S. (2006) Social Work in a Risk Society, Basingstoke, Palgrave.

Weinberg, M. (2009) 'Moral distress', Canadian Social Work Review, 26(2), pp. 139–51.

Weinberg, M. and Campbell, C. (2014) 'From codes to contextual collaborations: Shifting the thinking about ethics in social work', Journal of Progressive Human Services, 49, pp. 25–37.

White, S., Wastall, D., Broadhurst, K. and Hall, C. (2010), "When policy o'leaps itself: the

tragic tale of the integrated children's system", Critical Social Policy, Vol. 30 No.

3, pp. 405-29

White, A. (2005). Literature review: Assessment of parenting capacity. Ashfield, Australia:

Centre for Parenting & Research.

Wilkins, D., & Whittaker, C. (2018). Doing child-protection social work with parents: What are

the barriers in practice?. *The British Journal of Social Work*, *48*(7), 2003-2019.

Willig, C. (2008). Introducing Qualitative Research in Psychology: Adventures in Theory and

Method. Maidenhead: Open University Press.

Willig, C. (2013). Introducing qualitative research in psychology. Maidenhead: Open

University Press.

Winnicott, D. W. (1965). The Maturational Process and the Facilitating Environment: Studies

in the Theory of Emotional Development. New York: International Universities

Press.

Witt, L., & Diaz, C. (2019). Social workers' attitudes towards female victims of domestic

violence: A study in one English local authority. *Child & Family Social

Work*, *24*(2), 209-217.

Woodcock, J. (2003). The social work assessment of parenting: An exploration. *British

Journal of Social Work*, *33*(1), 87-106.

UK Parliament (1998). Data Protection Act. HMSO, London.

Yardley, L. (2008). Demonstrating validity in qualitative psychology. Qualitative Psychology:

A Practical Guide to Research Methods, 2, 235-251.

APPENDICES

APPENDIX A: Search Strategy for the Systematic Review

The search strategies for the Systematic Review included the following methods to identify eligible empirical studies for the current systematic review.

First, using all the fields, language and dates, we searched five electronic databases; Cinalhl Plus, PubMed, Scopus and Social Care Online. The searches used the following variations of search terms see table below:

<u>**Systematic Review Search Terms**</u>

Terms relating to participant group ("social workers")	AND	Terms relating to context ("safeguarding; child protection")	AND	Terms relating to outcome ("parenting assessment")
"social AND work*" OR "social AND work* AND practitioner*" OR "social AND work* AND practice" OR "famil* AND work*"		"child* AND protect*" OR "famil* AND safegaurd*" OR "care AND proceed*" OR "court AND proceed*"		"parent*" OR "parent* AND assess*" OR "parent* AND child*" OR "parent* AND child* AND assess*"

The searches used at least one of the terms relating to "social work*" column and one of the terms relating to the service context of "child protect*". Subsequently terms relating to "parent*" were also included in the search which provided more relevant papers. In order to be included in the search results, the search terms had to appear in the title, abstract, and/or keywords of the article. This was because it would be more likely to be relevant.

1. Searches focused on British terms relating to social workers rather than including American terms such as 'child welfare officer/case manager/worker etc.

2. Several pilot searches were run with other terms relating to parenting assessment, including 'parenting competencies' and 'parental fitness', however these were excluded because of high number of irrelevant articles (e.g. relating to physical health or interventions) that were too diverse and numerous to exclude with NOT Boolean operators. In addition, these terms related to former ways of referring to parenting assessment and often more commonly referred to in international literature.

3. Pilot searches initially included a broader search strategy through using a wide range of key terms that were inclusive of the international literature and even referring to other professional's experiences relating to parenting in the context of child protection. With time and careful consideration, I decided to narrow the search strategy funnelling it down to the experiences of social workers and parenting in relation to child protection, in order to draw on the relevant literature for this study.

APPENDIX B: Critical Appraisal Tools

1. Qualitative Studies Critical Appraisal Table

Qualitative Studies Assessed Using "Big-Tent" Criteria for Qualitative Quality (Tracy, 2010)							
Author/ Authors & Year	Critchley (2020)	Ferguson (2016)	Lewis, C., Stenfert-Kroese, B., & O'Brien, A. (2015)	O'Connor, L., & Leonard, K. (2014)	Platt, D. (2008)	Pollard, L. W. (2018)	Wilkins & Whittaker (2018)	Witt, L., & Diaz, C. (2019)
Worthy Topic	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Rich Rigor	Limited	Limited	Yes	Yes	Yes	Yes	No - not enough data to support significant claims and analysis process.	Yes
Sincerity	No – although details of self-reflexivity was provided in another	No– although details details of self-reflexivity was provided in	Some – Evidence provided through transparency of the method challenges,	Yes – somewhat outlined in a mention of using reflexive approach	No – no evidence of self-reflexivity and transparency about methods	Yes	Some – evidence of researcher self-reflection	Some – evidence provided through transparency of challenges of methods, no evidence of self-reflexivity.

	publication	another publication	no evidence of self-reflexivity.		and challenges			
Credibility	Yes	Yes	Yes	Yes	Yes	Yes	Limited – due to lack of thick data provided.	Yes
Resonance	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Significant Contribution	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Ethical	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes
Meaningful Coherence	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes

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Quality Assessment of Mixed Methods Study Appraisal Tool (MMAT), version 2018 Table

Lynch, A., Newlands, F., & Forrester, D. (2019)

Category of study designs	Methodological quality criteria	Yes	No	Can't tell	Comments
Screening questions (for all types)	S1. Are there clear research questions?	X			
	S2. Do the collected data allow to address the research questions?	X			
	Further appraisal may not be feasible or appropriate when the answer is 'No' or 'Can't tell' to one or both screening questions.				
1. Qualitative	1.1. Is the qualitative approach appropriate to answer the research question?	X			
	1.2. Are the qualitative data collection methods adequate to address the research question?	X			
	1.3. Are the findings adequately derived from the data?	X			
	1.4. Is the interpretation of results sufficiently substantiated by data?	X			
	1.5. Is there coherence between qualitative data sources, collection, analysis and interpretation?	X			
2. Quantitative randomised controlled trials	2.1. Is randomisation appropriately performed?				N/A
	2.2. Are the groups comparable at baseline?				N/A
	2.3. Are there complete outcome data?				N/A
	2.4. Are outcome assessors blinded to the intervention provided?				N/A
	2.5 Did the participants adhere to the assigned intervention?				N/A
3. Quantitative non-randomised	3.1. Are the participants representative of the target population?				N/A
	3.2. Are measurements appropriate regarding both the outcome and intervention (or exposure)?				N/A
	3.3. Are there complete outcome data?				N/A
	3.4. Are the confounders accounted for in the design and analysis?				N/A
	3.5. During the study period, is the intervention administered (or exposure occurred) as intended?				N/A
4. Quantitative descriptive	4.1. Is the sampling strategy relevant to address the research question?	X			
	4.2. Is the sample representative of the target population?	X			
	4.3. Are the measurements appropriate?	X			
	4.4. Is the risk of non response bias low?	X			
	4.5. Is the statistical analysis appropriate to answer the research question?	X			
5. Mixed methods	5.1. Is there an adequate rationale for using a mixed methods design to address the research question?	X			
	5.2. Are the different components of the study effectively integrated to answer the research question?	X			
	5.3. Are the outputs of the integration of qualitative and quantitative components adequately interpreted?				N/A
	5.4. Are divergences and inconsistencies between quantitative and qualitative results adequately addressed?			**X**	

| | 5.5. Do the different components of the study adhere to the quality criteria of each tradition of the methods involved? | | | X | |

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Quantitative Studies Critical Appraisal Table

Author/ Authors & Year	Forrester, D., Kershaw, S., Moss, H., & Hughes, L. (2008)	Forrester, D., McCambridge, J., Waissbein, C., & Rollnick, S. (2008).
1. Were the aims/objectives of the study clear?	Yes	Yes
2. Was the study design appropriate for the stated aim(s)?	Yes	Yes
3. Was the sample size justified?	No	No
4. Was the target/reference population clearly defined? (Is it clear who the research was about?)	Yes	Yes
5. Was the sample frame taken from an appropriate population base so that it closely represented the Yes target/reference population under investigation?	N/S	N/S
6. Was the selection process likely to select subjects/participants that were representative of the target/reference population under investigation?	Yes	Yes
7. Were measures undertaken to address and categorise non-responders?	N/A	N/A
8. Were the risk factor and outcome variables measured appropriate to the aims of the study?	Yes	Yes
9. Were the risk factor and outcome variables measured correctly using instruments/ measurements that had been trialled, piloted or published previously?	No	Yes
10. Is it clear what was used to determined statistical significance and/or precision estimates? (e.g., p values, CIs)	Yes	Yes
11. Were the methods (including statistical methods) sufficiently described to enable them to be repeated?	Yes	Yes
12. Were the basic data adequately described?	Yes	Yes
13. Does the response rate raise concerns about non- response bias?	N/A	N/A
14. If appropriate, was information about non- responders described?	N/A	N/A
15. Were the results internally consistent?	Yes	Yes
16. Were the results for the analyses described in the methods, presented?	Yes	Yes
17. Were the authors' discussions and conclusions justified by the results?	Yes	Yes
18. Were the limitations of the study discussed?	Yes	Yes
19. Were there any funding sources or conflicts of interest that may affect the authors' interpretation of the results?	N/S	N/S
20. Was ethical approval or consent of participants attained?	Yes	N/S

Abbreviations: N/A – not applicable; N/S – not stated

Appendix C: Ethical Approval Confirmation

University of
Hertfordshire UH

HEALTH, SCIENCE, ENGINEERING AND TECHNOLOGY ECDA

ETHICSAPPROVALNOTIFICATION

TO Afrah Abdullahi

CC Dr Lizette Nolte

FROM Dr SimonTrainis, Health, Science, Engineering& Technology ECDA Chair.

DATE 16/06/2020

Protocol number: **LMS/PGT/UH/04199**

Title of study: Social workers' experiences of assessing parenting capacity.

Your application for ethics approval has been accepted and approved with the following conditions by the ECDA for your School and includes work undertaken for this study by the named additional workers below:

No additional workers named

General conditions of approval:

Ethics approval has been granted subject to the standard conditions below:

<u>**Permissions**</u>: Any necessary permissions for the use of premises/location and accessing participants for your study must be obtained in writing prior to any data collection commencing. Failure to obtain adequate permissions may be considered a breach of this protocol.

<u>**External communications**</u>: Ensure you quote the UH protocol number and the name of the approving Committee on all paperwork, including recruitment advertisements/online requests, for this study.

<u>**Invasive procedures**</u>: If your research involves invasive procedures you are required to complete and submit an EC7 Protocol Monitoring Form, and copies of your completed consent paperwork to this ECDA once your study is complete.

<u>**Submission**</u>: Students must include this Approval Notification with their submission.

Validity:

This approval is valid:

From:22/06/2020

To: 30/09/2021

Please note:

Failure to comply with the conditions of approval will be considered a breach of protocol and may result in disciplinary action which could include academic penalties.

SOCIAL WORKERS' EXPERIENCES OF ASSESSING PARENTING

Additional documentation requested as a condition of this approval protocol may be submitted via your supervisor to the Ethics Clerks as it becomes available. All documentation relating to this study, including the information/documents noted in the conditions above, must be available for your supervisor at the time of submitting your work so that they are able to confirm that you have complied with this protocol.

Should you amend any aspect of your research or wish to apply for an extension to your study you will need your supervisor's approval (if you are a student) and must complete and submit form EC2.

Approval applies specifically to the research study/methodology and timings as detailed in your Form EC1A. In cases where the amendments to the original study are deemed to be substantial, a new Form EC1A may need to be completed prior to the study being undertaken.

Failure to report adverse circumstance/s may be considered misconduct.

Should adverse circumstances arise during this study such as physical reaction/harm, mental/emotional harm, intrusion of privacy or breach of confidentiality this must be reported to the approving Committee immediately.

Appendix D: Participant Information Sheet

UH ethics Protocol Number: LMS/PGT/UH/04199

PARTICIPANT INFORMATION SHEET

Title of Study

'Good enough parenting': An exploration of social workers' experiences of assessing parenting capacity.

Introduction

You are being invited to take part in a study. Before you decide whether to do so, it is important that you understand the study that is being undertaken and what your involvement will mean for you.

Please take the time to read the following information carefully and discuss it with others if you wish. Do not hesitate to ask us anything that is not clear or for any further information you would like to help you make your decision.

Who is carrying out the study?

The study is carried out by Afrah Abdullahi, a Trainee Clinical Psychologist, as part of a Doctoral qualification in Clinical Psychology. The study is supervised by Dr Lizette Nolte (Senior Lecturer at the University of Hertfordshire and Chartered Clinical Psychologist and Systemic and Psychotherapist) and

Dr Jade Weston (Clinical Psychologist working in Hertfordshire Family Safeguarding Service).

I, Afrah Abdullahi, have both personal and professional interests in the topic of the study. Asa parent and someone who has worked withfamilies with complex needs where parentingis assessed, I am interested in exploring the experiencesof working with parents around safeguarding.

SOCIAL WORKERS' EXPERIENCES OF ASSESSING PARENTING

This research is interested in exploring the knowledge, skills and challenges that social workers face when working with parents and families with complex needs in family safeguarding. The project recognises that social work in Child Protection can be a highly pressurised area of social care and this research wants to give voice to the experience of social workers in this critical under-researched area of work.

The study has received full ethical approval by the University of Hertfordshire ethics committee**:** LMS/PGT/UH/04199

What is the aim of the study?

The research aims to understand how social workers make sense of parenting assessments, what impacts their experiences of assessing parenting and what helps/supports social workers during parental assessments. Therefore, some questions will be asked about participants own ways of understandings parenting. As well as exploring the factors that enable or obstructs helpful clinical work when working with complexities in safeguarding families. It is hoped that this study will help to explore support needs of professionals working in this challenging area of work.

Who is eligible to be involved in the research?

The project welcomes qualified social workerwith at least one-year experience of working in family safeguarding teams. They should have experience of completing parenting capacity assessment.

What does taking part involve?

It is completely up to you whether you decide to take part in this study.

If you do agree to take part, you will be asked to give your consent to complete an interview as well as some information about yourself (e.g., age, ethnicity, years of experience etc). There will be a short 10-15-minute phone call to discuss eligibility. If eligible, and you are still interested we will agree to a time for a virtual interview that will take 60-90 minutes.

What happens if you change your mind about taking part?

SOCIAL WORKERS' EXPERIENCES OF ASSESSING PARENTING

It is completely up to you whether you decide to take part in this study. Agreeing to join the study does not mean that you must complete it should you later change your mind. You can withdraw at any time without giving a reason. However, should you decide to withdraw after 4 weeks of taking part in the study we may still need to use your anonymised data in the write-up of the research.

What are the benefits of taking part?

There is a lack of research looking at how social workers experience the task of assessing parenting capacity. This study aims to fill this gap by exploring how social workers makes sense of parenting, what factors enable or obstructs helpful practice when working with complexities in safeguarding families. By taking part, you will be helping build up the body of research and practice-based evidence of social work. It is hoped that this study will help to explore support needs of professionals working in this challenging area of clinical work. In addition, it may also provide participants with an opportunity to reflect on their work with parents which could be helpful for their practice.

What are the possible disadvantages of taking part?

During the interview participants may be asked some sensitive questions about their clinical practice, perhaps relating to their own experiences of parenting and the impact it is having on you personally and professionally. This will always be done sensitively and thoughtfully; only if it is particularly meaningful to their experience of making sense of how they understand parenting. If participation in this research has caused participants any distress, discomfort or upsetting feelings, theywill be given an opportunity to debrief with the researcher (Afrah Abdullah). You may also wish to contact immediate sources of support such as your family, friends, GP or a therapist.

Further support information is provided below the details of some organisations that may be useful. These sources of support will be able to help participants regarding any concerns or worries they have regarding their emotional and psychological wellbeing.

Your GP - Please consider contacting your GP if you are feeling low or anxious.

Psychological therapies - If you think that you may benefit from engaging in a talking therapy (such as cognitive behavioural therapy), then you may wish to consider self-referring to your local psychological therapies service, or asking your GP to refer you. To find your nearest service, you can search on the NHS choices.

Website: https://www.nhs.uk/Service-Search/Psychological-therapies-

(IAPT)/LocationSearch/10008

NHS Choiceself you're worried about an urgent medical concern, call 111 and speak to a fully trained adviser.   Website: https://www.nhs.uk/pages/home.aspx Helpline: 0113 825 0000

Samaritans This is a 24 hour a day, free and confidential helpline for anyone experiencing any emotional distress. Freephone: 08457 909090 Website: www.samaritans.org

Confidentiality

All information you provide in this study is completely anonymous and confidential and will be used only for research purposes. The only limit to confidentiality would be in the case that any information is given which indicates that you or someone else is at risk of harm. In this case I would need to inform the appropriate agency but would aim to inform you first. The interview will be recorded and transcribed, without any identifying information attached so responses cannot be attributed to any person. There may be some short-anonymised quotes used in publications. Your data will be stored in accordance with the Data Protection Act 1998, and only the research team will have access to the anonymised data. The data will be stored on a password-protected computer.

Who has reviewed this study?

This study has been reviewed by: The University of Hertfordshire Health, Science, Engineering and Technology Ethics Committee with Delegated Authority

What will happen to the results of this study?

The data collected during the study will be used as a part of a Doctoral Clinical Psychology project at the University of Hertfordshire. Research findings will be submitted as part of a doctoral thesis. In addition, I will write up an article for publication in a journal, again no

participant will be identifiable. The research may be presented at conferences and written up for mainstream media.

What happens next?

If you decide to take part, after reading this information sheet and asking any questions that you may have, we will arrange a suitable time to conduct the interview via zoom, MS teams or telephone if you prefer. You will also be asked to read and sign a consent form as well as provide some basic demographic information about yourself and role.

If you would like further information or would like to discuss the details and specifics of the project personally please get in touch with me by emailing aa17afy@herts.ac.ukor phone on 07944506779.

This study will be reviewed by The Health, Science, Engineering and Technology ECDA at the University of Hertfordshire.

Although we hope it is not the case, if you have any complaints or concerns about any aspects of the study, please write to the University Secretary and Registrar at the following address.

Secretary and Registrar
University of Hertfordshire
College Lane, Hatfield, Herts, AL10 9AB

Thank you for taking the time to read this information sheet and considering taking part in this study.

SOCIAL WORKERS' EXPERIENCES OF ASSESSING PARENTING

Appendix E: Consent Form

Registration Protocol Number: LMS/PGT/UH/04199

University of Hertfordshire UH

CONSENT FORM

Project Title: An exploration of social workers experiences of

assessing parenting capacity.

Statement by Participant

1. I confirm that I have read and understand the information sheet for this study ☐

2. I understand what my involvement will entail, and any questions have been answered to my satisfaction ☐

3. I understand that my participation is entirely voluntary, and that I can withdraw up to 4 weeks after the interview has been conducted ☐

4. I understand that all information obtained will be confidential ☐

5. I agree that research data gathered for the study may be published provided that I cannot be identified as a subject ☐

6. Contact information has been provided should I wish to seek further information from the investigator at any time for purposes of clarification ☐

7. I have been told how information relating to me (data obtained in the course of the study, and data provided by me about myself) will be handled: how it will be kept secure, who will have access to it, and how it will or may be used. ☐

Participant's Name ……………………………...............

Participant's Signature ………………………………….. Date …………………

If you would like feedback about the results of the study once completed, please provide
Contact details below:
E-mail address:_____

Appendix F: Debrief Information Sheet

UH ethics Protocol Number: LMS/PGT/UH/04199

University of Hertfordshire UH

Debrief Sheet

Title of Project: 'Good enough parenting': An exploration of social workers' experiences of assessing parenting capacity.

Researcher: Afrah Abdullahi

Thank you so much for taking the time to share your experiences with me, I appreciate you taking the time to help with this research. The aim of the study is to explore social workers experience of assessing parenting capacity and will help make an important contribution to understanding how parenting is assessed. They will also enable a better understanding of how you can be supported in your role.

What will happen next?

Your interview will be analysed and interpreted to see if there are similar themes and patterns, including possible further analysis of the interviews. The result will be written up in a formal report to hand in to the University of Hertfordshire. I also hope to get an article printed in a Psychological or Social Work Journal to share the findings widely.

Things to remember

- If you decide you no longer want to be part of this study, then you have the right to withdraw and I will delete your interview, up to one month from today.

- The information gathered for this study will be kept anonymous and confidential within the limits explained to you.

- Once the study is over, I will delete the recording and keep the anonymised interview transcripts in line with University ethics guidelines.

- You are entitled to have a summary of the research findings and will be made available upon completion of the study should you request it.

- If you have any further questions or queries, or you would like more information about the study then please contact me on aa17afy@herts.ac.uk

SOCIAL WORKERS' EXPERIENCES OF ASSESSING PARENTING

Complaints

If you're not happy with any part of this study, then you have the right to make a complaint. If you feel able to, then you can talk to me about this first. If not, you can speak to my supervisor at the University of Hertfordshire, Dr Lizette Nolte, email:l.nolte@herts.ac.uk Tel: 01707 286322

Further Support

If you have found any part of this interview distressing, or feel that you could do with further support then please speak to:

- Someone you know who you trust, such as your own family and friends if you feel that would be appropriate.

- Your manager, or a member of your team who will be able to help you access employee support services if that would be appropriate.

- **Your GP -** Please consider contacting your GP if you are feeling low or anxious.

- **Psychological therapies -** If you think that you may benefit from engaging in a talking therapy (such as cognitive behavioural therapy), then you may wish to consider self-referring to your local psychological therapies service or asking your GP to refer you. To find your nearest service, you can search on the NHS choices webpage: https://www.nhs.uk/Service-Search/Psychological-therapies-(IAPT)/LocationSearch/10008

- **NHS Direct** - NHS Direct delivers telephone and internet information and advice about health, illness and health services, day and night, direct to the public. Call 111or go to www.nhsdirect.nhs.uk

- **Samaritans -** This is a 24 hour a day, free and confidential helpline for anyone experiencing any emotional distress. Freephone: 08457 909090; Website: www.samaritans.org

SOCIAL WORKERS' EXPERIENCES OF ASSESSING PARENTING

Appendix G: Interview Schedule

Interview Schedule

Title of Study: 'An exploration of social workers' experiences of assessing parenting.'

Warming the context

Thank you for agreeing to take part in this research, your views are really important and your time is appreciated. This interview is an opportunity to give voice to and explore social workers' experience of assessing parenting. I just want to remind you that what you share will be confidential within the limits I have explained and will be anonymised. The interview will last between 45 minutes and 1 and half and I will be audio recording it a Dictaphone (show device).

I want to understand and learn about your experience both as a social worker and as a person working in the challenging field of child protection. I invite you to be open with me and that there are no right or wrong answers.

"The aim of this research is to explore social workers' experience of assessing parenting."

Do you have any questions or concerns before we start the interview?

I will start recording now then.

<u>Introductory questions</u>

1) Can you tell me what is it like for you to do a parenting assessment?

Prompts: What is practically and emotionally involved in completing a parenting assessment?

- Are there particular tools which you use to assess parenting?

- How useful are these tools and what are the limitations of using these tools when assessing parenting?

SOCIAL WORKERS' EXPERIENCES OF ASSESSING PARENTING

<u>Frames of Reference</u>

1) I would like to understand a little more about how you form your opinions,

conclusions, and recommendations when you assess parenting capacity.

2) Can you tell me what you draw on when forming your opinions, conclusions, and

recommendations of parenting assessment?

Prompts: How does your training, inform your opinions, conclusions and

recommendations of a parenting assessment?

How does your organization, inform your opinions, conclusions, and

recommendations of assessment of parenting?

<u>Understanding of Parenting</u>

I would like to understand a little more about how your personal knowledge and

experience in your own life comes into your parenting assessments. I am interested

in your own lived experience of parenting, e.g. through being parented or parenting

yourself.

3) How does your own personal knowledge, and maybe experience of being

parented or parenting impact your assessment of parenting?

- What comes to mind when you think about what it means for you to be a parent?
- What comes to mind when you think about your own experience of being parented?
- Can you describe what 'good enough parenting' means to you?

Are there any features from your own upbringing in your family which can affect how you view good enough parenting?

How do you think that these features come into your opinions and recommendations in a parenting assessment?

Deeper Promotes:

How does these features come into your opinions, conclusions and recommendations in a parenting assessment?

In what ways could these features affect your assessment of 'good enough parenting' and 'not good enough parenting'?

Without compromising confidentiality, can you think of an example to help me understand this more?

Understanding the ethical and emotional aspect of assessing parenting

I would like to understand more about your experience of working with different parents, where there might be:

· Parental Mental Health Difficulties

· Drug and Alcohol use

· Domestic Violence/ abuse

· Learning Disability

4) Can you tell about your experiences of working with different parent groups?

Prompts:

What are the challenges/dilemmas you may face when working with different parent groups when assessing parenting?

How different or similar to you feel you are to some of the parents you work with?

What are the main differences between a 'good (enough) parent' assessment and not good parent assessment?

What are the main differences between a 'straightforward parents' assessment and a 'tricky parents' assessment? (highlight differences based on participants own words).

Without compromising confidentiality, can you think of an example to help me understand this more?

Understanding the therapeutic relationship over time:

5) What is it initially like to relate to a parent during assessment?

6) What do you think they might make of you and your role with them,

Prompts:

What do you think they might make of your role in relation to their child(ren)?

What are your thoughts and feelings about the relationships you have with parents you work with?

What do you think the parent thinks and feels about how you have worked with them?

How do you feel your relationship with parents (generally, and/or with parents - has changed over time?

Without compromising confidentiality, can you think of an example to help me understand this more?

What do you think has brought about this change?

Over the course of your career?

Any changes in your personal life impacting this change, e.g. becoming a parent?

Since any changes in policies or guidelines?

7) Can you tell me about your experience of any mental/physical/ emotional reactions to any difficulties when working with families with such complex needs?

Prompts: Say more type prompts…

Without compromising confidentiality, can you think of an example to help me

understand this more?

Coping/Resources

8) What helps support you to cope in your role as a social worker? (when assessing

parenting?)

Prompts: Supervision? Colleague support? Personal resources? Research

evidence. Anything else?

Ending Questions:

- How did you find answering these questions and be part of this research?
- Did we talk about what you expected to or want to?
- Is there anything else you want to tell me about your experience of assess parenting that we did not already discuss?
- Anything else you think may be important for me and others to understand?

General Prompts:

- How did you experience that?
- What sense did you make of that?
- How do you make sense of that?
- What did that mean for you?
- How did you come to understand that?
- And what did you think about that?
- What do you make of that?
- What do you think happened there?
- Can you tell me more?
- Can you give me an example of that?

Appendix H: Recruitment Advert

SOCIAL WORKERS & PARENTING RESEARCH

WHO
Social Workers working in family safeguarding.

WHAT
Exploring the experience of assessing parenting.
From social workers perspective

WHY
It's an under researched area. To consider how to support social workers and families.

CONTACT
Afrah Abdullahi - Trainee Clinical Psychologist
aa17afy@herts.ac.uk

SOCIAL WORERS WITH AT LEAST ONE YEAR EXPERIENCE OF FAMILY SAFEGAURDING

60-90 MINS VIRTUAL INTERVIEW
At a convenient time via Zoom, MS teams, phone

BENEFIT
By allowing you space to reflect on your work with parents. Contributing to the understanding the experience of social workers assessing parenting .

ORGANSATION
University of Hertfordshire (UH)

In partnership with Hertfordshire Family Safeguarding Service

Ethical Approval from UH : LMS/PGT/UH/04199

SOCIAL WORKERS' EXPERIENCES OF ASSESSING PARENTING

Appendix I: Demographic Questionnaire

Demographics Form

About you

The information will allow us to provide a description of the people who took part in this study. This information will be stored separately from any other information you will provide during this study and will not be linked to your responses in any way. For the following questions, please select one option, which is most descriptive of you, or write down your answer.

Age range: 18-25 ☐ 26-35 ☐ 36-45 ☐ 46-55 ☐ 56-65 ☐
        66-75 ☐

Gender: Male ☐ Female ☐

Ethnicity:

White

1. English / Welsh / Scottish / Northern Irish / British ☐
2. Irish. ☐
3. Any other White background, please describe _____

Mixed / Multiple ethnic groups

4. White and Black Caribbean ☐
5. White and Black African ☐
6. White and Asian ☐
7. Any other Mixed / Multiple ethnic background, please describe

_____

Another ethnic group

16. Arab ☐
17. Any other ethnic group, please describe_____

Asian / Asian British

8. Indian ☐
9. Pakistani ☐
10. Bangladeshi ☐
11. Chinese ☐
12. Any other Asian background, please describe _____

Black / African / Caribbean / Black British

13. African ☐
14. Caribbean ☐
15. Any other Black / African / Caribbean background, please describe_____

Education/Qualification:

What is the highest degree or level of qualification?

SOCIAL WORKERS' EXPERIENCES OF ASSESSING PARENTING

First degree level qualification including foundation degrees, graduate membership of a professional

Institute ☐

Post graduate diploma or higher degree (e.g. MSc, PhD) ☐

Have you completed any additional training relating to parenting assessment?

_____

How many years have you practiced as a social worker?

_____

How many years have you worked in Family Safeguarding Services?

_____

Dependant Status:

Are you a parent?

Yes   ☐   No ☐

Do you have a preferred pseudonym name that will be used for this research?

_____

___

Appendix J: Example of Analysis Process

Extract from 'Natasha's' Analysed Transcript (p. 8-10)
Analysing Code: Green for descriptive comments
Red for linguistic comments
Blue for conceptual comments

Exploratory comments	Original Transcript	Emergent themes
You are only as good as your working relationships	What does what, what does this? What is this parent trying to tell me? Why aren't I getting this information from them? What could I do differently, and you use your peers for that you use colleagues and other services for that. And so having relationships, people, from my point of view, makes me a better worker, having someone to turn to whether that's managerial here, or colleagues and other services, where you can run ideas by gather some information, support your time, understand where a person might be at in terms of their parenting is quite key.	You are only as good as your working relationships
Gain mastery with experience and time. Training helps you know the boundaries of practice? 'Define the box' Brilliant box analogy – move in different ways around this very large flexible box to navigate working within legislation, organizational framework and guidance and managerial decisions as well as outside agencies including the NHS/CAMHs & schools. Emphasising the flexibility.	I've also had trainings, so training also is really helpful. So one of the things that, you know, I always seem to say to newly qualified workers is, you know, experience your experience really does make a difference. So the more you do something, the more you practice at it, the better you get at it, the better you understand what you're doing. training helps with that training helps you understand where the line is so you know, kind of everything *that we do is within a box*. The box has flexibility though so you move in and around the box in different ways. It's a very large box but you're still within the box. You're still having to work within legislation, you're still having to work within the framework of your organization, you're still having to work within the guidance of your manager and kind of, you know, managerial decisions that have been set by them or by you know, your superiors in other ways. You're still having to work within the kind of the framework of, you know, the NHS and how they run, you know, camhs and how they run and schools and how they run. And so you're within a box, and you have flexibility to move within that.

And that's about experience, you stay in one place when you're newly qualified, you don't know what to do, and you move within. And training helps you define the box. And realize I'm use a really weird analogy, and I've never used it before, but it makes sense in my head. | Gain mastery with experience and time |

With lack of experience comes lack of ability and confidence to flexibly move through the parameters of the box.	Yeah. I: No, I love analogies metaphors. Go for it. Yeah, it's your way of making sense. So that's really important. Yeah. Yeah. So so I think that, you know, also,	
	I: yeah, and that I was just gonna ask about the the box, you mentioned that when you're newly qualified, you stay within a particular area in the box?	
Therefore more risk averse when you are newly qualified so you stay with a 'very secure place' not just secure but very secure to emphesis this tendancy and need. Shifts positions and starts reflecting this to the mirroring effect between teams and families shared sense of stuck-ness. Interestingly highlighting the external influences that help to get unstuck.	P: Yeah, I think you have, you have less confidence to move around. When you're newly qualified, you don't know the parameters, you don't know where the box begins and the box ends. So I think that **you take fewer risks in the work that you do**. And you branch out less when you're newly qualified, because you don't have the knowledge to do that. And you don't have the confidence to do that. And you don't understand what the box is yet. And so you tend to kind of stay in a **very secure place**. And I think this is true for a lot of families that we work with.	More risk averse when less experienced.
	And one of the things that we're always reflecting on in my teams, is that how, you know, there's *that saying how art imitates life? Well, our organizations often imitate the families that we work in, sometimes in terms of the chaos, but also in terms of as workers, you know, if I'm looking at myself as a newly qualified worker, and I'm staying in one position, and I don't know how to move out of that, well, actually, we have families that are stuck, and are stuck in place and can't move from that position. Because they don't know what else is available, they don't know how to move from their position, they don't know that it's safe to move from that position, they don't have confidence, because this position is the only position they've ever known. And they need other people, they need external influences, training, peers, other organizations, managers to support them to gain that confidence to start exploring, and take those risks.*	Mirror between families and organisations
To imitate – to follow or copy. Like mirroring.		
Social Services positioned as risk holders by schools especially. Who job is it anyway? A plea to help as you can only do the job with other professionals. How others are	And it's the same, you know, we're imitating the families that we work in work with, I definitely think that, you know, risk taking. So one of the things that's often thought about social workers and other professionals, especially I find schools want from social services is they want us to hold the risk. They want us to manage the risk parenting assessments are often you know, well, this is your job is your job to do parenting assessment.	Pressure to hold risk alone vs balancing risk collectively

risk averse inclined but SW defines risk as a balance between risks and positive/ protective factors to be 'good enough at parenting' rather than removing the risk – which lack of experience positions you to be…	***But actually, I need other professionals to help me do that job.*** But they want us to hold the risk and and there's a risk kind of averse idea there. But actually, Social Work is about balancing risks. Parenting assessments are not about saying this is an excellent parent, it's about saying this is good enough parenting and the risks are balanced with the positives. And actually, there's enough resilience and enough protective factors with the risk to say that this child is receiving good enough parenting. And so that's a really hard concept as well as a newly qualified worker to understand because all you want to do is remove the risk. And actually, that's not the reality of life more, in fact, the system and the organization that will work with in. I: I want to pick up on something you've mentioned a few times is this idea of good enough parenting. And, and I guess I want to really can you describe to me What does that mean to you?	
Suppose – indicating hesitation in response. Different in every family, very interesting that she starts by saying its about managing your expectation of what parenting looks like – Who? The SW/ parent?? This resonates with me & my shift in expectations. Removing the personal from the professional with regards of not imposing what one wants for the child in terms of 'GEP'. Seems to come back to the bottom denominator of child safety balanced with protective factors to reach milestones and draws the line with safeguarding concerns. Ends with an interesting emphasis on needing parents to meet **us**/SW a realistic good enough standard of parenting	P: I suppose good enough parenting is is it looks different in every family. And good enough parenting is about ***managing your expectations of what parenting*** looks like, it's very hard when you come in as a professional in your personal experience, you know, and you compare to your own parenting, you don't have any anything else to compare to, you know, unless you've worked with masses of families around parenting, you look at your own parenting, and **good enough parenting is not necessarily about what I want for the child**. It's about *what is good enough for the child in terms of kind of safety and balancing the risks with the protective factors for them to be able to grow and develop and kind of achieve the milestones and you know, do okay, and if that parent is doing okay, and it's not obviously a safeguarding concern, you know, safeguarding concerns are different, but there's enough resilience built into the system. That actually, you know, we're not looking for perfection. We're not expecting every child to have the same parenting experience. That's unrealistic. We are looking to see that the parent can, you know, meet it* **meet us a realistic standard of parenting**. *That is good enough.* I: I guess. It makes me also want to understand a little more about our own personal knowledge. And I think you've mentioned this in terms of our own experiences of our own life of either being parents Or being a parent and how that might shape the frames of reference we draw on in terms of our parenting. And yeah, so I guess, how do you think if at all, your own kind of personal knowledge, or maybe your experience of being parented, or being a parent has kind of impacted how you approach parenting assessments?	Good enough parenting for the child's safety and balancing risk with protective factors within child timeframes to reach milestones.
Emphasising the personal cannot be separated from the professional	P: It absolutely does. It absolutely does. You cannot separate yourself from the	The inseparable personal from

– goes on to reflect her naivety of thinking it can be early in her career. Reflects on how professionals variations in experiences brings up bias in practices and how very difficult it is for families to work with different SW . Gives examples of her personal experiences that shapes her views maybe values too?	professional. I remember when I was at university, I used to, I had an argument with one of the lecturers, about a certain situation, I was like, No, you can separate your profession from your, from your personal self, actually, they're there. They're different decisions that different decisions that you make different, you know, requirements. And I kind of look back on that. And I think, oh, that was quite naive. Because you can't, you can't influence *that becoming the parent has perhaps changed the way I see things as well. So I definitely think that each of us as workers have a bias. And actually, it makes it very difficult for families, because each worker works in a different way, from their own experiences, whether that's with their own personal experiences, or parenting, their personal experiences, or parenting their own children, or the different families they've happened to work with*. Now, I may have worked with loads of different families, my experience as a parenting, the amount of siblings I have, the environment that I grew up in, is absolutely going to shape my views.	professional.

2. List of emergent themes for 'Natasha'

1. Balancing good enough parenting with risk x2
2. Working with other professionals
3. Giving parents a chance x3
4. Balancing assessing parenting capacity to change within child timeframes.
5. Predicating the negative outcome of the case.
6. Increasing awareness of generational patterns of parenting.
7. PA as an intervention to make change
8. PA as evidence for court that change isn't possible.
9. Parent's engagement and wiliness to change.
10. Variations of families.
11. Different processes for PA but similar Outcomes.
12. Increased confidence over time.
13. Emotionally investing and engaging with families – *a two way process to aid the therapeutic relationship*
14. The emotional costs of the work
15. Frustration x5
16. Use of morbid humour to cope with frustrations and difficult emotions.
17. Emotional toll of waiting for change
18. Using reflection and self awareness.
19. Using reflective supervision and case management
20. Using peer support
21. Valuing personal therapy
22. Enjoying the problem solving aspect of the work. X2
23. Enjoying the fast pace high intensity work.
24. Understandably a thankless profession yet the occasional thanks are sustaining.
25. Emotional toll without good strategies causing burnout.
26. Own experience of mental distress and transition increasing vulnerability and need for organisational support
27. Good sustained management
28. Struggle between identifying needs matching it to resources.
29. Joint or collaborative decision making with teams and management.
30. You are only as good as your working relationships
31. Gain mastery with experience and time
32. More risk averse when less experienced.
33. Mirror between families and organisations.
34. Pressure to hold risk alone vs. balancing risk collectively
35. Good enough parenting for the child's safety and balancing risk with protective factors within child timeframes to reach milestones.
36. The inseparable personal from professional.
37. Using self-reflection to counteract the impact of personal biases on the work.
38. Time: Reflection Time
39. Valuing collaborative decision making
40. Risk averse instinct – strongest with lack of experience
41. Training and desensitising of the risk averse instinct
42. Self-reflection and triggering of risk response awareness
43. Importance of professional relationships to self-reflect.
44. Worth of interpersonal skills over other skills.
45. A shared sense of parental struggle with parents.
46. Experience of parenting has shaped understanding of good enough parenting.

47. Unsure of using self-disclosure of being a parent as an engagement tool.
48. Valuing emotional warmth as a protective factor
49. Challenge of evidencing emotional abuse with its interconnectedness with other forms of abuse – physical, sexual and neglect.
50. Developing self-awareness and reflection
51. Reflecting on earlier experiences of social work practice
52. The journey of personal recovery from trauma
53. Valuing long term personal therapy
54. Enjoying the challenge of engagement and trust building.
55. Variations in social work practice due to training and personal differences
56. Honesty and transparency as a means of trust building.
57. Initial investment in building a relationship.
58. Being viewed as an interferer and harassment.
59. A helper
60. Creating a dependency
61. Power & Powerless
62. Balancing power with honesty and transparency
63. Actively distributing power and empowering parents
64. Being viewed as a helper for the child
65. Being viewed as a stressor for the child
66. Valuing being needed and feeling powerful. (rescuer)
67. Distribution of power over time to others
68. Her children serve the need to be needed
69. Her experience socialised her into the transient nature of relationships
70. Feelings of loss and sadness when good therapeutic relationships end.
71. Remembering those families on the extreme ends of both the positive outcomes and negative outcome of work.
72. Using the legislation and looking at children's timeframes.
73. Working collaboratively with adult workers to meet parents needs
74. Legal requirement for fairness/giving parents a chance
75. Cognitive and emotional effort involved in assessing and supporting large families with multiple vulnerabilities.
76. Feeling overwhelmed.
77. Inner ethical struggle of balancing child and adults needs.
78. Engagement of families through allowing time and freedom of expression.
79. Being tearful and sad.
80. Lack of control at work and need to compensate by controlling other aspects of life.
81. Venting to partner
82. Compartmentalising with children

3. Natasha's clustered theme list:

> Key:
> **Temporary superordinate themes**
> **Superordinate theme**
> Subordinate theme (for the clustered emergent themes)

The ethical balancing act

1. Balancing child risk with supporting parents with 'good enough parenting'.
2. Balancing parenting capacity to change within the child milestones and timeframes.
3. Balancing vulnerable parents and their rights with children vulnerabilities and their rights.
4. Balancing identified families needs with the resources available
   (- 'needing a manager who's got your back when you identify needs and can help with getting the resources')
5. You are only as good as your working relationships - Collaborative decision making and risk sharing
6. Navigating the power dynamics with parents and colleagues.

The emotional costs

1. The immense frustration at pace/lack of parental change while the clock is ticking for the child milestones
2. Endings and the need to disconnect from parents and emotions
3. Feeling overwhelmed
4. Sense of loss and sadness
5. Over controlling outside of work to compensate for lack of control at work

The interpersonal gains

1. Valuing self awareness and reflection
2. Gaining confidence with time and experience
3. Recognising personal strengths and resilience
4. Use of morbid sense of humour to cope
5. Connection with others (families, supervisors and peers) *(shared sense of parental struggle)*
6. Sustainability
7. Honesty and transparency ("say it to your face not behind your back")
8. Valuing emotional warmth as a protective factor
9. Use of selective self-disclosure
10. Valuing personal therapy

SOCIAL WORKERS' EXPERIENCES OF ASSESSING PARENTING

Appendix K: Table of Reoccurrence of Themes Across Participants

Super-ordinate Themes	Subordinate Themes	Courtney	Marie	Natasha	Joanna	Maggie
1. Bringing the past into the present and future identity	Tied into family origins and social context	√	√	√	√	√
	Evolving professional identity	√	√	**X**	√	√
	Being driven my personal values	√	√	√	√	√
2. Delicate balancing act	Being pushed and pulled in different positions	√	√	√	√	√
	Navigating personal and professional identity	√	√	√	√	√
	Enduring ethical pain and its emotional toll	√	√	√	√	**X**
3. Sustaining oneself in a maligned profession	Learning to disconnect	√	√	√	√	√
	Developing self-awareness	√	√	√	√	**X**
	"Being seen"– through different relationships	√	√	√	√	√