

**California dreaming: the West Coast way to
creative child protection work
Commentary on Weakland and Jordan**

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In a typically inspired moment, Paul Watzlawick (1983) agreed with his client that the situation was hopeless, but added that it wasn't serious. In keeping with this tradition of pragmatism, Weakland and Jordan are saying that in child protection work the situation is serious, but not hopeless. As a message of hope, and a guide to intervention in this difficult context, this paper is greatly to be welcomed: all the more so in the wake of the Children Act (1989) in England and Wales and the current concern about child abuse in institutional settings.

My initial response to the paper was to make a list of all the things that it does not do, or misses out. My reaction reminded me of the intensely critical and fearful atmosphere which pervades child protection work in the UK. Such a response gives crucial information about one's own cultural context. Are we so fearful that it is difficult to consider innovative approaches to our own professional settings? If so, why? Weakland and Jordan's paper raises important questions about the balance between professional autonomy and accountability and what we mean by 'professional practice' in this context. Unless we are able to address these issues, I fear their ideas may be an unrealizable dream.

The structure of the 'brief therapy' approach outlined in this paper is in line with the principles of good child protection practice (Department of Health, 1988) and the Children Act (1989), in that it aims to build a safety net for the child while encouraging co-operation and 'partnership' with parents. The six steps outlined in the paper are worth restating:

1. build on co-operation
2. agree on the problem
3. examine solutions already attempted

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4. take a small but significant step towards change
5. solidify gains
6. build a safety net and network of support.

My experience of the British approach is that it pays a great deal of attention to the safety net and network of support, but much less attention to the rest. If we are to respond to the challenge of the Children Act to work co-operatively with parents even in circumstances of potential conflict between family members and professionals, then this list is a simple but helpful guide to the process. Too much emphasis on the safety net, which includes surveillance and monitoring, may mean that the potential for change and growth will be missed. In this matter alone, this paper is a welcome reminder of the need for a framework of identifiable skills of intervention to go alongside the volumes on procedure and assessment, and as such is a dream worth chasing.

The following is a summary of the characteristics of Weakland and Jordan's brief therapy approach to child abuse:

1. It aims for small significant changes which improve immediate family functioning, offering the prospect of continued improvement and making recidivism less likely.
2. It aspires to bring about change quickly, even with difficult clients, by linking assessment and intervention, ending isolation and creating motivation for change.
3. It aims for a co-operative relationship with parents, not an adversarial one.
4. It plays down 'legal authority' and emphasizes authority based on mutual respect and adult-to-adult communication with parents.
5. It avoids situations which require a 'loss of face', accentuates the positive and is 'generous' about human nature and the potential for change.
6. It aims to fit the intervention with the client's own views and language.
7. It requires a degree of professional autonomy to enable workers to be experimental and innovative with clients.

This approach to child protection is not easy to place within the usual child protection debates in Britain. The work of Parton (1985) on the political context of child protection puts emphasis on the structural factors of poverty, class and race; feminist writers such as Gordon (1986) and Ong (1986) would add gender as a dominant feature of the debate. The mainstream British approach focuses on

legal and procedural issues, and has attempted to clarify roles and responsibilities within the Children Act. The roles, responsibilities and power of social workers and the local authorities which employ them have been reduced to a certain extent, but they are nevertheless central to the legal, procedural and therapeutic services for abused children and their carers. The Act encapsulates the current balance of power between the competing interests of adults, children, the state and institutions and professions. Lorraine Fox Harding (1991) has summarized these competing interests as follows:

1. *laissez-faire* and patriarchy
2. state paternalism and child protection
3. defence of the birth family and parents' rights
4. children's rights.

Weakland and Jordan's approach seems most firmly rooted in point 3, and little or no distinction is made in the paper between the interests of parents and children, or between parent and parent. In the opening passage, the word 'client' is put in inverted commas because of the difficulty associated with clarifying who the client is in child protection work, and because 'client' usually implies a relationship based on someone seeking the advice of a professional, rather than having it forced upon them. The Collins Concise Dictionary definition of 'client' now includes 'a person for whom a social worker is responsible'. Louis Blom-Cooper, the QC who chaired the panel of inquiry into the death of Jasmine Beckford,* has argued strongly that this use of the word 'client' is inappropriate in child protection work, and that it has contributed to a focus on the needs of the adults at the expense of concern about the child(ren) (Beckford Report Panel of Inquiry: London Borough of Brent, 1985). This is more than a semantic argument and goes to the heart of the matter of whether British practitioners, particularly social workers, have sufficient autonomy to practise in the ways advocated by Weakland and Jordan. Donald Schon (1983), an American sociologist who has studied how professionals of many different kinds view their roles and responsibilities, argues as follows:

In cases where the professional's role has more to do with social control than with help, or when the relationship between help and control is a matter of

* In the Beckford case, where a child died, Social Services were castigated for under-involvement, over-optimism about parental abilities, and being too much on the parents' side [Ed.].

ambiguity and debate, then it seems paradoxical to call the objects of professional attention 'clients'. This is true of policemen, and may also be true of teachers, managers, or social workers. The absence of a clearly identifiable professional client relation has the effect of undermining the service provider's view of himself as professional.

He goes on to argue that the weak position of such 'professionals' makes it unlikely that they will have the necessary autonomy to make meaningful 'contracts' with their clients:

It is not unusual in such cases to find that individuals aspire to a professional status that they are only tenuously . . . given. Their difficulty in establishing a reflective contract with their clients is to acquire enough voice in the situation to be able to do so.

This would imply that within Fox Harding's categories, British practitioners focus more on the paternal role of the state to protect children, than on defence of the birth family and parent's rights as Weakland and Jordan do, although it may be that the Children Act will redress this balance to some extent. Schon's pessimism about the manoeuvrability of social workers and other, similar professionals is often justified, and to this extent, 'California dreaming' is a chimera. As an antidote to enthusiasm (this is Britain and not California after all) I kept trying to imagine how the average case conference might respond to a plan which reframed the 'sexual abuse' of a nine-year-old by a thirteen-year-old as 'sexual experimentation' (p. 246). In this instance it was by a girl on a boy – but what if the genders had been reversed, and the incident had taken place in a children's home? In our highly charged environment, the politics of the situation may make the need to be seen to be taking protective action more pressing than the requirement for 'a small but significant step toward change'.

Social workers in local authority social services departments may well recognize themselves from Schon's description, but remarkably, many do manage to work creatively. This may be by gaining experience in other settings, for example, multidisciplinary teams or in the non-statutory child care agencies. Such experiences enable the less powerful professions to develop their confidence as well as their skills and knowledge. Without such confidence social workers may resort to covert sabotage of procedure and become 'dangerous professionals' (Dale *et al.*, 1986). Nevertheless, even within the confines of procedure, social workers are listened to if they are able to demonstrate that they know what they are talking about, but gaining such influence is difficult because power is not evenly distributed within the child protection system.

We must remember that child protection work is an arena in which the professional paradigms of medicine, law, management and social work are competing for dominance. This was most clearly illustrated during the Cleveland affair* and the subsequent Report (Secretary of State for Social Services, 1988) and public debate. What is unclear from the paper by Weakland and Jordan is any sense of this wider field; it is as if their practice is taking place in a paradigm of their own making (or even a paradise). This is a vital issue, because if we are to bring the values of therapy to bear on this process, to treat all concerned with due human respect, we cannot be overburdened by constraints. However, the political context requires giving the appearance that the 'system' and its 'professionals' are in 'control'. This may be achieved by going through the motions of treating adults and children with respect and humanity, while actually becoming functionaries of an increasingly complex and politicized bureaucracy. Schon puts this dilemma precisely when he writes: ' . . . to admit uncertainty, to make it apparent that one needs to conduct experiments, may look and feel like a loss of control when the basic theme of professional-client interactions is a game of control and evasion.' I would add to this that the theme of professional – professional interaction can also be one of control and evasion.

The charge that Weakland and Jordan are somewhat naïve about issues of power in relationships can be made in the sphere of the personal as well as the political. In contrast to much of the contemporary British debate on the sociology of child abuse, very little reference is made in their paper to circumstances in which the coercive power of men is a factor (though there are two examples of the physically coercive power of females: pp. 240 and 246). Where the authors express concern about power, as on p. 236, it concerns the danger that professionals may become the 'one-sided advocate of a child against a parent', which contrasts with the view put forward by Louis Blom-Cooper above. This lack of attention to the potential differences between the interests of family members is most clearly seen in the use of language in the paper. For example, on pp. 239–40 we see expressions such as 'the family's outlook and values' and 'the family's idiom/situation/view', I would not suggest that the authors are unaware of the dangers that 'the family's view' may be that presented

* In this case, involving several instances of alleged child sexual abuse, professionals were criticized for being over-cautious and taking children into care unnecessarily [Ed.].

by the husband/father rather than the wife/mother, or the adult view rather than that of the child. Rather, the choice of words is indicative of a desire to empower adults to become more effective, competent and safe within the 'family' structure, and to avoid unnecessary conflict which will become a barrier to change.

Again, this is quite consistent with the Children Act with its emphasis on parental responsibilities and duties, and presents a model of parental empowerment which is worthy of serious consideration. However, it does mean that this model is open to the criticism that strategic therapy tends to avoid issues of power, or, at the very least, does not make them explicit or directly challenge them. This lack of directness may give the impression that the authors are avoiding these difficult issues by ignoring them. It may also indicate that the examples used by Weakland and Jordan do not present the most acute dilemmas faced by child protection workers, and that they are 'staying out of the hottest part of the fire'. Cases involving continuous sexual abuse, or where a baby has been seriously injured and there is a coalition of silence between the parents and other family members, spring to mind. In such circumstances, the need to challenge this coalition may require work to empower the mother, rather than the parents together.

The reactions to the many child abuse tragedies in Britain, and, in particular, to the Cleveland affair has reduced the autonomy of child protection workers and made them more accountable to the courts (Parton, 1991). This change, coupled with the principle of minimal intervention in family life embodied in the Children Act, will put a greater onus on the skills of negotiation and the need for a style of work tailored to the unique case. In this respect, the brief therapy model has a great deal to offer if it can be adapted to the political and professional context of British child protection workers. However, alongside these changes has been the continuous process of responding to each child abuse scandal with additional procedure and guidance, apparently implying that the solution lies in 'mechanizing' rather than 'humanizing' the process.

As someone whose job it is to teach child protection work to social workers I am acutely aware of the increasing apprehension they show at being 'sent to the frontline'. The official view put forward by the Department of Health in Britain is that newly qualified social workers should be able to take on child protection cases immediately after qualifying, a view which is hotly contested by the Social Services Inspectorate. While the 'grown ups' quarrel, the 'kids' get on with life

as best they can. There is an enduring commitment and enthusiasm among students to 'help people', and apprehension that this basic motivation will be swamped by the need to carry out agency policy, and to act as the 'soft police'. We need more examples of practice, like the model presented by Weakland and Jordan, which are able to demonstrate the difference between authority and authoritarianism. We need to be able to utilize the skills of 'therapists' and combine them with society's requirement to protect the vulnerable and prevent abuse. We must learn from the intense debate about the phenomenon of child abuse, but not be overwhelmed by it.

Although the lack of detail in Weakland and Jordan's paper about the wider context in which practice takes place in San Mateo County is unfortunate, they have nevertheless offered us a model of highly skilled and sophisticated interventions at the point of investigation. Underlying that model is the essence of the 'therapeutic mission', which is to help rather than to judge. It is generous in its assumptions about human potential, it is pragmatic, it attempts to be respectful and validating and it gives us a model of intervention which is of potential use in day-to-day child protection work of the less extreme type.

The challenge to those of us working in the field of therapy and child protection is not just an intellectual one, but is about an attitude of mind and the need to have the courage of our convictions in circumstances in which fear and self-protection could easily dominate. To borrow another of the maxims of the brief therapy school of thinking, we face the danger that our solutions to the 'problem' of child abuse can so easily become the problem itself (Watzlawick *et al.*, 1974). Consumer research among parents who are the subject of child protection investigations (Brown, 1985) suggest that they value both honesty and straight dealing combined with humanity and compassion in the professionals they encounter. This paper goes some way to showing the potential of the brief therapy model in child protection work, but if it is to be more than a 'pipe-dream' the distance between California and Cleveland must be taken into account.

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