University of East London – Tavistock Centre

Creating a space to think in a structured world

An exploration of the structures, relationships and emotions emerging in Network Meetings in the wider context of child care proceedings

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Abstract

This research stems from a long term interest in the challenges of engaging with families often described as “multi-problem families”, who appear reluctant to engage with or are unable to access the complex professional systems that are put in place to protect and support children. Breakdown between parents and professionals is said to feature in 70% of cases brought before family courts in care proceedings (Brophy 2006). The literature review will consider the characteristics of the UK child care and family justice systems that may contribute to this state of affairs and explore a number of projects and analyses that have attempted to address it.

The study investigates the complex dynamics between parents and professionals involved in care proceedings, through detailed observations of Network Meetings - a practice that has developed in a Child and Adolescent Mental Health Service (CAMHS) and which takes place at the start of court mandated multi-disciplinary parenting assessments. The project has three intersecting dimensions: a detailed description of what happens in these meetings, a contextual description of what this tells us about the care system and an ethically grounded analysis of a developing clinical practice aimed at mediating the transition between court and clinic.

The study evolves into an ethnography-inspired exploration of the structures, relationships and emotions emerging in Network Meetings and in the wider context of care proceedings. The methodology draws on a number of epistemological traditions in an attempt to capture the complexity and multi-layered nature of knowledge and experience. An “experience-near” approach is proposed from a “critical realist” perspective that encourages self-reflexivity.

A thematic analysis of the meetings highlights some of the characteristics of care proceedings:

- the court’s emphasis on structure
- the tendencies of “adversarial systems” towards polarisation, binary thinking and closure.
- complex relationships between the court and the clinic

In this context the request for a parenting assessment emerges as a search for a liminal space (Turner 1969) or thinking space to unravel complex and often contradictory stories, perspectives and experiences that are contested in the adversarial domain of the court and contribute to impasses and delay. The Network Meeting is analysed as a developing professional practice comparable to a kind of ritual that evolved over time in a particular agency and context in an attempt to create a boundaried space for a therapeutic assessment to be planned within the court timetable.

Findings illustrate the attempts of professionals to move the system from the structure-dominated domain of the court to a space where less tangible aspects of human systems can be brought into light and opened to scrutiny. The concept of “communitas” and its relationship to “structure” as defined by Turner is used loosely to identify aspects of this transition during Network Meetings. The challenges of defining and researching “communitas” are explored through a critical reflective review of the methodological journey in this project.

Conclusions highlight the challenges and value of bringing stakeholders together to experience the emotional and relational qualities of the system, to face the nature of impasses and engage with the complex dynamics, polarised positions and multiple perspectives involved in order to create a more authentic and fruitful thinking space. The characteristics of this space are considered together with the techniques used by practitioners (particularly chairs of meetings) in their attempts to move towards it.

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Chapter 1 Introduction

1. Setting the scene: six vignettes.

a. Jihad was subject to a child protection plan before he was born. Both his parents have mental health diagnoses and professionals expressed concerns about their capacity to protect him. Mrs Begum has recently moved from South Asia to marry her husband. She speaks little English. Both have very limited understanding of the welfare system. Jihad's placement with his mother in a mother and baby unit did not work out as professionals remained concerned about the mother's care and about the father's non engagement and suspected drug use. Following the local authority's application to court, the family appear to rally in opposition to the order and engage with treatment. Professionals remain unsure and suspicious about their capacity to change and to sustain their engagement. Jihad is placed with a foster family while an "expert" assessment is jointly commissioned.

b. A young woman of black African-Caribbean descent who is looked after by the local authority gives birth to Alicia. They are placed together in a foster placement while an assessment is commissioned of her "parenting capacity now and in the future", her capacity to work with professionals and to "comply with directions and guidance". Alicia's father is currently serving a prison sentence for assault and possession of drugs. Little is known about him from the letter of instruction and it is not clear whether he wishes to exercise parental responsibility.

c. Ali is 10 months old. He seems to have a good attachment with his mother but professionals have serious concerns about her capacity to protect him from his father who has admitted and been found guilty of killing his first wife. He was diagnosed by several psychiatrists and is receiving treatment for schizophrenia. He has older children in the care of their mother's extended family. The parents are Muslim of South-Asian origin. A number of "expert" assessments have highlighted the risk posed by the father but after one year in proceedings no decision has been made about the future of Ali. A meeting between experts recommended further assessment of the mother's understanding of the risk posed by her husband, her capacity to recognise symptoms and warning signs and the father's capacity to engage with professionals.

d. Sarah was placed in foster care aged 4 when bruises found on her thighs were assessed by a forensic paediatrician to be bite marks. This is disputed by her mother who admits to having hit Sarah with a spoon when she was not

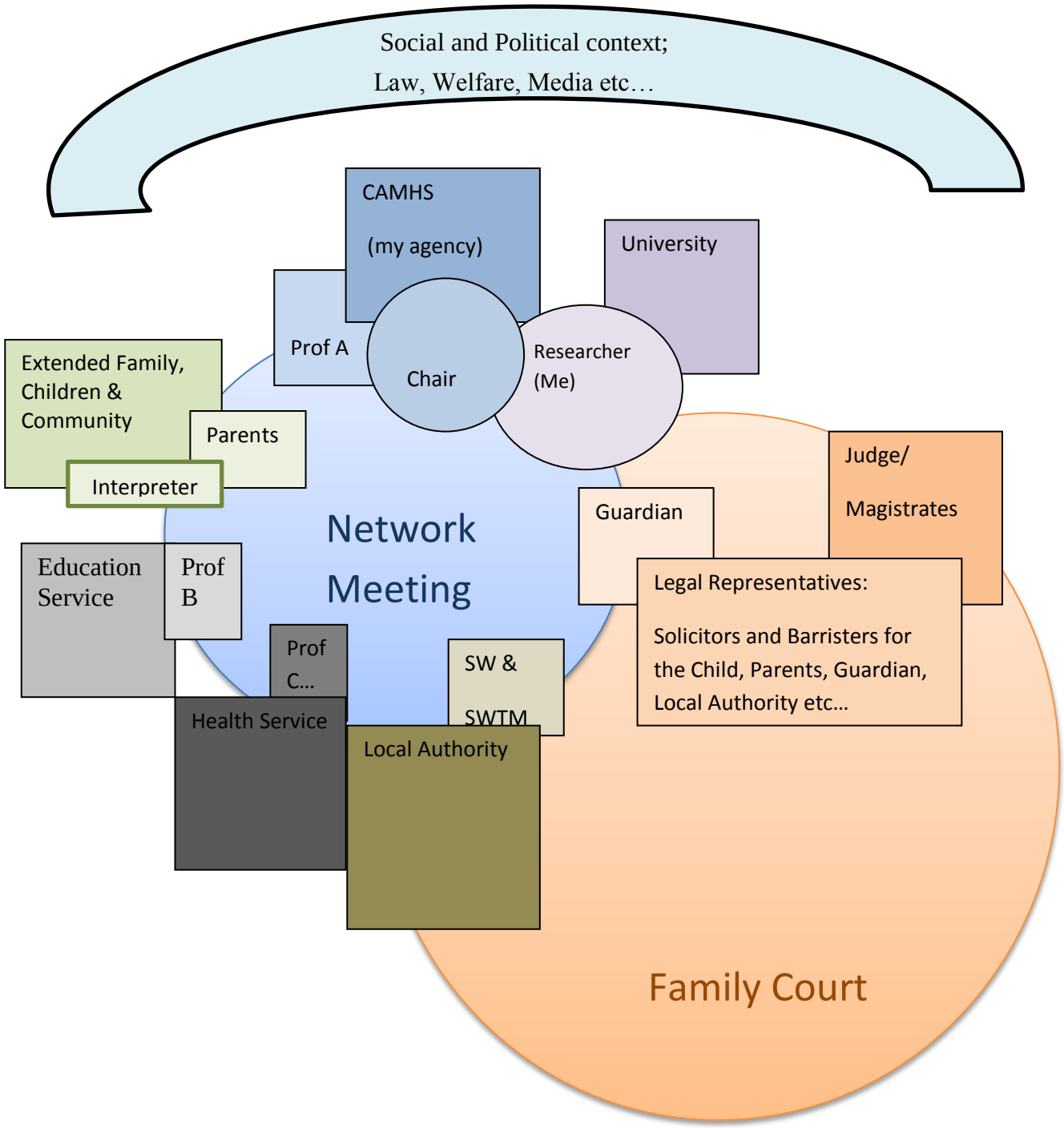
eating, but not to biting. She has been interviewed by the police and bailed facing charges of child cruelty. A fact finding hearing found that "the three marks noted on Sarah were caused by the mother biting her and the mother had physically abused Sarah in the past". An "expert" is commissioned to assess the parents' response and to consider what alternative placements might be recommended for Sarah (including within the extended family) if they do not accept the findings of the court.

e. Michael was placed with foster carers from birth as his parents continued to misuse drugs throughout the pregnancy and did not co-operate with safeguarding plans. They are white British. Michael is forming an attachment with his foster carer who would be keen to adopt him. His parents are opposing this plan and agree to take part in a pilot project involving a specialist Family Drug and Alcohol Court. The father engages in a treatment programme which the mother intends to join. Adult centred professionals support the parents' request for more time to demonstrate their parenting capacity while children's services express concerns about the child's need for permanency. An expert agency is commissioned to assess the child's attachment needs and the parents' "parenting capacity both now and in the future".

f. Amina and Ahmed aged 11 and 8 lived with their grandparents for most of their life under a care order after their mother was imprisoned for substance misuse related offences. The relationship between social services and Mrs Chaudhry and Mr Khan has broken down. Social services are now opposing the grandparents' application for residence orders on the ground that they are not meeting the "children's emotional needs" and the grandfather refused to give consent for social workers to contact suitable referees. Amina and Ahmed have been moved into a long term foster placement which Ahmed says he likes but Amina doesn't and says she wants to return to the care of their grandparents. An "expert" agency is commissioned to assess the children's needs and wishes and the grandparents' capacity to care for them and work in partnership with professionals.

*All names and key biographical details have been changed to preserve anonymity. Confidentiality was discussed with participants and clarified in the information sheet (Appendix B)

Figure 1: The research Subject



2. Aim of the research

The aim of this research is to gain an understanding of some of the dynamics at play between stakeholders involved in court mandated parenting assessments such as the ones described in the six vignettes above and to consider how the practice of Network Meetings, developed in a London based Child Adolescent Mental Health Service (CAMHS) over the last twenty years may contribute to decision making processes in public law child care proceedings.

By bringing families and professionals together in a therapeutic setting within the context of the law, the Network Meeting provides an opportunity for research into the family justice system and the particular characteristics of contested child care proceedings. It offers a window through which to glimpse the experience of participants and the relationships between stakeholders in highly polarised situations where complex decisions have to be reached about children's futures.

The involvement of welfare and mental health professionals in the family justice system, in the form of requests for "expert" assessments, has increased in the last 20 years but not without controversy and criticism. A number of commentators have argued that "welfare" and the "law" are incompatible systems of thought (King et al 1992, 1999, 2005). This is illustrated by the reluctance of many clinicians to get involved in socio-legal work and by the level of drama often involved in court proceedings where different parties, each represented by their own solicitors, stand in different parts of a building, positioning themselves for the final hearing. Although the emphasis on legal procedure and outcome can be understood as an attempt to preserve a space for rationality based on principles of justice, away from the influence of emotions, it can also deprive participants of one of the main tools for developing trust and understanding (Winick 2006, King 2009). Concerns have also been expressed about the brutality of the process and the over-representation of Black and Minority Ethnic (BME) families within the court system (Brophy 2005, Chand 2000, 2004, Maitra 1996).

The six vignettes illustrate the complexity of decision making processes in child protection work and the necessary but uneasy alliance between court, social care, and mental health services. The literature review will explore theoretical and clinical attempts to reform the system, either through drastic changes to the legal framework towards a more inquisitional model (King & Piper 1995), Cooper 2000) or through whole system reforms (Norgrove 2011). I will consider a number of alternative projects aimed at reducing the need for legal interventions (Hetherington 1999, Cooper 1999) and therapeutically led interventions to improve the quality of assessments and decision-making processes (Essex 1999, Seikkula 2006, Asen 2007).

This research took place in the shadow of two major reviews of children's services in England and Wales. The Norgrove Report into Family Justice (2011) and the Munro

review into Child Protection Services (2011) identified a number of criticisms in the current family justice system. Norgrove found

> "a system that is not a system, characterised by mutual distrust and a lack of leadership, by incoherence and without solid evidence- based knowledge about how it really works" (2011 p.2-3)

The reviews acknowledge that "this is a highly complex and under-researched area" so that "in effect, each study has to 're-invent the wheel' (Brophy 2006 pi). It is also a highly emotional area as professionals have to make decisions about contested issues which have a far-reaching significance for the welfare of children and families. Evidence from literature and personal experience suggest that the relationship between different agencies involved in this work is at best uneasy. For example, while reinforcing the need for close interdisciplinary collaboration, Lord Justice Thorpe commented in 2007 that "lawyers are generally cautious of dialogues with other learnings" but that "the bond between the judge and any expert concerned with child health and development is particularly close since in some degree they share the daunting task of deciding the future of the child" (Lord Justice Thorpe 2001 p xi).

The focus of this research has been influenced by the setting in which it takes place, in an inner London CAMHS that has developed a multi-disciplinary model for working with "multi-problem" families (Asen 2007). Most requests for parenting assessments arise in the context of care proceedings after social services have applied to the court for orders under Section 31 of the Children Act 1989, often concerning allegations of ill-treatment of children by parents or carers. In most cases the relationship between professionals and families has broken down and decision-making processes in court have reached "impasse" (Brophy 2006, Flaskas 2005, Cooper 1999). Network Meetings bring the family and professionals together at the start of the assessment process and therefore provide a unique research opportunity to observe the interactions between the different participants and to study some of the dynamics at play in care proceedings

3. The research question

Although there is a growing number of studies into decision-making processes in child protection, such as family group conferences (Connolly 2006, Crampton 2006) and cases conferences (Campbell 1997, Corby 1996) "only a small body of observational research exists about these processes" (Healy et al 2012 p.1). This project aims to add to the small body of research in this field by directly observing meetings that take place between families and professionals at the start of court mandated parenting assessments.

The original research proposal posed two questions:

a. What processes can be identified in the relationship between stakeholders involved in Network Meetings and more generally in court mandated parenting assessments?
b. What recommendations can be drawn from this close study to inform practitioners in the task of creating greater openness and to maximise the potential for service user involvement, provide opportunities to assess change and improve decision-making in child care proceedings?

This meant capturing a synchronic picture of the state of a particular system (a Network Meeting) using different levels of observation and understanding (language, relationships, dialogical positions and emotions) which could inform a diachronic understanding of a wider system (child care proceedings) in order to then inform and improve practice. This posed a number of theoretical and methodological challenges implicated in studying relationships between individuals, institutions and social systems which mirror social scientists' longstanding "attempt(s) to formulate a coherent account of human agency and of structure" (Giddens 1984 pxxi). Figure 1 provides an overview of the systems under observation.

The project now has three intersecting dimensions to analyse findings at the levels of content, context and process.

- A detailed description of what happens in these meetings;
- A contextual description of what this tells us about the care system;
- An ethically grounded analysis of a developing clinical practice aimed at mediating the transition between court and clinic in order to maximise the potential for meaningful engagement by service users in court mandated parenting assessments and to create a space to understand and explore family systems' capacity to change.

4. The Network Meeting

The practice of the Network Meeting described in this research emerged over a number of years in a multi-disciplinary Child and Adolescent Mental health Service (CAMHS) with an interest in systemic approaches to psychotherapy. The team has developed a multi-disciplinary model for working with "multi-problem families" and for undertaking independent parenting assessments as part of court proceedings in private and public law cases involving children (Asen 2001, 2007). Network Meetings evolved over the last twenty years as a pragmatic attempt to make sense of what might be going in complex systems where the relationship between families and their professional network has often broken down and decision making processes have reached impasse (Summer 2014).

The agency has not yet drawn up guidelines for chairing Network Meetings but chairs tend to follow a similar format informed by the theoretical orientation of the team under the leadership and writings of Dr Asen. In the early stages, the main

theoretical influences in the agency were from structural (Minuchin 1974), post-Milan (Cecchin 1987) and narrative (White 1995) models of family therapy. In the 1990s family therapy was influenced by social constructionist and feminist theories which emphasise the centrality of language and power. The team employed an anthropologist who helped set up a Cultural Therapy Centre with bilingual therapists who worked with the aim of developing and delivering culturally appropriate therapeutic services. More recently, through the increasing contribution of child psychotherapists in parenting assessments, the team is evolving its practice to incorporate psychoanalytic concepts to make sense of the inner world of children. This provides a language to consider the place of emotions (Tydeman 2007) and contributes to an understanding of group processes (Bion 1961) and organisational issues (Hinshelwood 2000).

Most requests for parenting assessments arise in the context of care proceedings after social services have applied to the court for orders under Section 31 of the Children Act 1989, often concerning allegations of ill-treatment of children by parents or carers. Referrals are received in the form of a letter of instruction which provides a brief summary of the local authority's concerns and a list of questions which the parties have agreed need to be assessed. Most letters follow the guidelines of the Department of Constitutional Affairs' Protocol (2003). A senior clinician from the out-patient team is allocated the role of "case manager" whose role is to plan and co-ordinate the whole assessment, recruit relevant clinicians from different disciplines in the service to address specific questions and collate findings for the final report to court.

The first task of the case manager is to call a Network Meeting attended by the professionals involved, the children's Guardian and the parents/carers. Its aim is to engage with the family and its network, to understand the family situation and to plan the assessment. The Network Meeting provides an early opportunity to observe relationships at first hand. Although the assessment team is sent a bundle of documents by the courts, including a chronology, statements from parents and social workers and details of previous assessments, the case manager does not usually read it before the Network Meeting in order to reduce the risk of bias (Asen 2007). The stated aims of Network Meeting include:

- drawing a map of all professionals involved in the life of the family, including their specific concerns, tasks and positions;
- understanding the relationships between the professionals and with the family
- sharing openly the concerns the different professionals have
- ensuring that the parents can respond and define what their own concerns and needs are
- jointly agreeing on the areas of work, timescale and consequences of change – and what is to happen if there is no change (Asen 2007 p.39, 40)

The Network Meeting is therefore the first time that the case manager meets the professionals and the family. It may also be the first time that some of the professionals and family meet together.

5. Reflexivity: my interest in the topic:

Practice-led

My initial interest in this research project was in understanding and improving practice in this complex area of work. Taking on a new referral in care proceedings, when children have or may be moved away from their family is often a daunting experience. Letters of instructions arrive with a long list of questions to be addressed within a short time frame and a bundle of documents, often weighing several kilos, describing, from different points of views, a family's life and its interactions with professional networks. The task of expert witness has traditionally been carried out by individual clinicians (often psychiatrists) working independently with individual members of the family, often in isolation and reporting directly to the court. The practice of the Network Meeting, developed in the agency I joined in 1996, came across as an innovative attempt to engage with the family and its network in this complex work. I became curious about the sense of drama, fear and excitement surrounding this way of working that seemed worthy of further examination.

Dual Qualification

As a qualified social worker and a systemic psychotherapist I have attended court in child care proceedings both as a local Authority social worker and as an "expert witness" working in CAMHS. As a social worker, I experienced the "drama" and anxieties associated with this role, feeling sometimes impressed by the process, sometimes undermined by the confidence of expert witnesses (Kennedy 2005). Yet I also find the role of "expert" difficult and the experience of giving evidence in court intimidating, lonely, and over-formalised. Conversations take place via legal third parties, who tend to privilege rational arguments with an increasing use of medical diagnoses that "focuses the attention of the court on the deficiencies or "pathology" of the individual but actually avoids consideration of the wider (including professional) context" (Cooklin 2003 p 4). This project provided an opportunity to understand the dynamics involved in order to improve clinical practice.

Engaging polarised systems

Like many of my colleagues, I came into social work, as I said naively in my initial university interviews, "to help people". In spite of many setbacks I have maintained an interest in the challenges of working with families who appear reluctant to engage with complex professional systems. One of my drives is a personal one, having been brought up in a community valuing self-sufficiency and frowning upon outside

intervention. Another is political, informed by a humanistic, human rights stance and a commitment to social justice that imbued my professional training. I am also influenced by my experience of migration and working in a multi-cultural society that challenges my understanding of culture and the complexities of cross-cultural work. Many families referred to CAMHS by social services in the context of child protection have reached impasse (Flaskas 2005), with families appearing bruised by professional interventions and social workers either seeking evidence to confirm the threshold of significant harm or looking for someone to take the work away. In such polarised situations, clinical concepts such as empathy, therapeutic relationships or person-centred practice are insufficient. The task of "helping" becomes one of "bridge building", and attempting to create a space for reflexivity, common purpose and understanding (Malik 2012).

Micro and macro – whole and parts – systems and psychoanalysis

As a social worker I was particularly impressed by the evidence presented in court by a systemically trained family therapist and a psychoanalytically-orientated psychiatrist who combined to explain and contextualize the complex relationship between a mother and her children. Their report had been persuasive and offered a sympathetic and insightful analysis of the whole family's experience which they felt was amenable to change. However under hostile cross examination aimed at defending the mother by undermining the expert's credibility, the experts became more critical of her parenting. She in turn lost trust in professionals and took a combative, triumphalist stance which was later used against her to demonstrate her lack of co-operation. I was left with ambivalent feelings about the court process. On the one hand the authority of the court had allowed professionals access into this family's life which had benefited the children in a way that had not been possible earlier. But the adversarial context of the court made it difficult to make use of this knowledge to assist the family. Experiences like this drove me towards a systemic understanding of human behavior that is context bound, is influenced by and influences wider systems via complex feedback processes that are often difficult to predict (Mandin 2007, Bateson 1972, Chapman, J 2002). In terms of this research, this meant a research question that is broad enough to address both the micro and macro levels and opens to scrutiny the detailed interactions of stake holders in Network Meetings as well as the justice and social welfare systems in which these take place.

I have also become increasingly aware of the importance of the therapeutic relationship in social work and have written about the contribution of systems and object-relation theories to our understanding of relationships (2007), arguing that "the juxtaposition of the two theories provides a thicker and richer description" (p159). I commented on the uneasy alliance between systemic and psychoanalytic traditions in family therapy and social work (Mandin 2007).

6. Theoretical issues and problems

The choice of direct observation as a method has been informed by the research opportunity, the ethical/legal constraints and my theoretical orientation. I wanted to know everything but could not ask participants directly. The project received ethical approval in 2008 as long as participants were not directly interviewed and research information was shared with participants' legal representatives. I therefore needed to gather as much material as possible with the least interference. I wanted to know what people said, what they did and, as far as possible, what processes guided their decisions; what they might have seen, thought and felt. I therefore had to be in the room, interfering as little as I could, to experience what was going on as well as record what was happening. Psychoanalytical observation (Hinshelwood 1999, Rustin 2006) provided a framework for accessing emotions and unconscious processes while audio recording and transcribing dialogues would allow an analysis of language and dialogical sequences (Antaki et al 2003, Seikkula 2005. I was also interested in the wider context of the British family justice system and the "structures" (rules, customs, behaviours and ideas) (Giddens 1984, Krause 2002) which influence or underpin the practice of Network Meetings. I wanted to make use of and make explicit my experience of this field as a social worker, "expert" and psychotherapist. The method was inspired by reflexive ethnographic enquiries (Davies 2008, Krause 2002) using transcripts, a reflective diary, personal practice experience and theoretical background study.

The analysis consisted of examining three sets of data: dialogical sequences to study language, observation of interactions to assess relationships and reflexivity to access emotions. This proved very cumbersome and a hypothesis emerged in supervision that the emphasis on methodology may be mirroring aspects of the subject under research. Did my search for validated research tools that would capture the whole of human experience and bring scientific credibility to the project mirror something of the high stakes involved in decision making processes in child care proceedings? The subject matter – providing "expert" evidence in court - also implicates a preoccupation with the nature of knowledge and truth (getting it right) both as a practitioner and researcher, while the process of analysis had qualities of a "liminal" space (Davies 2008 p 256) similar to the writing-up of court reports. This will be explored in Chapter 3 together with the value of reflexivity and ethnography in qualitative research.

7. The thesis

The literature review in Chapter 2 will consider the characteristics of the British child care and family justice systems and the recent public debate about family justice and the use of "experts" in child care proceedings. Writing on this topic has been overwhelmingly critical of a British system frequently described as adversarial and a number of commentators have looked overseas for alternative legal approaches to

family law and welfare services (Cooper 1999, King & Piper 1995, Cooklyn 2012). However, in spite of the many flaws identified in the current system, a recent government review of family justice system decided against reforms of the law and instead recommended a “whole-systems” approach to reforms that include the creation of a “dedicated managed Family Justice Service” that would incorporate court, CAFCASS, mediation services, contact centres and experts (Norgrove 2012). Having considered the benefits and problems associated with adversarial systems, the literature review will consider theoretical approaches to working with polarised systems and introduce the Network Meeting as a “potential space” (Winnicott 1971) that may help the transition from court to clinic and back again.

Chapter 3 summarises the development of the complex methodology and discusses epistemological considerations. The project proposes a multi-method design in an attempt to capture the complex dynamics involved in child care proceedings and mirror the processes involved in multi-disciplinary parenting assessments. The compatibility of these methodologies from three distinct epistemological traditions will be considered. “Structure” and “communitas” (Turner 1969) will be proposed as conceptual tools to assist in the interpretation of data.

Chapter 4 sets the context of Network Meetings by exploring the known characteristics of the sample starting with an analysis of referral information and biographical details of the six families involved and the participants to the meetings. It is followed by a brief narrative of the six families’ journeys to this meeting and by a thematic analysis (Braun & Clarke 2006) of the six letters of instruction that highlight common factors, dilemmas and the preoccupations of referrers. This contextual analysis provides an insight into the “structure” dominated system of the court at the point of referral.

Chapter 5 presents the findings of the thematic analysis (Braun & Clarke 2006) as a narrative of what tends to happen in the six meetings and provides a kind of composite or prototype for Network Meetings. Extracts from each meeting are used as well as an overview of the observer’s reactions in the meeting. The Network Meeting emerges as a kind of liminal space (Turner 1969, 1986) as part of a ritual-like exploration of the letter of instruction aimed at facilitating or negotiating the transition from the “structure” dominated domain of the court to the more existential state of “communitas” favoured in the clinic.

Chapter 6 returns to the meta-analysis of the six Network Meetings. Each meeting is scanned for evidence of Turner’s concepts of “structure” and “communitas” (1969). The two interrelated concepts are used as a lens or analytical tool to assist in the interpretation of data and to examine the processes involved. The analysis focuses on significant moments when the experiential and emotional domain of “communitas” fleetingly emerged in meetings and considers the impact that this had on the meeting.

Chapter 7 summarises the findings of the research and revisits some of the themes and concepts identified. An argument is proposed in support of developing the practice of the Network Meeting to facilitate the transition between the court and the clinic and set the scene for the creation of a space for human experience and emotions within a structured space. The theoretical underpinning of the thesis are discussed.

Chapter 8 summarises the skills and processes that have been identified in conducting Network Meetings and consider the applications for social work practice, family justice system and research methodology.

The question of confidentiality was considered at all stages of the research process. Legal advice was sought at the start of the project and guided the wording of the information sheet (Appendix B). Participants were made aware of the limitations of confidentiality within the court setting and that data from the research could have been subpoenaed by the judge. It was explained that every attempt would be made to preserve anonymity by changing all names and altering key biographical details in the writing up and dissemination of findings. Aspects of families' stories that could have led to them being identified were amended in a way that preserved to the fullest extent possible the authenticity of their experience. Participants' permission was sought to publish findings including direct quotations from meetings.

Chapter 2 Literature Review

Summary
Child care proceedings bring together the domains of justice and welfare (health, education and social services) in order to reach complex decisions about the long term futures of children who have been assessed by professionals as being at risk of significant harm. Concerns about children reported to the local authority are first investigated in the welfare domain by social workers within the statutory framework of the law under section 47 of Children Act 1989. If concerns remain and/or the relationship between professionals and family reaches an impasse, a child protection case conference is called to pull together information about the child's circumstances and agree a time limited child protection plan. If the threshold of significant harm is thought to be reached, the local authority seeks legal advice and initiates care proceedings. The application to the court can be seen as an attempt by the professional welfare systems to impose additional structure on a system that has reached impasse and/or is assessed to be unable to meet the needs of the child in its current configuration. At this stage, "the task of the court is to establish the facts, determine the need for any additional information, consider whether the threshold for significant harm has been met, and decide on the disposal of the case" (Jessiman 2009 p.4). Diagram A (page 40) provides a visual picture of the progression towards care proceedings in England and Wales from the identification of risk to children by professionals and/or members of the public to the final hearing.

The practice of the Network Meeting investigated in this research takes place at the border between the welfare and justice domains, at a time when the justice system commissions additional welfare reports to bring additional information "to assist the court in ascertaining what disposal will be in the best interests of the child" (Norgrove 2011). It therefore provides an opportunity to observe at first hand some of the qualities of both systems and their relationship.

This chapter will review the literature on the family justice system and examine its relationship to the Welfare system in England and Wales. I will first explore some of the characteristics of the justice system which has recently been subject to a comprehensive governmental review (Norgrove 2011). The second part will look at the welfare domain and particularly the child protection system which has also been subject to a recent governmental review (Munro 2011). Having identified the family justice system as a structure dominated world, the second section will focus on the possibilities for relationship-based practice (as recommended by Munro) in a complex structured environment.

Section 3 of the literature review will consider the role of the "expert" in child care proceedings and the potential role that they can play between the two domains. Section 4 will scan the literature for current debates on the relationship between

justice and welfare domains. A trawl through the literature identified longstanding concerns and wide spread dissatisfaction with the family justice system in England and Wales which suggest deeper epistemological challenges. Section 5 will review some alternative approaches to Family justice by exploring European comparative studies. This literature search identified a lack of process research into the dynamics involved in such complex decision-making processes (Brophy 2006, Healy et al2012 p.1). This review will therefore consider other relevant theoretical enquiries and clinical practices in the field of socio-legal-therapeutic work.

Section 6 will propose a theoretical analysis of the processes involved in multi-agency meetings in complex, contested, situations from a number of theoretical lenses leading to a discussion on the gaps that this research aims to address.

1. Public-law family justice system

a. A system that is not a system

The Department of Justice has undertaken a comprehensive review of the family justice system (2011). The foreword by its Chair, David Norgrove, is blunt:

> "We found general agreement with our diagnosis: a system that is not a system, characterised by mutual distrust and a lack of leadership, by incoherence and without solid evidence based- knowledge about how it really works"… "The consequence for children is unconscionable delay that has continued to increase since we began our work."… "The reality of course is that time and money spent on one child means less time and money available to help another" (2011 p.2-3)

The report identifies cost and delay as the main drivers for change but also highlights the complexity of a system that is "confusing for parents and children", where "individuals and organisations often do not trust each other" and there is "no set of shared objectives to bind agencies and professionals to a common goal", contributing to "low morale" (2011 p 5). This comprehensive report into care proceedings was informed by a review of research undertaken by Julia Brophy and her team who found that "this is a highly complex and under-researched area" so that "in effect, each study has to 're-invent the wheel' (2006 pi). This lack of systematic research and evaluation has been symptomatic of a system that is "on the margins" (Cooper 1999) and has appeared at times too difficult to think about, as exemplified by the reluctance of many social and health care professionals to enter this area of child care work (Kennedy 2005, Fyvel & Mandin 2003).

Brophy's well-regarded submission to the family justice review (2006b) includes a list of additional shortcomings that needed to be addressed.

- "Families' lack of understanding of the process and their difficulties in engaging with it, including the impact of the focus on permanency through

substitute family care (the perception that children are likely to be permanently removed from birth parents, potentially with no contact) and the ability of vulnerable families to understand local authority concerns and to be encouraged to address these as early as possible and before proceedings are issued"

- "The complexity of cases (and the impact of this on other factors, such as children and families' understanding, unnecessary delay and the volume of paperwork generated for practitioners)
- "The need for better inter-agency working to achieve holistic improvements in the child care proceedings system" (2006b p 3).

The need for reform identified by most commentators has also been fuelled by the increasing number of children referred into the system. There are around 20,000 children currently waiting for a decision in public law, compared to some 11,000 at the end of 2008 (Norgrove 2011 p 91). The number of new care applications received by CAFCASS continued to increase to 9,127 during 2010-11 (CAFCASS 2012). The Ministry of State for Justice recently summarised the "general consensus that the system is not working well enough for the children and families who need it. It is simply not acceptable that children wait, an average of 45 weeks (and until recently over 56 weeks), for their care or supervision case to be resolved (McNally 2013)

b. An adversarial system characterised by binary thinking

There is much talk in the family justice system of the need to balance a number of competing demands, between 'the state and individual parents' (Parker 2010), and between parents' rights to a fair hearing (Article 6, Human Right Act 1998), respect for family life (article 8) and the paramouncy of the child's needs (Children Act 1989). Yet the experience of going to court comes across more as a gladiatorial confrontation than a balancing act. A search for truth and the language of "rights" often appear to dominate proceedings. "Balancing the right of the parents to a fair hearing has come too often to override the paramount welfare of the child" (Norgrove 2011 p13) and attempts at dialogue between parties are often thwarted until the day of the final hearing which can take epic proportions. Although individual actors (including Judges, children's guardians, and child care professionals) appear committed to understanding the experience of children and families, the adversarial nature of the legal system can leave little room for addressing the complexity and subtleties of the life stories of the people involved.

English law operates a binary system in which the only values are 0 and 1 which leaves little room for balance. In a judgment of the Court of Appeal (B (Children) [2008] UKHL 35), Baroness Hale of Richmond found that "In our legal system, if a judge finds it more likely than not that something did take place, then it is treated as having taken place. If he finds it more likely than not that it did not take place, then it

is treated as not having taken place. He is not allowed to sit on the fence. He has to find for one side or the other" (2008 Paragraph 32).

Binary thinking has the advantage of bringing clarity and closure to complex situations. Professionals working in the field of child protection have to make extremely difficult decisions relating to the future well-being of children. There is much talk in the child development literature about the overriding need of children for permanency which is mirrored in social policy's emphasis on speed and finality of decision-making processes (Brophy 2006, Howe 2012). So at the end of the day, decisions have to be reached about the protection and welfare of children. Closure can be seen as "an authoritarian act" but is both "fundamental and unavoidable" (Harvey 2000 p 183).

By its very nature, binary thinking has reductionist tendencies which do not sit easily with the postmodern sensibilities of most family therapists or the engagement with complexity recommended by social work commentators (Monroe 2011, Barlow & Scott 2011). In an attempt to bring clarity, the adversarial qualities of the child protection and justice systems can have a tendency to polarise positions and increase conflict between families and professionals. For example, following the Cleveland enquiries, Cooper and Hetherington described the tendencies of child protection work to reinforce "the dynamic of closure" in sexually abusing families (1999 p 38).

Binary thinking can also appear brutal to both parents and professionals who have to apply rarefied assessments and court findings to real-life situations that may or may not fit their cultural logic (Malik 2012).

c. An ethnocentric system

The balance between the particular and the universal has been a recurring feature of this and other research projects. Lord Justice Thorpe (2007) started the Dartington Interdisciplinary Conference with the question: "Is the welfare of the child a concept that permits generalization or are individual cases so fact dependent to defeat the formulation of a general rule, or even any presumptions?"

The Race Relations Amendment Act (2000) places a duty on all public authorities to actively promote race equality. The Children Act 1989 (welfare checklist) draws attention to culture by placing a duty on the local authority to "give due consideration... to the child's religious persuasion, racial origin and cultural and linguistic background". It is also recognised that "other things being equal, and in a great majority of cases, placement with a family of similar ethnic origin and religion is most likely to meet a child's needs as fully as possible and to safeguard his or her welfare most effectively" (Children Act Guidance and Regulations Vol.3 para 2.40).

However, until recently, little guidance has been provided to ascertain the meaning of these "other things being equal", leaving much room for disagreement as to the place of cultural differences in decision making processes. In her review of Child Protection in a Multi-Cultural Society, Brophy (2003) reviewed and compared a large number of cases involving children from different ethnic and cultural backgrounds. She interviewed judges and solicitors who declared an interest in culture as a context for allegations of child ill treatment, but most "felt that the test for judging a parent's capacity to change remained broadly the same regardless of cultural context" (p. xi). Brophy's detailed analysis of court reports found that the phrase *"cultural issues might be relevant"* appeared in some but without an analysis of what might be relevant and how. Judges were looking for "more analysis of contextual information ... not simply broad anthropological material on practice in other countries" (Brophy 2003 p 211). Yet the quality of reports has been found wanting and child protection assessments have been described as Eurocentric because they often "fail to grasp cultural/religious ways of life and the subtleties of differences in BME families (e.g. Lau 1998; Maitra 1995; 1996)" (Dutt 2011) .

Brophy undertook further qualitative research into minority ethnic parents and their solicitors. She found that parents felt that "diverse cultural and religious backgrounds were not sufficiently understood by their own solicitor and were not covered sufficiently statements" (2005 p 172). Many lawyers were not sure how to ask about relevant aspects of culture while parents did not know what is legally relevant or did not feel able to broach the subject (2005 p 172). Culture has been described as "deeply meaningful but illusory" (Krause 2012). It can therefore be difficult to access, particularly at times of stress and conflict (Bhui 2003, Brophy 2005). There is much evidence from literature, anthropology and sociological studies of the enduring nature of culture and identity but also its changing nature as families adjust and negotiate aspects of their identities and cultures in different contexts. Identity formation takes place largely outside of consciousness and is therefore not easily accessible or describable. This suggests that more training and/or access to cultural consultation should be considered in court (Sapnara 2010).

More recent guidelines for judges and lawyers emphasise the responsibility of advocates and the court to ensure that issues of diversity are taken into consideration (DCA 2003, 2008 DoJ 2010) but a number of audits continue to highlight the incomplete recording of families' ethnicities (Rose 2008; Brophy 2012). This limited attention to culture and diversity is likely to have contributed to unequal outcomes and the prevalence of "institutional racism" (McPherson 1999) identified in other spheres of public life. For example Chand (2004) highlighted the overuse of emergency powers and orders with minority ethnic families who are likely to experience the interventions as punitive (p 92). In a sample of 64 emergency protection orders Brophy found 86 % involving BME children (2003). Together with the poor use of interpreters, these findings raised "some serious questions about access to justice for the 20 parents whose first language is not English" (2003 p

138). This analysis corroborates a number of governmental reviews in the field of mental health in the last ten years that found that clients from BME communities were less likely to be offered preventative treatment such us talking therapies and were more likely to be misunderstood and mis-diagnosed, prescribed medication and compulsorily admitted to hospital (Breaking the Circles of Fear 2002; DOH Inside Outside 2003; DOH Delivering race Equality 2005; Improving Access to Psychological Therapies: BME Positive Practice Guide 2009). Higher levels of mental distress, exacerbated by social disadvantage, exclusion and experiences of discrimination contributed to a cycle of fear and suspicion (Fern 2007) between some BME communities and statutory services which are likely to have a negative impact on engagement with professionals. In Brophy's study, "most minority ethnic parents participated in proceedings" but "some saw state intervention in parenting practices as a complete anathema" and some "as a challenge to the authority and as a threat to the honour and reputation of the family" (2003 p.xiii).

These findings suggest that culture continues to be seen too often in the court arena as an inconvenient add-on to an already complex decision-making process, or as additional ammunition in the legal battle in an attempt to justify (or refute) harmful practices as cultural (Maitra 2006, Rober 2013).

d. A complex system dominated by structure

Family court judges have to make decisions about complex issues which have far-reaching significance for the welfare of children. Brophy's review (2006) identified key features of care order applications:

- Most cases contain multiple categories of child ill-treatment and multiple allegations of failures of parenting with most children and parents being well known to local authorities.
- Most parents are highly vulnerable on several indices. For example, over 40% are likely to have mental health problems, many (20-30%) are likely to have drug/alcohol problems, many lead chaotic lifestyles (about 36%). Many mothers also endure domestic violence (45-50%); many parents (some 61% in the latest study) are unable to control children. Half of all parents are also likely to experience housing problems (Brophy, Jhutti-Johal and Owen 2003; Bates and Brophy 1996). Over 80% were on income support at that point.
- Most applications (over 70%) also include allegations regarding the failure of parents to co-operate with welfare and child health professionals (Brophy, Jhutti-Johal and Owen 2003).

Decision-making processes in child protection are notoriously complex and involve a number of elements including "psychological and intra-psychic dimensions, an interpersonal dimension and a social dimension" that have "traditionally been

reflected in the separate institutional responsibilities and activities of, respectively, psychotherapist, the courts and social workers" (Cooper 1999 p 157). Yet in the organisation of "late modern" society services have become increasingly specialised and individualised. Thus "coordinating and adapting to the complex systems of other experts and agencies involved with the client has become increasingly complex" (Arnkil 2011 p 49).

This fragmentation of services has often been replicated in the use of independent "experts" who are commissioned by the parties involved to investigate parts of the system (Adult/child Mental Health, Paediatrics, substance misuse…). This contributes to a "linear" way of thinking that may fit the positivist tendencies of the justice system but has been found increasingly unsuited to decision making in child protection (Cooper 2011, Munro, 2011). The English child protection system has tended historically to respond to risk and Serious Case Reviews by attempting to create structures to protect children and "eliminate risk" (Cooper 1999, Barlow & Scott 2010). The processes that have developed in the last two centuries across three Children Acts (Parker 2010), appear to progress interventions with children through a series of thresholds that mirror each other but with increasing levels of state intervention through statutory compulsory powers. Cooper describes how "the English Child Protection Conference, the structure within which information sharing is institutionalised, to a considerable extent mimics the legal process. There is an emphasis on discovering the truth and the presentation of evidence… a decision has to be reached and it is in the same binary form as a legal decision, yes or no… it is difficult for a child protection conference to take no action and wait" (1999 p 45).

The response of the family justice system to this complexity has been to focus on structural changes. The Public Law Outline (PLO) (Ministry of Justice 2008 revised 2010) has formalised applications to court in an attempt to streamline the process, reduce delays and ensure that every attempt has been made to avoid proceedings**.** Yet attempts at reforming the system struggle to achieve the required changes and reduce cost and delay (which continued to increase from 53.02 weeks in the second quarter of 2008 to 55.7 weeks in the same quarter in 2010/1) (Munro 2010 p.34). A recent review of the PLO found that although "all respondents endorsed its aim (focusing on a clear structure, more efficient use of court time, and avoiding delay for children)" the study "revealed a range of serious concerns regarding the pre-proceedings process" (Jessiman 2009 p.33).

2. Relationship-based practice in a complex structured environment

During the same period as the Norgrove Review, Professor Munro undertook a comprehensive review of the child protection system in England and Wales which has been widely recognised as an attempt to balance the organizational context of child protection including the importance of robust management systems with the need for professional autonomy and reflective, relationship-based practice. She

recognised the dilemmas of a system that wishes “to standardise the processes that are used”, with its “ability to tailor each response to the need of children and young people - whilst ensuring that reasonable standards are being upheld across the board” (2011 p 63).She adopts systems theory and complexity theory to analyse the state of the system, to identify complex “feedback” processes and to think about “whole as well as parts” (2010 p 13). She recommends an approach to learning based on “double loop learning” and a “concern on doing things right (i.e. checking whether children and young people are being helped)” as opposed to the “single loop learning” characterized as “a concern with doing the right thing (i.e. following procedures)” which contributed to the development of an increasingly “technocratic” system (“2010 p 14). Overall the report promotes a learning culture where the complexities of decision making processes are accepted in order to manage the inescapable uncertainty of child protection work and the resulting anxieties of professionals and society at large.

The Norgrove and Munro Reviews unwittingly exemplify one of the main differences between justice and welfare’s epistemological influences. Although the authors of these two government-led reviews were keen to emphasise the close working relationship between the two teams “in pursuit of good analysis and solutions which improve the system, focusing any reforms on the interests of children and young people” (2010 p 34), the differences in their analysis illustrate their different preoccupations. While Norgrove’s recommendations focus on changes to the organisational structure including the creation of a “dedicated, managed family justice Service that would incorporate court, CAFCASS, mediation services, contact centres and experts”, Munro’s analysis emphasise the need to think about “whole as well as parts” and addresses the “centrality of relationship skills” and “the roles of intuitive understanding and emotional responses” (2011 p89). Quoting Reder and Duncan (2003) she argues that emotional wisdom is a crucial dimension of the skills needed in child protection work (Munro 2005 p 537). Practitioners have to deal with their own feelings associated with children’s suffering, parents’ powerful reactions to allegations of abuse and “the heightened levels of scrutiny and the person-centred blame culture that pervade the wider child-care social work context” (Ruch 2011 p 4). So while “judges and lawyers operate in an adversarial system aiming for a resolution of contested facts within an ethics of rights and justice, welfare professionals have been trained to use casework and conciliation to produce a neutral report for the court”. “They might be said to pay more attention to an ethic of care, using therapeutic means to resolve issues for families” (Doughty 2005 p 231).

This difference in emphasis on either the structural foundations of social systems or the relationships between individual components mirrors long standing theoretical attempts by social scientists to “formulate a coherent account of (society that includes both) human agency and structure” which according to Giddens “demands a very considerable conceptual effort” (1984 p XXI). Both are as important as the other in understanding society, organisations and systems but as Giddens’ project

on the Theory of Structuration (1984) demonstrates, they are not easily integrated. He argues that "structures are both constraining and enabling" (p 25) and calls for a theoretical framework to understand both social structures and human agency. He presents an optimistic view on people's capacity "to reflect on structures and the rules that govern their lives and everyday practices" - what he calls "reflexive monitoring" (Ferguson 2009 p 26) in order to adjust their actions accordingly and influence "life politics".

In the context of care proceedings this balance between individuals and structures is further complicated by the adversarial nature of the English justice system and the enduring tensions in social work practice between the "care and control" aspects of the role; between supporting parents and investigating them as potential abusers and between preserving families and rescuing children at risk of harm (Munro 2011). Co-operation between parents and professionals and between court and social services is at times undermined by anxiety and lack of trust between law and welfare as exemplified by research suggesting "that at present the courts are disinclined to rely on evidence provided by local authorities" (Norgrove 2011 p.103). This "fuels the culture of assessments which create delays and is a symptom of a poorly functioning system" in which "balancing the right of the parents to a fair hearing has come too often to override the paramount welfare of the child" (2011 p 13). Ferguson's study of social work in child protection found that "social workers were broadly in favour of increasing rules and procedures that govern their practices because they lent some predictability to work pervaded by uncertainty (2009 p 28) in spite of evidence that no expert system can guarantee safety.

3. The role of the "expert" in care proceedings

The relationship between court and welfare (health and social services) can best be described as ambivalent on both sides. Yet both need each other. While local authorities have to refer complex decisions about placements of children to the court, a large number of cases remain stuck in proceedings for longer than is thought appropriate for children while the justice system awaits the information required to reach final decisions for children's future. Munro's analysis of child protection work reinforces the importance of assessing such complex situations by understanding individuals, systems and relationships. In this context, the commissioning of expert assessment can be interpreted as a request by the justice system for advice on emotional, systemic and relational matters that are not easily accessible to the court.

Raitt and Zeedyk (2000 p 4) defined the function of an expert witness as "to provide to the "trier of fact" (i.e. the jury or the judge) knowledge that is considered to be so specialist, abstract or complex that it requires an expert to explain it". Current guidelines from the Department of Justice (Potter 2008) suggest that expert evidence may be required to "identify, narrow and where possible agree the issues between the parties; provide an opinion about a question that is not within the skill

and experience of the court; encourage the early identification of questions that need to be answered by an expert; and encourage disclosure of full and frank information between the parties, the court and any expert instructed (2008 p 2).These guidelines can be interpreted as a request from the justice system for assistance from the welfare system to find a way through the adversarial nature of contested cases by facilitating a more open, co-operative approach between the parties that may reduce the length of the final hearing. Although the Legal Commission is clear that the expert witness should not undertake any therapeutic work there is an acknowledgement that "the court will need to know in all cases how the parents have responded to the challenge of the court process and how able they are to make the necessary changes in order to parent successfully in light of the individual needs and characteristics of the child" (Brophy 2006 p 9).

The role of expert has been under scrutiny in the last 20 years. In her reviews of "expert" assessments Julia Brophy (2001, 2012) identified "the inescapable dilemmas and tensions within and between the clinical cultures and the needs of the law and the culture of courts" (2001 p 104). She found that most requests involved child psychiatrists working in private practice (41%). Experts commissioned by one of the parties were often seen as "hired guns" (Asen 2011) whose evidence could be discredited by advocates on the other side to identify and take advantage of uncertainties in their findings. There is also evidence that the use of medical experts appeared to contribute to the law becoming increasingly medicalised and focused on the deficiencies or pathology of the individual (Cooklin 2003 p.4).

There appears to be a recognition that the complexity of cases involved in legal proceedings would benefit from jointly commissioned multi-disciplinary assessments (Brophy 2006, Norgrove 2011, Thorpe 2001). The involvement of an expert can be seen as "a higher order function to the role of the children's guardian" by focusing on the best interest of the child with "the flexibility to take a wider view of the whole system in thinking about what ultimately might be in the child's best interest" (Cooklin 2003 p.4). This would provide opportunities to assess the family in its context and include an assessment of the relationship with and quality of the services involved.

Lord Justice Thorpe commented that "perhaps the profoundest advance in the family judicial system over the past decade has been the recognition that good results depend upon inter-disciplinary collaboration"… "The bond between the judge and any expert concerned with child health and development is particularly close since in some degree they share the daunting task of deciding the future of the child" (2001 (p xi). In chairing the Dartington Inter-Disciplinary Conferences for the last ten years, he has done more than most to improve the relationship between court and clinic. Yet the majority of clinicians continue to be reluctant to enter the court arena (Kennedy 2005, Brophy 2006) while the Ministry of Justice remains critical of what they see as the overuse of expert assessments. Norgrove acknowledged that "Expert evidence is often necessary to a fair and complete court process" (2011 p

17) but also identified serious issues with their quality and the qualifications of those carrying them out. He accepted critical submissions that reports by independent social workers (ISW) “cause delay, simply duplicate existing local authority and children’s guardian assessments”, “and undermine confidence in social work assessments”. The review recommended that “more judicial control needs to be exercised over letters of instruction” and that “judges must order only those reports strictly needed for determination of the case”, “only when that information is not available, and cannot properly be made available, from parties already involved in proceedings” (2011 p 18). The criticism of ISW reports has been rejected by Brophy (2012) whose audit highlighted the value of independent assessments in providing “detailed information about parents”, “analyses of parental functioning and relationships, opinion about parental capacity” and analysis of different positions between parties that “may reduce the likelihood of a contested hearing, assist courts to meet tight timetables and achieve early resolution of a case” (2012 p 4).

There is some evidence from this literature review that the role of expert witness in court may be evolving from the delivery of specialist knowledge to the provision of a “neutral” overview or critical evidence- based analysis of the complex history and relationships of the child, the family and their interface with professional systems. There is also pressure in the current financial climate to reduce the use of experts and to limit the focus of proceedings to the narrower (binary) issues related to “whether or not to make a care order” (McNally 2013)

4. Law and welfare: complementary discourses or incompatible systems

Given the differences identified, it is not surprising that a number of commentators have concluded that there are inherent incompatibilities between the Justice and welfare Systems. King and Piper’s work on “how the law thinks” identified a clash between these two distinct approaches, with justice usually coming out on top. The law is

> “obliged by the roles it plays in modern society – stabilising, imposing order, resolving disputes – to confront and deal with other discourses or communicative systems” but also to “promote and reinforce its own claim to control and regulate these subsystems” (1995 p 31).

They detected a “tendency of the law to reduce behaviour to rights, duties and responsibilities or to culpability and innocent conduct” (1995 p 30) and argued that

> “Law maintains and reproduces its own autonomy from society and from other social communication systems and asserts the validity of the truth independently of the truths produced by these other systems” (1995 p 30)

King and Piper argued that differences between justice and welfare are irreconcilable:

> "Traditionally, lawyers have been people whose training and professional orientation leads them to do all in their power to secure the best outcome for their client, with the result that the interests on children often disappear from view" ...whilst … "the welfare approach on the other end claims to make the child's interest the dominant concern" (1992 p 6).

They found in their research that practitioner's attempts to "bridge the gulf between welfare and justice" by bringing "the two sides closer together and by doing so to arrive at the correct or best solution" was doomed to failure as

> "the nature of the legal discourse is such that attempts to merge it with other social discourses can only result in interference between the two" (1995 p 21).

King and Piper's thesis drew on Teubner's work on legal epistemology based on Luhmann's theory of autopoesis (Maturana & Varela 1980) which they summarise in this quotation;

> "Interference of the law and other social discourses does not mean that they merge into a multi-dimensional super-discourse, nor does it imply that information is 'exchanged' among them. Rather, information is constituted anew in each discourse and interference adds nothing but the simultaneity of two communicative events" (Teubner 1989 in King & Piper 1995 p22).

From this perspectives, attempts to integrate two such different systems seems doomed to failure.

King's analysis represents a radical position which has been disputed but others. It has merit in pointing out and theorising the polarities involved in care proceedings. However its postmodern analysis of the law and welfare portrays a very pessimistic outlook on human systems which, others contend, does not sufficiently recognise the historical context of social institutions and the adaptive qualities of human systems. For example, Brophy argues that

> "the relationship between the two discourses, the law and child welfare knowledge, is now a more interactive, multi-dimensional process than was previously apparent. While the law is having to learn that child welfare knowledge does not offer absolute "truths" it is also the case that experts are having to justify and define more clearly their own activities and procedures that apply for validating that knowledge base" (2001 p 106).

The nature of the justice system needs to be understood in its wider context where "adversarialism exists in the media, academia, business, politics, religion, sport and families" (King, MS 2009). European comparative studies have highlighted the weight of history on the development of national child protection systems which permeates through the culture, language and professional practices of each country (Grévot 2001, Hetherington 1997, Cooper 1995). These fundamental differences often made comparison and communication between professionals in different countries very difficult. Each system was seen to have both advantages and drawbacks. For example European social workers were often shocked by the adversarial nature of a British system "dominated by administrative procedures, fact findings and administering justice", but were impressed that parents seemed better informed and able to express themselves than in other countries (Grévot 2001 p 215).

In her comparative study of family justice systems in Australia and England and Wales, Doughty also concluded that in both systems "a relationship between the judicial system and a 'social welfare' service is seen as vital in resolving parenting disputes, but the expectations of such a service are inherently contradictory" (2005 p 239).

5. Alternative approaches

This literature review has identified courts' leanings towards structure while "experts" (in health and social services) tend to focus on experience, relationship and emotions. Some argue that the two worlds are incompatible and look for either a complete overhaul of the legal system to a more inquisitorial system (based on French or Scottish models) (Cooklin 2003, Hetherington 1999) or for more separation of law and welfare (King & Piper 1995, Cooper 1999 etc.) by developing "alternative processes aimed at avoiding proceedings or resolving difficulties between local authorities and families outside the court room" (Norgrove 2011 p 19).The next part of the literature review will consider some alternative approaches to the current system as well as a number of projects aimed at reducing the need for legal interventions. I will then consider the workings of specialist multidisciplinary teams involving Justice and welfare systems and reflect on the use of therapeutically led interventions aimed at improving decision making processes in complex polarised systems.

a. Inquisitorial versus adversarial legal systems

A number of commentators have looked towards inquisitional approaches adopted in different forms in Scotland and most European countries (Cooklin 2003, Cooper 1999, King & Piper 1995). Although no system can be said to be just one or the other, significant characteristics can be identified. In the adversarial model described above, responsibility for gathering evidence rests with the parties. This means that,

in care proceedings the local authority has to demonstrate that the threshold for significant harm has been reached. This tends to contribute to social workers being perceived as persecutors building a case against the parents. The judge remains above the fray and assesses the evidence presented and cross-examined by the other parties within the rule of law.

In an inquisitorial model, an “investigation”, is typically overseen by either an “independent” prosecutor or an examining magistrate who is professionally as well as legally trained (in France called a “juge des enfants”). Trust is invested in the “juge des enfants” to investigate the evidence, meet and interview anyone that is thought to be relevant and prepare a dossier that outlines all aspects of the case. They are “drawn from the ranks of the judiciary but are encouraged to temper the impersonal nature of legal rationality with the caring compassion of welfare” (King & Piper 1995 p 10)”. This system allows the judge to get to know and question the family and professionals involved in the case and to commission additional services or investigations. Family members can directly approach the judge who is able to observe the relationship between families and professionals at first hand. The system appears to allow for greater integration of law and welfare. It has also been criticised for placing “greater presumption of guilt than in an adversary model” (Law Commission 2012). It has also been criticised for being over bureaucratic and relying too heavily on the judgement of one person.

Both systems have developed in different historical contexts and evolved within different systems of thought that make comparison difficult. For example the French inquisitional system places a lot of emphasis on the moral authority of governmental organisations as well as on the judicial power of the state (Grévot 2001 p 249). The legitimacy invested in public services in France may be envied by British social workers (Cooper 1995) but it also raises concerns about the power invested in professionals’ judgement and the limited cross-examination of evidence.

Although wholesale adoption of another system is likely to be difficult, it may be possible to adapt and learn from other practices. For example Brophy argues that “it is inaccurate to describe care proceedings as simply ‘adversarial’ as they are a ‘hybrid’ increasingly incorporating many inquisitorial features” and that, with some improvements, they can “provide a protected, managed space in which assessments can be undertaken and where parties can attempt to work towards a solution” (2006 p vi) for which they are accountable to courts. The recent introduction of the PLO is importing elements of the inquisitional model by involving the judge in pre-proceedings planning, by ensuring that all steps have been taken by the local authority to avoid the case coming to court before initiating proceedings. A letter has to be sent to parents by the local authority, outlining the key concerns and inviting parents, along with their legal representative, to a meeting to agree actions to safeguard the child that might avoid the case coming to court (Jessiman 2009). There has also been an increase in the number of jointly commissioned multi-

disciplinary assessments which may resemble in some ways the “dossiers” produced by French “juges des enfants”.

b. Reducing the need for legal interventions

A number of researchers and practitioners have emphasised the need to explore alternatives to care proceedings at an earlier stage of the professional intervention. The Review of family justice (2011) also recommends further research into “alternative processes aimed at avoiding proceedings or resolving difficulties between local authorities and families outside the court room” which “may reduce distress and promote better support to families” as long as they do not delay the process further (p.19).

Early interventions and negotiations

Following their review of child protection systems in Europe, Hetherington et al argued that “a space is needed within the law, where the authority of the judge is manifest, but where there is scope for negotiation over the range of the use of this authority” (1997 p 185). Later they make a persuasive argument for the use of negotiation using Britton’s (1999) psychoanalytically informed idea of the “third position” and a move from an “either/or position to a both/and position” which they suggest is “inherently more uncertain but more creative” (1999 p 51). They argue that negotiation must precede proceedings to allow “the possibility of staying down tariff” because the current system is “adversarial… with a search for evidence of harm” and tends to reduce the authority of the social worker. Two specialist mediation services have been piloted in recent years. One in Nottingham adapted the mediation committee structure from Belgium to “provide a space for a negotiated solution to be found when the relationship between a family and professionals reached a stalemate.” In spite of good feedback from the professionals who used the service, the project was slow to establish and referrals sparse. (Hetherington et al 2004 unpublished). The other similar project in London (King et al 1998) seemed unable to meet its objectives of reducing the need for care proceedings and contested hearings and improving co-operation between parties.

Brophy suggests that the poor take up of the negotiation service “illustrated some of the intractable issues in the child protection arena, for example lack of co-operation of many parents in the absence of legal proceedings, the need to provide and maintain a place of safety for children while assessments are undertaken, and establishing that parents understand and engage in the process” (2006b p vi). She argues that, in some cases, an element of compulsion will be required and that change will be more likely to take place within the protected framework of care proceedings. She found in her review that “about 30% of applications for care orders changed during the course of proceedings” (2006 p vi).

In comparative studies of European systems Cooper found that “although there is conflict and although compulsion may ultimately be necessary, negotiations should precede legal compulsion and can replace it (but) in some countries this negotiation can take place within a legal framework” (1999 p 46). Borrowing from Glaser and Prior (1997) he advocates a process of “assessment and time limited trial of intervention for change… prior to the initiation of formal child protection procedures” (1997 p.326) but he also recommends the creation of “negotiative spaces both inside and outside of the framework of the law” (1999 p 52). These analyses have been influential in the development of the PLO (Department of Constitutional Affairs 2008) that now places a duty on local authority to ensure that all measures have been considered to avoid proceedings, resolve contested issues, and find alternative solutions within the family system.

Family Group Conferences

The Family Group Conference (FGC) has its origin in New Zealand where it is a legal process that brings together family and professionals in a family-led decision-making forum. The practice was initially imported to England by the Family Rights Group (Marsh 1999) who saw it as a way of empowering families to make decisions within the child protection context. It has now been incorporated into the PLO with potential to resolve difficulties between local authorities and families outside of the court arena. In its original configuration the FGC has three distinct stages. First the family is provided with all the information needed to make informed decisions about the care and protection of the child. The family is then given the opportunity to consider in private their own solution to the difficulties identified before coming back with professionals to agree plans and recommendations together. Family Group Conferences in New Zealand are attempting with some success to redress the balance of power between state and family, particularly with Pacific Nations' peoples. However research points to continuing tensions and the “delicate balance between responding to family preservation needs and meeting the care and safety needs of the child” (Connolly 2006 p 354).

In England and Wales, the FGC also showed promise (Crampton 2006) particularly as early intervention when the relationship between family and social services has broken down but support can be mobilised within the extended family (Wilson 2001). In their analysis of families’ experience of FGC six months afterwards Holland (2005) found that such intervention could enable people to be heard and for negotiation around rights and needs to occur. However its application within the legal framework has been limited and the Norgrove Review of family justice (2011) recommends further research into its use. Current research suggests that the practice works best when empowering families within a “family strength model” and is less effective when there are family conflicts and risk of harm (Jackson 1999). There are concerns that within the British context FGC may have lost some of its political edge and comes across as an additional bureaucratic forum with limited effectiveness in reducing the

need for care proceedings. Holland et al (2005) concluded that attempts to bring a democratic approach when issues of child welfare and state powers were at stake were difficult (Ferguson 2009).

c. Specialist multi-disciplinary teams

Family Courts: Family Drug and Alcohol Court (FDAC)

The Norgrove Review of family justice (2011) also recommends further research and "a limited roll out of the Family Drug and Alcohol Court" (FDAC) which has shown "considerable promise" and the development of new approaches to supporting parents through and after proceedings.

FDAC was launched in London in 2008 as "a new approach to care proceedings" "adapted to English law and practice from a model of family treatment drug courts that is used widely in the USA" (Harwin 2011). It is an attempt to bring together welfare and therapeutic services under the auspices of the family court. Unlike conventional care proceedings families involved with FDAC see the same judge throughout the proceedings. It is seen as a problem solving court with regular fortnightly reviews in court without legal representatives to "monitor the parents progress and for judges to engage and motivate parents, to speak directly to parents and social workers, and to find ways of resolving problems". This process brings in aspects of the French inquisitional model and a more collaborative approach to coordinating services, building on the family's strengths and working towards the best outcome for the child. Early findings suggest that parents were less likely to contest care plans and that judges felt more confident in making decisions without the need for reports from a wide range of external experts (Harwin 2011). Parents involved in the project were more likely to engage with substance misuse services than the control group and a higher proportion had ceased misusing substances by the end of the proceedings (Harwin 2011). This suggests that bringing court and welfare services together may have therapeutic benefits and improve engagement and outcome. The qualitative part of the study indicates a "consensus view that the time in proceedings is used more constructively in FDAC than in comparison cases". Observation of court "found that the judges were supportive, friendly and empathetic, but were also able to be firm, encouraging parents to take responsibility for their actions and pointing out the consequences of non-compliance (2011 p122).
A similar project in Australia was also very promising as a pilot but, according to Doughty, it became subject to much criticism once Family Courts were introduced on a national basis as part of the Australian family justice system (2005).

Local multi-disciplinary assessment teams

The family justice Review (2011) cautiously supported previous recommendations (Donaldson 2006) for the concept of multi-disciplinary assessments but suggested

that further research was necessary. A number of multi-disciplinary teams are now operating within the NHS, offering holistic assessments by a number of professionals from different disciplines working together to "understand the psychological undercurrents in families and their impact"; to "develop formulations that are meaningful and practical" and "recommend evidence-based treatments" (Redfern 2012, Millard 2008, Asen 2010, Partridge 2003,). Cooklin describes the role of the expert in multidisciplinary teams "at its best as an extension of a higher order of the role of the children's guardian. He or she has to represent the best interest of the child… but can have the flexibility to take a wider view of the whole system in thinking about what ultimately might be in the child's best interests" (2003 p 3).

The recent 'Alternative Commissioning of Experts pilot" evaluation identified a number of positive aspects of multi-disciplinary assessments in "reducing the exposure to different professionals/venues", facilitating "quicker access to expert witness services "and "the ability of teams to engage with adult parties and local authorities during the assessment process" and "the ability to provide local knowledge-based recommendations for future services" (Tucker 2011 p 86). But although these teams are said to be highly regarded by clinicians, children's guardians, lawyers and judges, their uptake in public law has been limited (Millard 2008, Tucker 2011, Norgrove 2011). This was attributed in part to "a concern, particularly among lawyers, about loss of control over the choice of expert" and some concerns amongst lawyers and professionals that "the opinion of a multi-disciplinary team was likely to be very influential in the decision-making process and can be difficult for parties to challenge". These findings support King's finding about the hierarchy and relationship between court and welfare services (1999).

The agency where this research took place is one of the NHS CAMHS teams providing multi-disciplinary parenting assessments for the court (Asen 2007). While other services hold professional meetings at the start and/or end of parenting assessments (Partridge 2001), I am not aware of other organisations involving parents in Network Meetings.

d. Therapy-led interventions for working with polarised systems.

This literature review also located a number of smaller scale practice-led projects aimed at mediating between family and professionals in complex polarised systems.

<u>The Resolutions Service:</u>
The Resolutions Service was developed by the NSPCC's child and family centre in Bristol to work with families where responsibility for abuse is denied and the relationship between the family and child protection agencies have become "stuck" (Essex & Gumbleton 1999). Their approach is to get beyond issues of denial, responsibility and further investigation of the abuse usually required by the court to "focus on the family strengths and activating support networks" (p 140).They are

critical of traditional approaches that seem to encourage "parents to think in terms of proving statutory agencies wrong rather than focusing on what the present circumstances might mean for the children's future safety". They strive to establish partnerships with parents and/or carers to focus on a question that they say encapsulates their work:

> "in the light of the concerns that bring you here, how can we work together to help convince the child protection agencies that your child will remain safe in the future?" (p 140).

Their practice is influenced by systemic psychotherapies such as brief therapy (George 1990), post-Milan (Cecchin 1987), Narrative (White 1986). The team reported successes in engaging hard-to-reach families in therapeutic change and in protecting vulnerable children. However their intervention often positioned them in opposition to child protection agencies contributing to further polarisation and conflict that had to be resolved within the court process.

Fifth province approach:

Working in the context of "the troubles" in Northern Ireland, Byrne and McCarthy have developed a way of working with strongly polarised systems where there had been sexual abuse. They use the metaphor of the fifth province to refer to "the possibility of holding together multiple stories and social realities in dialogue". Their work is influenced by Richard Kearney's Ethics of Imagination (1996) emphasising acceptance of the other, the right of all to be heard and imagining further possibilities. They try to hold on to both the statutory mandate of professionals where "normative compliance" is expected and to the need for those from marginalised groups to be able to tell the story of their lived experiences. They hold meetings with professional and family networks and have developed interviewing techniques ("Questioning at the Extremes") based on the Milan team's "future questioning" to help participants move beyond blame and remain curious about the other's position and about future possibilities (McCarthy 2006). Using positioning theory (Campbell 2009, Harre & Vanlangenhowe 1999), they map out relationships and polarised themes on a pictorial diamond or "Positioning Compass" (Partridge 2007) that helps visualise tensions without attempting to resolve differences too early. They conceptualise the fifth province as a space in between from where "all positions can be entered without entering into the dilemmas" (Partridge 2007 p 98).

Open dialogue approach:

In Finland Arnkil and Seikkula (2011) have been developing techniques for engaging with multi-problem situations that pull in professionals from various agencies around them. Working mostly within adult mental health services with young people in acute severe psychiatric crises such as psychosis, they facilitate Network Meetings with professionals and family members throughout treatment. Patients are invited to treatment planning meetings from the beginning. The open dialogue approach that

they developed has now become institutionalised in Finland's mental health service and has shown impressive results in reducing the rate of admission to hospital for patients diagnosed with acute psychosis (Seikkula 2003).

They describe their practice as "a network-based language approach to psychiatric care" drawing on "Bahktin's dialogical principles and rooted in Batesonian tradition" (2011). They see "dialogue as the condition for the emergence of ideas (2005 p 465) while acknowledging that "by its very nature, dialogue is unpredictable and therefore particularly threatening for people struggling with trauma (2005 p 466). Unlike solution-focussed practitioners who strive to positively reframe negative symptoms, open dialogue reinforces the value of "attunement" (Stern 1974, Trevarthen (1992) to participants in the moment, with team members being "acutely aware of their own emotions resonating with expressions of emotions in the room" (2005 p467). Without using the term "containment", they describe the importance of providing "reassuring predictability about the intervention process (2005 p 467). Clinicians adopt a "dialogical" stance, bringing all protagonists in a meeting to listen respectfully to every voice and fostering conversations between some participants to be heard by the others with the aim of "constructing a new shared language" and offers "a healing alternative to the language of symptoms and difficult behaviour" (2005 p.471).

The team has undertaken a number of comparative studies that are showing good results in reducing the rate of admission and length of stay in psychiatric hospital. Fine-grained qualitative analyses of Network Meetings have also identified three important principles to measure successful outcome: "tolerance of uncertainty, dialogism, and polyphony in social networks".

Although the dialogical approach has been developed in the therapeutic context, the theory and techniques developed by Seikkula and his team to provide a safe thinking space for families and professionals could be useful in the family justice system. Their adaptation of Vygotsky's idea of "zone of proximal development" (1986) provides a fitting analogy for the relationship between professionals and family members as a "scaffolding" to develop a joint understanding of a complex situation. However, one of the characteristics of the dialogue is that it is intrinsically unpredictable and "unfinalisable" (Bakhtin 1981). It therefore remains to be seen how this practice would adapt to the contested world of care proceedings. Such practices and systems that are designed to encourage round table discussions between parents, professionals and judges such as the French and Scottish systems allow the possibility of combining therapeutic discussions with the authority of the law. But "this system only comes into play if a parent accepts the reality of the child protection concern of the local authority" (Cooklin 2003 p 4).

Network therapy

Seikkula and Arnkil credit the practice of network therapy developed in the 1970s (Speck, R.V. & Attneave, C. 1972), the early ecosystems work of Auerswald (Hoffman 2002) and the family-plus-plus-system approach of Evan Imber-Black (1998). Imber-Black started to talk about multi-agency families instead of multi-problem families to point out that "complexity is not a function of the client world alone" (Arnkil 2011 p 48).

Social network analysts "developed empirical methodologies to examine patterns of relationship between individuals in social structures in order to explain how the social networks affect individuals' actions, beliefs or attitude" (Kirke 2009 p 133). They "assumed that individual action can be explained by the social structures in which individuals are embedded and the processes at work in those structures" (p 132).

The model has been influential in social work (Seed 1990) in the area of social support and network building. A number of concepts have been developed to map, understand and improve social networks that can be helpful to the court in providing useful information about children's social context. The emphasis on structure is attractive but is unlikely to fit with the courts emphasis on individual responsibility.

6. A brief outline of a theoretical map for this research

Most of the projects described in the previous section are grounded in particular theoretical frameworks that carry little weight in the court arena (Kennedy 1997). This highlights the complex theoretical territory of this research and a terrain that is familiar to social work practitioners used to working across theories and "knowledges" (Flaskas 2007). Before moving on to the research itself, I would like to conclude this chapter with a brief overview of the theoretical map that guided the analysis.

Systems and complexity theories

Systems and complexity theories (Chapman, 2004, Munro 2010, 2011, Stevens and Cox 2008) go some way towards explaining why attempting to devise long-term plans for children tends to be so complicated as any change in a part of the system is likely to have unintended consequences that reinforce themselves through complex feedback loops (Munro 2010, Stevens & Hasslet 2007, 2008). Complexity theory suggests that

> "the complex adaptations system has a pattern, and from this pattern a range of likely outcomes can be indicated, but not predicted. Indeed, some of the outcomes will be unforeseen. Given the dynamics and live nature of the complex adaptations system, linear analysis of risk is inappropriate. Non-

> linear approaches to working with the risk much more relevant to the real nature of the system surrounding the child" (Stevens 2008 quoted in Barlow & Scott 2010 p 20).

They conclude that

> "overall, in terms of safeguarding, complexity theory suggests children are part of complex systems that are neither completely deterministic nor completely random. The implication of this is the need for organisational structures that enable practitioners to work within such boundaries of instability, and (at the same time) encourage ways of working that recognise that structural measures may not suffice to protect children" 2010 p 21).

She also suggests that "organisations need to develop a sense of dynamism within the system (…) have a high degree of tolerance to working within the boundaries of instability or intolerance, and develop the confidence to move away from the risk averse linear approach towards complex adaptive theory".

Family therapists working within a systemic framework have long encouraged a therapeutic stance based on the principle of Both/And instead of the Either/Or standard dominant in natural positivist sciences (Larner 2004, Goldner 1992). Larner for example describes a collaborative stance where "narrative and science, qualitative and quantitative research, modern and postmodern perspectives sit together as a necessary tension, sharing an investigative, ethical and pragmatic curiosity about what is helpful in the difficult work of therapy" (2004 p 34).

<u>Psychoanalysis</u>

Psychoanalysis offers an analytic framework for understanding human beings in all their complexity "including violence, aggression, sexuality and envy" (Trowell & Miles 1999 p 138) and has developed a number of theoretical concepts to interpret unconscious processes, personality development and group dynamics. Bion's analysis of thinking (1967) (and attacks on linking and thinking) has been particularly helpful in providing a sophisticated analysis of group processes with concepts such as containment, splitting and projections that have become part of common parlance and, together with Klein's "depressive position", later contributed to Britton's definition of the "third position" (described as a "mental space from which the *subjective self* can be observed having a relationship with an idea" 1989 p 13). Andrew Cooper has written extensively about the application of psychoanalytic ideas to child protection and the law. In a study of "anxiety and child protection work in two national systems" he argues that

> "the structural split between the social work and legal part of the English child protection system… cannot be bridged when necessary and becomes a

> channel along which the unconscious anxiety of social workers flows and proliferates. Social workers are stuck on one side managing both the care and control dimensions of child protection work, while the law is on the other disposing judgements from a safe distance" (1999 p 114).

He uses Freud's description of the "ego as a frontier-creature" to epitomise the complex position of social and legal institutions and the emotional push and pulls that personnel who constitute them can be subjected to. He argues that

> "the task of responding at the frontier is about containing this effect, without colluding; it is about holding the line through the use of authority, but with minimum necessary resort to accusatory, punitive, adversarial and revengeful modes of conduct" (2000 p 262).

He quotes Bion's theory on thinking and the development of the sign "O" to denote his view that "the absolute facts can never be known" (1967 p17 in Cooper 2000 p 258). He uses examples from literature to argue "for an aesthetic stance towards therapeutic or welfare practice in child abuse and protection" that has "the ability to condense multiple perspectives into a single, circumscribed and unified field of experience without loss of the specificity attaching to the different dimensions comprising the totality" (2000 p 244)

Psychoanalytic concepts have been used effectively in the field of conflict resolution. For example the psychoanalyst and negotiator of the Good Friday agreement in Northern Ireland Lord Alderdice reminded participants at a conference on the Israeli-Palestinian conflict about the importance and complexity of creating a space to think (2007 p 7). Using Freud's concepts "repression and defensive organisation" he emphasised the importance of stakeholders being able to express strong feelings in order not to act on them. Within the child protection context, this means having a space to express thoughts, actions and emotions that may be unacceptable or dangerous in order to open them up to scrutiny and to consider the possibility of change.

While psychoanalysis provides a useful explanatory model to understand the impasses often reached in child protection decision making processes, it has had only limited influence in the court work itself (Kennedy 2005).Two experienced psychotherapists working in the family justice system suggest that this is because "psychoanalysis works slowly, struggles to live with uncertainty, does not make judgements and tries to help the individual, couple or family arrive at their own thoughts, feelings and decisions. So it inevitably stands in opposition to or in conflict with elements of society that want, need and demand answers and decisions" (Trowell & Miles 1999 p 138). Volkan also argues that "psychoanalysis remained primarily an investigative tool of an individual's internal world… and largely failed to

consider how mental representations of existing historical/societal/political processes influence the personality development of individuals" (2010 p 45)

Dialogical theories

More recently dialogical theories have provided an alternative way of understanding non-conscious experiences (Stern 2004) within a social constructionist perspective that visualises personality not as a psychological structure inside us, but as "actions that happen in speaking" (Seikkula 2008 p 483). Interventions based on dialogical theories emphasise the need for the "polyphony" of voices to be heard and understood, arguing that "when experiences are formulated into words, they are no longer unconscious" (Bakhtin, 1984 in Seikkula 2008). In their analysis of decision-making processes in Network Meetings from a dialogical perspective, Arnkil & Seikkula (2011) identified the tendencies of multi-disciplinary groups towards "monologism" when professionals may "compete over competences" (p 62), alter their analysis of the problem to fit with common definitions, place limits on collaboration to protect their own boundaries and stress loads and get stuck in isomorphic ,repetitive patterns of interactions that often mirror their relationship with the family (p 66). They also discuss the importance of emotions and relationships in communication processes arguing that demonstrating emotions should not be inhibited in Network Meetings. "Emotions bind (what is) said with the embodied experience and thus the intensity becomes more effective" (p 149).

Foucault,

While dialogism emphasises the importance of the present moment (Seikkula 2008), the seminal work of Michel Foucault, particularly his critical historical analysis of the development of knowledge and practices in the domains of the law, mental health and morality has been highly relevant to this research and provides a critical backdrop to the analysis of power, knowledge and the place of the "subject" in social structures.

Foucault, in discussion with Rabinow (1984), refused to "separate knowledge from power that, together, form the disciplinary technology that he analysed in detail indiscipline and punish". He demonstrated how "the discourse of life, labour, and language is structured into disciplines" that could change abruptly at several junctures in history (Rabinow 1984 p 9). He argued that

> "the entry of medicine, psychiatry, and some social sciences into legal deliberations in the 19th century led in the direction of what Foucault calls systematic normalisation of the law - that is, toward an increasing appeal to statistical measures and judgements about what is normal and what is not in a given population, rather than adherence to absolute measures of right and wrong" (1984 p 21).

Foucault's analysis of power is complex and multi-faceted. He questioned why power was always seen in the negative:

> "…a historical problem arises, namely that of discovering why the West has insisted for so long on seeing the power it exercises as juridicial and negative rather than as technical and positive" (Foucault 1980, p 121).

Flaskas & Humphreys consider Foucault's idea of power not as unilateral but "intensely interactional" and displayed in all aspects of everyday life, in inter-actions, social practices and discourses".

> Foucault "considered that power could have a positive and productive element to it" (Flaskas & Humphreys 1993, p 38).

However Foucault remained sceptical of the idea that "power can be a consensus, a realm of inter subjectivity" as proposed by Arendt and Habermas (Rabinow 1984 p 377). He argued instead that that efforts in many democratic countries to introduce more informal, administrative forms of justice… means in reality that a certain form of authority is given to other groups and leaders which "are not necessarily valid, owing to the simple fact that they are not state-sanctioned and do not pass through the same network of authority" (p 379).

> "the consensus model is a fictional possibility" but "people might nonetheless act according to that fiction in such a way that the results might be superior to the action that would ensue from the rather bleaker view of politics as essentially domination and repression" so that "although the utopian possibility may never be achievable, nonetheless, pragmatically, it might in some sense the better, healthier, freer"… "if we assume that the consensus is a goal still to be sought rather than one that we simply throw away and say it's impossible to achieve" (p 379)

This suggests that power needs to be understood in its historical and relational context and through language and social practices.

<u>Family Therapy</u>

Early family therapists focussed on family structure (Minuchin 1974) and patterns of relationships based on cybernetic principles (Bateson 1971). In the 1980s the introduction of second-order cybernetics (Hoffman 1981) emphasised the impact of the observer as an active participant in the system. From a social constructionist perspective family therapist paid attention the positions that clinicians can adopt or be placed into through dialogue and language (Campbell 2006). In an influential paper Lang et al (1990) described the way clinicians can adjust their position to engage a family system at different levels that they called domains of production, explanations and aesthetics (Partridge 2007).

More recently a number of writers and practitioners have been looking at reflective practice and the space between systemic, narrative and psychoanalytic theories to understand the therapeutic relationship in conflictual, risk-laden and anxiety-provoking situations (Flaskas 2002, Mason 1993, Pocock 2005, Rober 1999). Flaskas' exploration of impasses in the therapeutic context "in terms of stuck narratives, and as a challenge to curiosity and the capacity to think" (2005 p 112) may be helpful in the court context. She defines impasse as "an emotional and interactional constellation that can gather around (and involving both) the family, the therapist and the therapeutic relationship" (2005 p 113). She argues for "the development of a discipline of reflection that challenges ourselves about our own stuckness during the impasse". This involves processes of "thinking and languaging that are themselves related to emotional experience and the ability to both feel contained and be containing" (2005 p 123). David Pocock describes emotion as "the energy that connects us with ourselves and others at the level of body and mind" (2009 p 95). Research on the common factor suggests that that 40% of changes in therapy could be attributed to the quality of the therapeutic alliance (Asay & Lambert 1999) which is firmly based in the emotional and relational territory. Change is therefore more likely to occur in "a therapeutic macro culture in which blame and condemnation of strong feelings and behaviours that enact or replace such feelings are eschewed in favour of a search for emotional understanding" (Pocock 2005 p 133).

7. The story so far

The family justice system deals with complex situations that are deemed unsafe for children and therefore have to change in order to address their needs. Local authorities apply to the court under Section 31 of the Children Act 1989 when parents/carers have been assessed in the welfare domain to be unable to exercise parental authority and/or are unlikely to meet the children's needs without a higher level of compulsion provided by the law.

In a number of cases the authority of the court with the appointment of a judge, children's guardian and legal representatives brings a level of structure, order and containment to the system that allows for long-term decisions to be reached in the best interests of children. In other situations courts appear to struggle to reach satisfactory disposals as findings, evidence and decisions continue to be contested in an adversarial system that has reached impasse. Compulsion plays a significant role in the child protection system and as a number of theoreticians have argued, the imposition of structure and power does not have to be only negative (Foucault 1980, Giddens 1984). Indeed a number of child protection enquiries in England and Wales have been critical of the local authority's failure to intervene in families to protect children (Laming 2009) and there are clearly situations when interventions have to be imposed. However, this is not without consequences and the imposition of

structures does not guarantee the safety of children (Ferguson 2009). As Byrne & McCarthy argued,

> "*acceptance of professional viewpoints and consensus often reflect obedience rather than understanding or agreement of the disadvantaged party*" (1995 p 51).

A number of researchers into the application of the Children Act 1999 have also commented on the negative impact of statutory interventions and the difficult transition from a "child in need" framework to "child protection" which often increased polarisation and left both parents and professionals bruised by the intervention (Farmer and Owen 1995). Research has shown consistently that in the majority of cases referred to the court, the relationship between professionals and families had broken down with allegations regarding the failure of parents to co-operate with welfare and child health professionals (Brophy 2006, Jhutti-Johal and Owen 2003). How can a fair, genuine and comprehensive assessment of family's capacity to change in complex situations be undertaken in such a polarised context?

Recent reviews have outlined a number of difficulties with the family justice system that have so far been addressed through structural reforms with only limited success (Jessiman, 2009, Ferguson 2009). One of the messages from the literature review is that in spite of the considerable thinking and financial investment in the family justice system over the last 20 years, there do not appear to be any easy solutions to the problems identified and it is unlikely that any one theoretical approach will sufficiently address the complexity of working with polarised systems. As Cooper argues

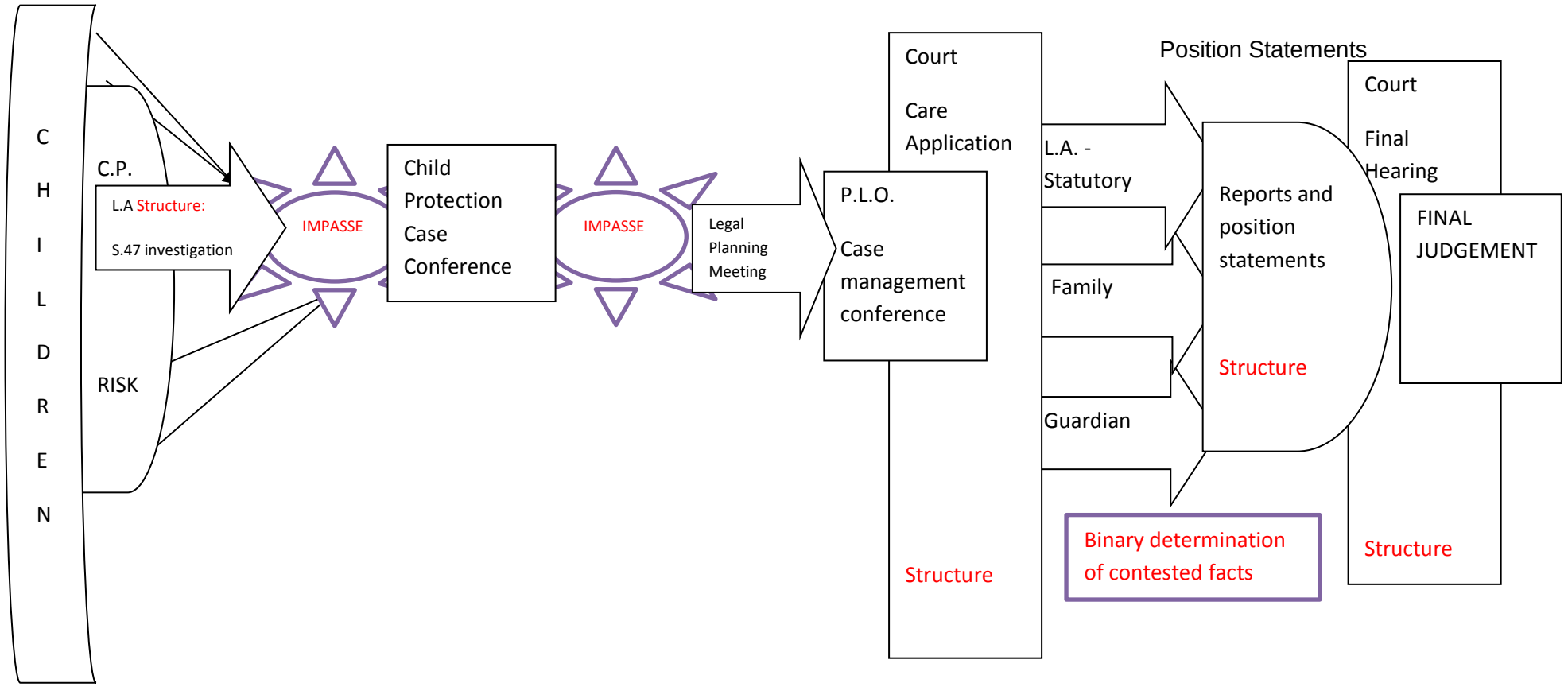
> "no court system can offer guaranteed access to the truth for children or adults in any judicial domain. While it is the court's responsibility… to reach a decision in the best interest of the child, there is no absolutely privileged methodology or perspective through which this can be achieved. Decisions in such cases can only be the product of a balanced and impartial assessment of a complex range of considerations, leading to a judgement" (1999 p 172).

The literature review suggests that this research is dealing with the meeting of rigid systems that are drawn together to protect and attempt to meet the needs of vulnerable children. We have identified the justice system and the welfare system but it is also about family systems that can appear unable to change or to have reached a rigid state, maybe in part as a result of the contact with statutory services. We have explored a number of alternative models that attempt to adjudicate, investigate, mediate, co-ordinate, encourage dialogue or bridge the gap between these three systems. What these have in common is the search for a space to think through complex, emotionally-laden and contested situations in order to help practitioners reach the best decisions for children within legal, humanitarian and evidence based frameworks.

Research into the family justice system has so far focussed on structural changes. Apart from Brophy's observation of proceedings undertaken as part of a study of child protection in a multi-cultural society (2003) and the on-going review of the Family Drug and Alcohol court (Harwin 2011), there has been few observation studies or process analyses to help understand the dynamics at play in care proceedings and decision making processes (Brophy 2006, Healey 2011). Network Meetings therefore provides a unique opportunity to observe what happens when families and professionals meet together without lawyers under the aegis of the court. They take place at the border between the domains of the court dominated by structural preoccupations and the domain of the clinic valuing experience, dialogue, emotions and relationships.

As well as analysing the characteristics of justice and welfare systems and exploring the dynamics between stakeholders involved in Network Meetings, this research aims to ascertain what might be going on in this space through a number of theoretical lenses that may capture something of the emotional, relational and systemic qualities of these meetings. It will then consider whether the practice of the Network Meeting may be developed to improve stakeholders' capacity to think in order to gather and evaluate the information required by the court to make the best possible decisions for children.

Diagram A: Child protection process from identification of risk to care proceedings



Chapter 3 Epistemology, Methodology and Analysis

1. Introduction

This chapter describes the choices that I made in developing the methods of data collection and analysis during this research. I was interested in the content and context of Network Meetings but I also wanted to capture something of the process (what was going on in these meetings) at the level of language, relationships and emotions. This meant collecting data at these three levels of observation and identifying methodologies to address these different layers. My research proposal suggested a multi-method design to analyse each dataset with a different methodology:

- Discourse analysis or dialogical sequence analysis (Stiles, W,B et al. 2006) to analyse language and dialogue
- Soft system methodology (Checkland 1998) or systemically informed significant-moment Analysis (Elliott & Shapiro, 1992) to map out relationships and unpick interactions between participants
- Psychoanalytical observation research methodology (Rustin 2006) to explore themes and processes which may be outside of participants' awareness.

In practice it became difficult to differentiate between these three levels of observation and analysis which together constitute the nature of experience (Bruner 1986). While each provide a fine-grained analysis of language, relationships and emotions, the multi-method design did not sufficiently capture the holistic standpoint that I was looking for nor the lived experience of participants. The search for a methodology capable of accessing whole and parts, systemic, dialogical and psychoanalytic processes within the ethical and practical constraints of court proceedings led me into a complex epistemological journey that I will attempt to describe in this chapter.

The geographer David Harvey, writing from a dialectical perspective offers an interesting take on the unity of knowledge in the social sciences. He argues that "all totalising systems of thoughts have been found wanting" (Harvey 2000 p 225). The best that we can achieve is a search towards new kinds of synthesis that require "empathy and translation as well as objectised observations" across and between qualitatively different but related areas of social and ecological life (2000 p 229). Such enquiries necessarily incorporate the building of ethical, moral, and political choices. His concept of the "insurgent architect" has resonance with the role of the expert in care proceedings as well as that of the researcher in "confronting unbridgeable discontinuities between texts, between languages and between people" (2000 p 244) in order to reach firm recommendations and take decisions "in the clear knowledge of all the limitations and potentiality of unintended

consequences". This position requires a meta-perspective on the whole process informed by an ethical and reflective stance with clarity of authorship.

This chapter will therefore start with a review of the legal and epistemological considerations that influenced the choice of data collection and methodology.

The second section will focus on the design of the study starting with the choice of qualitative methodology. I will discuss some of the challenges involved in researching processes in meetings, therapy or groups. I will consider discursive methodologies developed to analyse the quality of language in social encounters and phenomenological methodologies that aim to capture experience. This brief review will lead to a description of the three methods of data collection and the characteristics of the sample.

The third section will describe the four steps of the analysis process (Figure 2) and the chapter will conclude with a review and discussion of the methodology in practice.

2. Context, legal constraints and epistemological considerations

a. Legal constraints

Network meetings in this study take place under the aegis of court proceedings. Therefore any new information about the case gathered in the process of the research is subjudice and could be subpoenaed to court. Legal advice suggested that the scope of the research should therefore be limited to data available to all the parties involved. This was confirmed by the ethics committee who granted consent to the research on the basis that participants were not interviewed by the researcher outside of these meetings. This ruled out the initial proposal for focus groups of parents and professionals involved in those meetings to discuss findings. The emotional and contested nature of the work also influenced the choice of audio recording over the preferred but more intrusive use of video. The information sheet for participants was reviewed by legal advisers (Appendix B) who confirmed that the current research design would not have any impact on the court process but that the audio recording of meetings could be subpoenaed by the court. Although this did not happen, the legal context of this research remained apparent throughout. Not only did this restrict the choice of research method, it also influenced the analysis process as the nature of the judicial system and the high stakes involved in the decisions of the court added to the pressure of "getting it right". The position of the researcher seemed to have strong resonances with that of the clinician preparing for a complex assessment for the courts, facing up to the volume of information already gathered by other professionals and the complexity of decision-making processes. The urge to uncover "the truth" with credible research tools in order to convince a judge/examiner was at times overwhelming and highlighted the need for a comprehensive review of epistemological positions and reflexivity.

b. The epistemological terrain

The domains of court and medical expertise are dominated by positivist/scientific assumptions to establish "the truth" that is frequently based on universalist assumptions (Maitra 1996) and binary oppositions (Cooper 2000, 2007). This may explain how the role of the "expert" in care proceedings has become dominated by medical practitioners including psychiatrists whose training, grounded in positivist methodologies is likely to offer a better fit with the language and practice of the court (Brophy 2006).

The domains of CAMHS and psychotherapy on the other hand has in the last 20 years been influenced by a social constructionist epistemology which lies behind much of the researcher's family therapy training. The theory proposes a social world that is constantly constructed through language and can only be known in the context of our relationship to it and the language that we give it (Gergen 1998). As Bourdieu (1998) reminds us a viewpoint always requires a point from which to view and each actor occupies a point in social space that is not voluntary. Within the court process a social constructionist perspective can bring into focus the complex narratives of people's lives viewed from the perspectives that people have of themselves and through the powers of the stories that people have about them (Flaskas 2009 p.6). Social constructionism contributes to an important analysis of the nature of power and knowledge (Foucault 1984, Flaskas 1993) but it can also be seen as a "relativist epistemology" that "gives no help at evaluating whether one set of ideas is a better description of the world than another" (Pocock 2009 p.96). Within the court context the theory does not offer universal standards by which to judge "truth" (Howe 1996). This epistemological difference is likely to have contributed to the reluctance of CAMHS practitioners to enter the court arena and feeling uncomfortable with the role of "expert" (Fyvel & Mandin 2003).

Social constructionism has had an uneasy relationship with social work practice (Parton & O' Byrne 2000). David Howe argues that social work used to be part of "organised modernity" which he defines as "explain it, order it, control it and improve it", but over time became a profession which could "both judge the actions of others and seek to treat those actions, control and cure, embrace the judicial and the therapeutic" (1996 p.80). Social work can be said to occupy the space in between these two epistemologies. It has been influenced by social constructionist theories (Parton 2000) and maintained a critical/radical outlook (Gambrill 2012). However the role of social work remains grounded in practice where difficult decisions have to be reached and sometimes imposed in emotionally charged circumstances, using the best available evidence and judgement of professionals (Cooper 2000).

These epistemological dilemmas had a strong influence on the research process and choice of methodology. I became aware of the pull and push of these different

domains. The territory of this research appeared at times bounded by the "legal positivism of the court in the pursuit of forensic truth" and concrete decisions (Cooper 2000), by post-modern considerations of the welfare system about the nature of power, local knowledges and multiple perspectives constructed through language Flaskas 2007), and by the emotionally charged experiences and relationships between the people involved. In this context critical realism (Bhaskar 2008, Davies 2008, Lopez and Potter 2001) seemed to offer a more fitting epistemology that

> "provides a model of the way in which the world is socially constructed, which recognises the significance not only of the individual and their narratives but of the objective world that exists independently of our ability to know about it and that constrains the activities of individuals". It "provides a theory of human agency while addressing the structures that determine, constrain and oppress our activities in a way that social constructions precludes" (Barlow & Scott 2010 p 22).

The critical realist position contends that "there is a social reality out there, separate from our knowledge of it, which is nevertheless accessible to investigation and understanding" (Davies 2008 p 254). The researcher gets to know something of the social reality through being a part of it and through "a series of mediations between different constructions of reality" (p 255), including his/her own. A critical realist position also addressed the reflexivity of the researcher and the place of emotion and experience in representing the social world (Pocock 2009)

3. The study design

a. The research paradigm

This project is an exploratory research based on detailed observations of dynamics at play in complex meetings, an area that has been under-researched (Brophy 2006, Healy et al 2012). The research question is to "identify processes in the relationship between stakeholders involved in Network Meetings and more generally in court mandated parenting assessments". The aim is to generate understanding and knowledge of the dynamics between stakeholders in complex child care proceedings by observing the relationships between some of the participants attending a one-off Network Meeting. This means capturing a synchronic picture of the state of a particular system (a Network Meeting) using different levels of observation and understanding (language, relationships/dialogical patterns and emotions) which could inform a diachronic understanding of a wider system (legal, professional, socio-political context). A secondary question is to generate a set of clear guidelines from this close study to inform practitioners in the task of creating greater openness in order to maximise the potential for service user involvement, provide opportunities to assess change and improve decision-making in child care proceedings

Neither question aims to test a hypothesis in the positivist tradition but looks towards developing a "thick description" of social phenomena in their real environment at the levels of content, process and context. Using Ritchie and Lewis' (2003) classification of the function of the research (p 27) this can be described as:

- contextual ("describing the form of what exists" e.g. the shape of the meeting including relationships and emotions observed)
- explanatory ("examining the associations between what exists" e.g. similarities and differences between different meetings and professional groups, between legal, family and professionals discourses, between levels of power, influence and positions)
- evaluative (appraising the effectiveness of the meeting)
- generative (aiding the development of theories, strategies or action).

All of these lend themselves to inductive qualitative methodologies with the aim of understanding the processes involved, developing the practice within my own agency and considering its applications to other contexts. Although historically qualitative approaches have been frowned upon by many researchers and by evidence-based practice reviews that prioritise randomly controlled trials and other quantitative methods (e.g. NICE guidelines, DSM (American Psychiatric Association. (2000), there is now increasing evidence of their value in understanding complex processes within existing or natural settings (Midgley 2004).

Qualitative methodologies can provide "a detailed but systematic approach to a small number of cases with the aim of developing hypotheses or theories that are grounded in the data itself, derived from a constant interplay between observation and understanding" (Midgley 2004 p97). The data of qualitative research is most often language (documents, interviews, observations), data which may well derive from what Darlington and Scott (2002) have called 'the swampy lowland of practice', where 'there are rarely control groups, where operationalising key constructs in behavioural terms is highly problematic . . . where the politics of the setting are often overwhelming and where values and ethical issues are critical and complex' (quoted in Midgley 2004 p 92). The small number of cases involved can make it difficult to generalise findings but the depth of analysis can offer greater insight into processes involved in social interactions.

b. Process analysis research

In his review of research in the child psychotherapy field Midgley (2004) identified three types of data collection in qualitative research; the use of notes based on fieldwork observation, interviews with participants and transcripts of real dialogues or conversations (p 94), which in the field of family therapy has often been supplemented by audio or video recordings of sessions (Seikkula 2008). The majority of qualitative research projects have until recently favoured interviewing as

the main collection tool but there is an increasing interest in the psychotherapy field in direct observation of therapeutic encounters to examine detailed processes of change within sessions. Midgley identified two main strands in this type of qualitative research (2004 p 95). A “phenomenological” strand focused on the experience of participants and a “discursive” strand that adopts a social constructionist focus on language as constitutive of the way people make sense of themselves and their social worlds (Burck 2005, Shotter 1993). Most process analysis research in psychotherapy has adopted discursive methodologies while phenomenological methodologies (interpretative phenomenological analysis (Smith 1999) have been popular in analysing semi-structured interviews or focus groups.

i. Discursive/dialogical methodologies

Dialogical methodologies include conversational analysis (Antaki et al 2003) that examines in minute detail the organisation of talk in social encounters and discourse analysis (Potter and Wetherell 1995) that focuses analysis on fragments of texts that have a bearing on the research question. Burck summarises three steps in discourse analysis; to examine “how language is used to construct the ideas or information”, to identify “inconsistencies of meaning in the constructions and the assumptions they reveal” and to “examine what the discourse achieves” (2005 p249).

Jaako Seikkula (2008), in Finland has been developing dialogical methodologies to examine Network Meetings similar to the subject of this research. He and his colleagues have adapted Dialogue Sequence Analysis (DSA) to explore some of the dialogical qualities of social encounters. They draw on theorists such as Bakhtin, Vygotsky, and Voloshinov who question the view of the individual as a coherent, integrated, singular identity (Baxter 2004) to emphasise the way in which the individual who is constituted through the act of dialogue (both internal and relational) has multiple identities (Seikkula 2008). Following Bakhtin’s assertion that no single utterance has meaning in itself, it can be understood only as part of a chain, (as a response to a preceding utterance and in anticipation of a response from another), they search for meaning “not within either party’s head, but rather, in the inter-personal space between them” (2005 p 465). In practice, they observed and video recorded a large number of Network Meetings between parents and professionals. They analysed recorded sequences of dialogue between people and scanned the material for the qualities of open dialogue identified by Bakhtin. Sequences of dialogue were rated for the level of “dominance” between participants, the prevalence of “dialogue over monologues”, and the quality of language as “indicative” (factual) versus “symbolic”. Validity was increased by comparing the analysis of two or more researchers from the same material.

Discursive methodologies, particularly Seikkula’s have been influential in the design of this research particularly in the decision to audio record and transcribe meetings

and in the first phase of the analysis of language and dialogue during meetings. However it was rejected as the overarching methodology for a number of reasons. It is rather technical in its application, with a focus on the detailed sequences. The analysis appears to start with an assumption of an ideal type of Network Meeting with ideal qualities drawn from dialogical theories, which may or may not apply to the type of meetings in this study. Also the emphasis on language can be criticised for not taking sufficient account of "the emotional investment individuals make in particular discursive positions" (Willig, C 2001 p 118). As Krause suggests

> "meaning is not co-terminous with language and, indeed, might not be expressed adequately in words. The idea that meaning is developed and generated through representations in conversations or dialogue in the therapy room is, therefore, only half of the story. The other half is that meaning is generated in the relationship between those representations and knowledge that already exists" (2012 p 12).

ii. Phenomenological methodologies

Midgley has labelled the second type of process research "phenomenological". These focus on experience and involve an "attempt to get inside people's personal views of the world". This relies on "having access to thick, vivid accounts of people's perceptions and understanding of a particular experience" most often through transcripts of semi-structured interviews or focus groups (Midgley 2004). Language is seen as a window into a person's experience and the analysis of the data aims to capture something of the internal world of the participants, of the person-in-context, and an interpretation of meaning (Smith 1999). Research includes a search for the emotional and relational qualities of social encounters (Pocock 2009, Preston-shoot 1990). These are notoriously difficult to access. In his review of psychoanalytic infant observation research, Rustin (2006) asked whether this method "proved capable of generating new hypotheses or locating hitherto unrecognised phenomena in the field of mother and infant relationships and family relationships" (p 35). He found that although the method had been developed primarily as a training tool to "further individuals learning and self-development", it was proving to be a productive source of knowledge (p 50). Observations focus on the relationship between infants and their caregivers which "give rise to experiences 'in feelings' in observers" through the process of transference and counter-transference phenomena and on "the interpretation of actions and words deemed to hold more than one level of meaning" (p 38). The observer makes detailed contemporaneous notes of sessions that are discussed in depth in small but frequent supervision groups that help generate thoughts and identify patterns that may be outside of awareness.

The psychoanalytic observational method has now been adapted to study institutions. Hinshelwood and Skogstad (2000) identified four aspects of psychoanalytical observation which can be transferred to observing organisations; "a

way of observing with evenly hovering attention and without premature judgement, the careful employment of the observer's subjective experience, the capacity to reflect and think about the experience as a whole" and "the recognition of the unconscious dimension". They recommend that

> "the observer endeavours to keep an eye on three things (that together reflect the qualities that make up the culture of the organisation); the objective events happening, the emotional atmosphere and her own inner experiences - the whole area of what in the psychoanalytic setting would be called counter-transference" (p 22).

iii. Both/And

Ethnographers have long struggled in their attempts to capture human experience in their social context. Krause (1998) charts the development of ethnography from a preoccupation with "structure" (Radcliffe-Brown 1940) towards an emphasis on capturing the lived experience of participants (Geertz 1974, Turner, 1986 in Krause 1998). "Structure" refers to social patterns of interaction and institutions in a society that both emerge from and predispose the actions of individuals i.e. the norms, rules (written or unspoken), systems and patterns of behaviour, beliefs or relationships that underpin how we live. "Experience" refers to the way social situations are lived, felt and expressed (language) by participants. Accessing the experience of others raises complex methodological challenges as Turner reminds us of the complex relationship between reality, experience and expression and explores the distinctions between "life as lived, life as experienced and life as told" (Bruner 1986 p. 6). Geertz suggests that the aim of "ethnography is to describe how the physical movement comes to have meaning in these different ways and how these relate to salient cultural themes and structures" (1993 p 7 quoted in Krause 1998 p 16).

Anthropologists have also struggled with the nature of knowledge and understanding others. Reflexive ethnography (Davies 2008) proposes a subtle approach to these complexities informed by Bhaskar's critical realism in which

> "Human agents are neither passive products of social structures nor entirely their creators but are placed in an interactive and naturally reflexive feedback relationship to them" (2008 p 19)

Lengthy participant observation has been the main tool of ethnographers supplemented by collection of material, detailed field notes and in-depth interviews/conversations with insider informants. The task of the researcher requires both "involvement and detachment" (Davies 2008 p 5) and a capacity to adopt different standpoints. A "reflexive position" involves in and out movements from immersion in the experience of others, self-examination and standing back to reflect on the whole process in the context in which it takes place. Geertz's uses the concept of "thick description" to define the ethnographer's search for

> “the description of what someone is doing in terms of the meanings and all the possible meanings which could be given to that physical movement in the context in which it took place”.

The reflexive researcher asks “how do my emotional reactions (a kind of transference or resonance) helps me connect, attune and even guess what is going on” (Krause 2013 personal communication).

c. Summary: three methods of data collection

I wanted in this research to understand the context of Network Meetings as well as analyse the processes and meanings involved by capturing something of the language, relationships and emotions in each meeting. As the legal constraints prevented me from talking directly to participants I decided to use three methods of data collection.

- Audio recording meetings in order to have a verbatim transcript of what was said in meetings to access dialogical processes.
- Psychoanalytic observation as a primary method of data collection, following a two-year training in the method, to access aspects of the process that may not be directly visible/audible.
- Keeping a contemporaneous record of psychoanalytic observations supplemented by a diary of my thoughts, reflections, emotional reactions and my prior knowledge and experience in this field (inspired by ethnographic enquiries (Davies 2008).

Six Network Meetings were observed by the researcher in the room, over a period of two years. Meetings were audio−recorded and transcribed verbatim then anonymised. Straight after the meeting, I wrote contemporaneous descriptions of what I saw, heard, thought and felt was happening in the meeting. These detailed notes were discussed in a regular small supervision group located in the training institution. For the families who required an interpreter I checked the quality of translation with colleagues who spoke both languages. I also had access to referral details including the letter of instruction that provided contextual information about the family and professional interventions.

This choice of methodology provided an opportunity to triangulate findings at three different levels of perception (language, direct observation and reflection).

d. The sample (research in practice)

<u>Recruitment</u>

Cases were chosen randomly from the allocation list, primarily on grounds of availability and time. The two assessment coordinators in the agency where approached for initial consent. The information sheet (Appendix B) and consent form

(Appendix C) were sent to all participants via the lead solicitor. In two instances local authority solicitors refused to pass on information to participants, as they did not think this was their role. In both cases the social worker was approached instead and both agreed to circulate the information and consent forms to the parents, solicitors and professionals invited to the meeting.

The six meetings were chaired by a clinician (case manager) from the agency and attended by the parents/carers, a social worker and manager, a guardian and other professionals such as teachers, doctors and solicitors. Case managers usually oversee the assessment process from beginning to end.

A visual map of the stakeholders involved and their attendance at Network Meetings is presented as Figure 1 (p 8). The average attendance was 10 participants including one or two parents and between three and six professional agencies. Meetings lasted between 70 and 200 minutes. Chapter 4 will analyse the sample in more detail. I will introduce participants in Network Meetings, summarise their journey prior to the meeting, explore the characteristics of the sample and analyse the contextual information known before the meeting (see Chapter 4).

Method

The same room in the agency was used for all meetings. This was the first time families attended the agency following referral. Participants were asked to wait in the reception area until everyone had arrived. In the room, all sat in a circle with a small table in the middle. The researcher introduced himself to participants in the waiting area and asked whether they were aware of the research. All parents had been told about the research. Most had seen the information sheet but none had returned the consent forms which were signed on the day in the reception area.

On the day of the meeting, three families declined consent (see Chapter 4). Some of the professionals said they were not aware of the project. They were given the information sheet and all agreed and signed consent forms on the day.

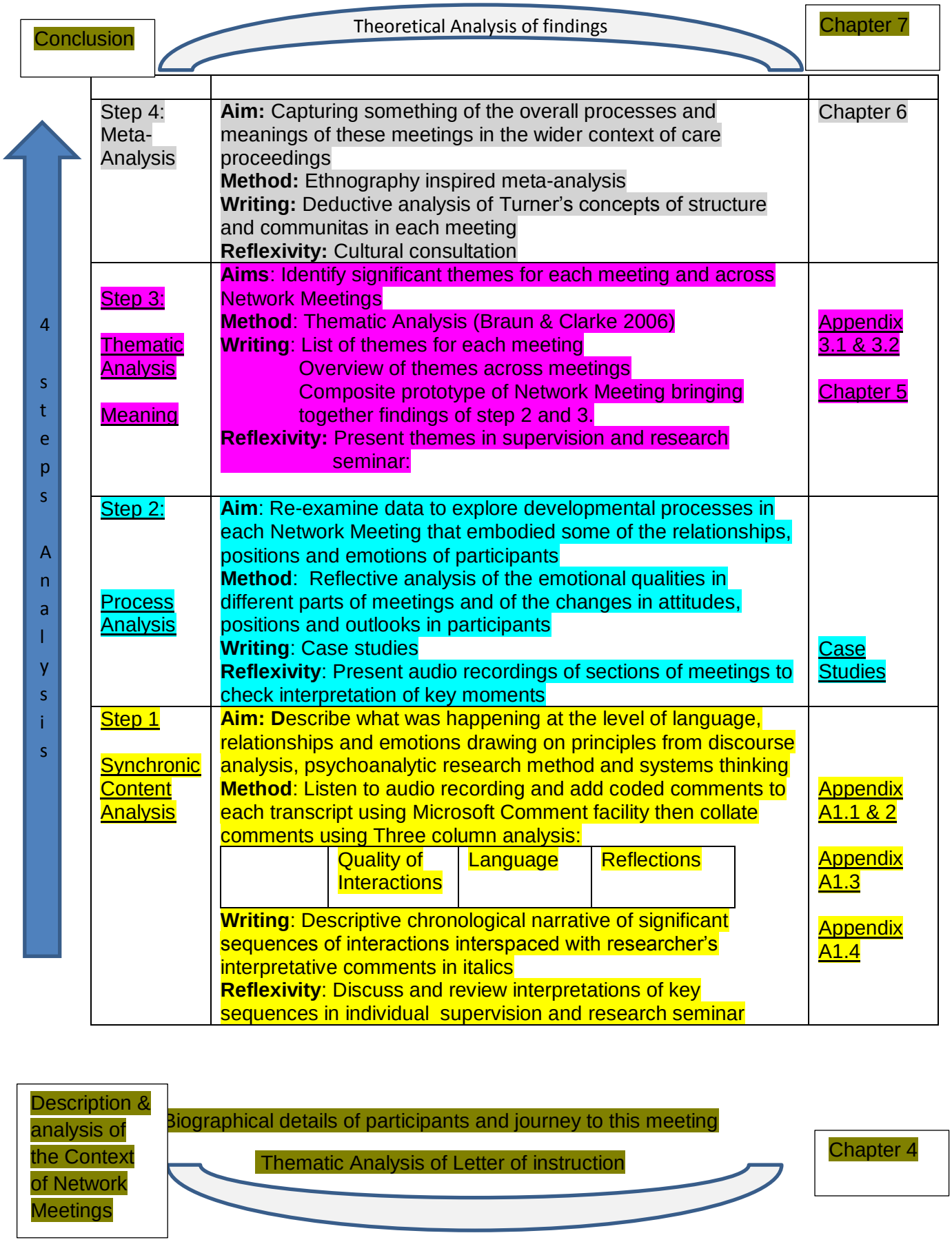
In the room, the researcher sat in the circle like other participants. I introduced myself again at the start as people were invited to do so by the chair. The meetings were audio taped with consent from all the parties. Participants were reminded at the end of the meeting that they could withdraw consent if they wished. None did.

Characteristics

The characteristics of the sample are explored in Chapter 4 and share many of the qualities identified in Brophy's research (2006) described in Chapter 2. The sample was also representative of the referrals received in the agency, in terms of ethnicity,

complexity and contested issues but not in the number of children in each family that was smaller than the average (1.5 instead of three).

Figure 2 The Four-Steps Analysis



4. Analysis

The analysis of data followed a number of distinct steps that evolved reflexively during the process of analysis, discussion in research seminars, supervision and reflection. A visual map of these four steps is presented in Figure 2.

a. Step one: analysing language, relationships and emotions - the three columns analysis

Step one aimed at a description of what was happening in each Network Meeting at the level of language, relationships and emotions drawing on principles from discourse analysis, psychoanalytic research method and systems thinking. I strove towards a synchronic descriptive analysis that maintained a distinction between what I saw, felt, heard and thought.

I listened to audio recordings with transcripts of dialogue and my notes from the observations. I used Microsoft's 'track changes' tools to add comments about my observations, emotional reactions and reflections to sections of the transcript. I coded each comment to preserve a record of the source material and the quality of the observations. A number of descriptors were identified to analyse processes at relational, dialogical and emotional levels of data (Appendix A1.2).

I developed a three column table to collate my comments in a chronological order that would allow for a synchronic exploration of likely patterns present in different parts of each meeting. I listened to audio recordings again to summarise what I thought was happening in different parts of meetings at these three levels (Appendix A1.3). The transcript was then broken into sequences and summarised.

Time	Main topic / contributor	**Quality of interactions (Who did what to whom)**	**Language/theme (What, why and how was it said)**	**Reflections (What do I make of it)**

From this analysis, a chronological descriptive narrative of the meeting was written with comments from the researcher (in italics) making explicit my interpretation of the processes observed (Appendix A1.4). This was discussed in supervision. A preliminary list of the significant moments was drawn up for each meeting (A3.1).

It seemed important at this stage to find a way of analysing the data that would both differentiate between the levels of observations and preserve a perspective on the whole picture. Although some researchers advocate a "toolkit" approach to research (Seale 1999) encouraging pragmatic positions over restrictive philosophical considerations (Silverman 2001 in Ritchie & Lewis 2003), this project aimed for a kind of synthesis or "holism" to understand complex systems (Harvey 2000 p 226)

while allowing for the researcher's own views, beliefs and positions to be made explicit and open to scrutiny. This first step had the advantage of bringing the observer into the frame of analysis by bringing my interpretations into the text while keeping a chronological description of the meeting and identifying likely significant moments (Elliott & Shapiro, 1992). It had benefits in reminding the researcher and the reader of the source of material and findings. However it remained cumbersome and grounded at the level of description that lacked an overview and analysis of patterns and themes prevalent in the six meetings. The amount of detail also raised concerns about confidentiality and the possibility of recognising people involved. In her own research, Charlotte Burck recognised the risk of systemic clinicians becoming overwhelmed by the enormous quantity of data gathered through their interest in "patterns, relationships and processes at so many different level of context that are considered relevant" (2005 p 240). She had analysed the material through three distinct methodologies (grounded theory, discourse analysis and narrative analysis) and demonstrated how each can highlight different aspect of qualitative research material and how each, "by necessity had to leave out aspects considered important to a systemic thinker".

b. Step two: process analysis - capturing whole and parts

Partly influenced by the research subject and the high stakes involved in decision-making in child care proceedings, I was reluctant at this stage to leave anything out. I chose in the second stage of the analysis to move up one level of abstraction towards a more interpretative and reflective analysis and attempt to summarise developmental processes in each Network Meeting. I could now explore in more detail "what might be going on" at significant moments in each of those meetings.

I re-examined the data and listened to audio recordings again considering two main questions:

1. What are the emotional qualities of the meeting as perceived by the observer and reflected upon in supervision?
2. What changes could be noted in the attitudes, positions and outlooks of participants?

These two questions attempted to address both the hermeneutic and discursive levels of process analysis as described in Section 2 above. I brought my observations notes with audio extracts of meetings to my university research seminar group in order to reflect on my interpretation of the processes and to explore counter transference and systemic pulls. This helped me identify significant moments when I was pulled out of the observer role and highlighted the impact of my prior knowledge of these meetings on my observations. I used my experience of this field of work to examine the position of different participants and consider the emotional dynamics of the meeting. I hypothesised about the systemic connections between

participants and their own contexts (e.g. extended family, community, organisations, institutions, justice system, professionals systems etc…)

I wrote case studies for each Network Meeting summarising the background of each family system prior to referral, describing what happened in the meeting, summarising my observations then offering an interpretative analysis of the emotional qualities in different parts of the meeting and of the changes in attitudes, positions and outlook of participants. The thesis' word limit does not allow space for the six case studies.

This second stage of the analysis identified a developmental pattern in each meeting with three distinct sections (introductions, summaries and Letter of Instruction) (see Chapter 5)

c. Step three: thematic analysis – accessing patterns and meaning

While the first two steps of the research focussed on individual Network Meetings, I wanted to understand something of the processes at play across meetings in order to hypothesise about the nature of Network Meetings in general and their place within the overall child care proceedings system. Thematic analysis (Braun & Clarke 2006) was chosen for its flexibility in accessing patterns and meanings across theoretical frameworks. It has been widely used as a qualitative analytic method within psychology but was only recently defined and reviewed by Braun and Clarke (2006). They describe thematic analysis as "a method for identifying, analysing and reporting patterns (themes) within the data" (p 79). It is sometimes described as grounded theory "lite" as it uses a set of procedures for coding data but without the theoretical commitment to develop new theory and without being theoretically bounded like IPA (Smith 1999) or discourse analysis (Antaki et al 2003). It is therefore a flexible methodology that can be conducted within both realist and constructionist paradigms as long as it is part of an on-going reflexive dialogue, with the researchers making their epistemological and other assumptions explicit (Braun & Clarke 2006 p 78).

Step three of the analysis followed a number of steps from the identification of recurring themes, to description and interpretation. I returned to the three column analysis and added a fourth in order to draw a preliminary list of themes for each meeting. I first produced the long list of themes that was later narrowed and refined to produce a description of the main recurring themes. Examples of the two lists drawn for Network Meeting one are included as appendix A3.1 and A.3.2.

Braun & Clarke (2006) describes thematic analysis as an "interpretive act" and a "recursive process" between data sets, identified themes and reflection *(*p 87*)*. I found it helpful to hold on to the three levels of observation through a focus on:

- The interpretation of processes involved and quality of interactions (what is going on?);
- The position of each participant to the meeting (How are different people responding in the dialogue?);
- The emotional flavour of meetings (how might people be feeling about it?)

A number of secondary questions arose during this analysis. For example I became interested in what prior knowledge participants where bringing to the meeting. My research supervision group also alerted me to significant moments when I seemed to be pulled away from my observer role or when the emotional tone of the meeting appeared to change. Although judges and solicitors are not involved in the meeting I became increasingly aware of their presence and started to ask myself about the relationship of the meeting to the court. The letter of instruction also appeared to take a central role in all the meetings and I started to question its significance. The themes identified reflect some of these questions. The list of themes identified in the analysis is summarised in appendix A3.3.

The thematic analysis was written up as a composite description of the six Network Meetings that forms the basis of Chapter 5. A hypothesis emerged about the place of structure and experience.

d. Step four: ethnography - structure and experience

During the analysis process, I found myself moving recursively between micro analysis of data and a more holistic perspective (informed by my interpretation of the data but also prior knowledge and experience of this field of work) which alerted me to the need to consider a fourth stage of the analysis and adopt a meta-position to the research. In the first parts of the analysis I had tried to maintain a disciplined separation between the three data sets (language, interactions, and emotions). Although it was often difficult in practice to separate these three levels, it is through reflecting on this very complex process that I became aware of the frequent intrusion of legal constraints both within the research process and the Network Meeting themselves. This alerted me to the need to consider structural factors as well as phenomenological and discursive processes. The analysis thus far lacked a top-down holistic perspective on the whole process and an overview of the possible meanings that may be attributed to what was going on in those meetings and in the wider context of care proceedings. I took inspiration from reflective ethnographic methodology (Davies 2008) to undertake a meta-analysis in the fourth step of the analysis to access the whole picture. Although legal constraints prevented me from discussing my observations with informants, as traditional ethnographic participant observation suggests, I wanted to capture an “experience-near” (Geertz 1974) perspective on the processes involved that also included the influences of the wider context, institutions and structures that emerged from the data.

An example of ethnographic research in social work has been the influential work of Dingwall (1983) in studying social processes in child protection. Their work started with in-depth case studies looking first at referral information then observing meetings between parents and professionals and questioning informants about the processes. Their "observational data furnished the base for inductive generalisations" that were "organised in a dialogue with a general theoretical apparatus developed from previous ethnographies". The list of topics identified from data and thematic searches was then explored in interviews (1983). Some of their conclusions have been influential in social work practice, including early findings about the negative impact of proceduralism and "the rule of optimism" that appeared to influence decision-making processes in child protection (1983 p 250).

The fourth level of this analysis was inspired by ethnography and particularly Turner's analysis of rituals (1967) in which he identified the concepts of "communitas" to capture the less tangible parts of human experience that were not sufficiently accounted for in anthropological studies of the time which tended to focus on structural analyses of social phenomena.

As many of the themes identified in the first two steps of this analysis suggested a dichotomy in the meetings between structural concerns (attention to procedures, rules etc…), and experience (engaging, checking people's understanding, encouraging dialogue etc…) (see appendix A3.3), the concepts of "structure and "communitas" emerged as useful descriptors to contrast the structured domain of the court with the more experiential domain of the clinic. Turner's definition of "Communitas" also provided a useful analytical tool to encapsulate aspects of human experience that I was attempting to capture through the three-column analysis of language, relationships and emotions.

The third step of the analysis therefore took the shape of a deductive analysis of each meeting through the lens of Turner's concepts of "structure and communitas" (1969) to capture some of the phenomena observed in Network Meetings with the former appearing dominant in the court domain while the latter seemed favoured in psychotherapy. I scanned each Network Meeting for evidence of "structure" and "communitas" and considered significant moments when the balance between the two seems most salient. These two concepts will be defined in chapter 5 and this analysis will form the basis of Chapter 6.

5. Writing up the findings

One of the recurring tensions during the analysis reflects the complexity of my research questions that required attention to micro analysis of processes, to individual life stories of families involved and the need to look at the whole picture in order to consider the place of Network Meetings within care proceedings in general.

I therefore found myself moving recursively from the particular to the general and from theory to practice. This created tensions in the writing of the thesis between a wish to preserve the singularities of each case (Yin 1984), the synchronic description of Network Meetings and the thematic analysis across Network Meetings.

I started by writing up the first three steps of this analysis as individual case studies to address the different levels of the analysis:

- context: referral information
- synchronic description: summary of events in the Network Meeting
- reflexivity: summary of the observer's notes
- process: summary of the process
- summary of the changes in attitude, positions and outlook
- significant moment and themes.

Word count and concerns over confidentiality of the material precludes the inclusion of all case studies. Instead the analysis was written up into a composite process analysis of Network Meetings in Chapter 5. Presenting the results of the thematic analysis within a synchronic frame has the advantage of preserving a perspective on the whole of the meeting. This addresses one of the criticisms of the coding process in thematic analysis that it tends to lose sight of the context (Braun & Clarke 2006 p.89).

Chapter 4 provides an overview of the context of Network Meetings and referral information. It also includes a "thematic analysis (Braun & Clarke 2006) of the letters of instructions. Chapter 6 returns to the individual Network Meetings for an ethnographically informed analysis of "structure and communitas".

6. Discussion

e. Research in my own organisation

In their recent exploration of the dynamics of insider research, Coghlan & Brannick (2005) conclude that "within each of the main streams of research, there is no inherent reason why being native is an issue and that the value of insider research is worth reaffirming" (2005 p 59). The challenge is for the researcher to make explicit his prior knowledge of the organisation and how it may inform the findings of the research. I did this by keeping a journal of my interactions with team members during the research and documenting any additional information related to the cases observed that I gathered during day-to-day contact. For example in the first stage of the analysis I recorded any discussions I had with chairs of meetings and the impressions I formed about the case. I also made notes in the three-column analysis of situations/interactions when my observations either supported or differed from my previous experience of such meetings. My background knowledge and experience of

the organisation contributed to an ethnographically inspired data collection. I discussed findings in regular research seminars held in the academic institution in order to check and reflect on interpretation of findings and to identify alternative readings of the material

f. The place of reflexivity in the method of analysis

As legal constraints prevented me from using formal ethnographic participant observation methodology, I had to find other ways of capturing the relational, discursive and emotional qualities of Network Meetings while keeping a meta-perspective on the processes at play both for individuals, teams and institutions.

Within the psychoanalytic tradition, Cooper and Loussada (2005) assert that research must include "careful registration of emotional experience"… "which can only be acquired via a degree of direct emotional contact with the object of study" (p.211). "knowledge of social life must be grounded in direct emotional as well as cognitive experience of social processes" (p 212). The concepts of transference and counter transference are used to capture and analyse data but Cooper emphasises the need for in-depth introspective analysis to be reviewed in regular small group research supervision, in order to "create a meaning beyond gossip or fantasy" (p.206).

From a systemic perspective Seikkula (2008) suggests that it is more helpful to talk about non-conscious experiences rather than of "the" unconscious and to view personality not a as a psychological structure inside us but actions that happen in speaking (2008 p 483). He uses the concept of the "polyphonic self" (Bhaktin 2007) to encourage therapists (and researchers) to consider the "inner voices of their own personal and human experiences (that) become a powerful part of the joint dance of dialogue" (2008 p 245).

In both psychoanalytic and systemic traditions, the researcher becomes part of the data under observation and self-reflexivity captured through inner conversations and/or interpretation of unconscious reactions becomes a crucial part of research. The way that I tried to access emotions in the analysis was to monitor my own emotional reactions and thoughts before, during and after meetings. I dictated my thoughts and observations as soon as possible and discussed my observations in a small regular supervision group that was also audio-recorded. I have incorporated a summary of the ideas and reactions of the group in Chapter 5. The analysis tended to focus on significant moments when I found myself being pulled out of the observer role, when I was tempted to intervene or felt strong emotional reactions (anger, fear, boredom, frustration, anxiety, pity, shame etc…).

Reflexive processes remain subjective and have to be made explicit and as far as possible open to examination in order to "critically examine the authority of the

authorship" (Krause 1998 p 12). I therefore included my interpretations of data in the case studies and as far as possible described my observations and emotional reactions (Alvesson 2000). I described the four steps of the analysis in some detail to demonstrate how I moved from a disciplined (structure dominated) separation between data sets towards a more phenomenological meta-perspective on the processes involved.

g. Reflection on the research process

As previously mentioned, I became aware in supervision that the position I tended to adopt as a researcher may have strong resonance with that of the clinician preparing for a complex assessment for the courts. As a practitioner, I have often noticed in myself a wish to identify validated tools to uncover "the truth" (e.g. evidence-based tools such as attachment interviews, story stems etc…) in order to convince a judge of the validity of my findings. However in practice I find that judges are often more interested in the credibility of the person giving evidence (Hickman 2009). In a recent court hearing I attended, the judge commented negatively on an expert's over-reliance on theory-led assessment tools which he argued unduly influenced the findings and created "blind spots" in his assessment.

Similar patterns emerged during this research as I noticed myself becoming seduced by one method or the other, only to be disappointed by its partial perspective on the data collected and analysed. A hypothesis emerged in supervision that the "methodological tangle" I was finding myself in might somehow mirror the process I was observing in Network Meetings where so many systems, perspectives and languages are brought together in one room (English translated into other languages but also legal, social care and psychological discourses). The yearning I often felt for my supervisors or other experts to decide on the most useful methodology may also resemble the position of stakeholders in care proceedings towards a judge. The process of research and the influence of the wider context in the domains of academia, social work, psychotherapy and the law thus became part of the data to be analysed (Figure 1). Although this was important, the intrusion of the court in the research process was often overwhelming. The emphasis on methodological and other structural issues made it at times difficult to prioritise the experience of families and professional involved. I tried to bring forth the emotions involved in meetings and the lived experiences of family members though the vignettes and but word count (another structural imperative) prevented the inclusion of the individual case studies. This echoes with the place of children within care proceedings. The paramouncy principle places their best interest at the centre of the whole process but children only rarely appear in court or indeed in Network Meetings and it is difficult at times to keep them in mind.

I had to think carefully about the place of theory during the analysis of material. I wanted to let the data speak for itself and avoid fitting findings to existing theories. At

the same time I was aware that I was coming to this research with both practical and theoretical knowledge that needed to be made explicit and therefore opted, for the first stage of the analysis, to screen the material through a number of theoretical lenses. Although this added to the level of complexity and volume of data it contributed to the creation of “liminal” space for research (Davies 2008 p 256) by helping me to hold back from some of the reductionist tendencies of research (Braun & Clarke 2006) for as long as possible.

To some extent the methodology evolved as I went along and has been time-consuming and at times rather unwieldy. With the benefit of hindsight I would reduce the number of steps used in the analysis and perhaps hold back on the detailed writing up of individual stages.

The decision to retain this complex multi-faceted/multi-focal research protocol was guided by the seriousness of the processes at stake in reaching long-term decisions for the safety and welfare of children. Preston-Shoot and Agass (1990) have argued about the benefits of integrating systems theory and psychoanalysis to understand psycho-social phenomena in social work. A number of writers and practitioners have also commented on the value of accessing the space between social constructionist and more empirical approaches (Flaskas & Pocock 2009).

h. Summary

This chapter has described in some detail the four different steps taken to analyse the wealth of data gathered in this research through three methods of data collection. The first two steps of the analysis maintained a disciplined separation between three data sets (language, interactions, emotions) while the last two took inspiration from thematic analysis and ethnography to undertake a meta-analysis of the data. A critical review of the research process highlighted strong resonances with the dynamics involved in child care proceedings that further informed the findings of the research.

Chapter 4 Introducing six complex systems: Sample characteristics and the context of Network Meetings

This chapter sets the context of Network Meetings by exploring the known characteristics of the sample. It starts with an analysis of referral information available to chairs before the meeting, biographical details of the six families involved and of the participants in the meetings. It is followed by a brief narrative of the six families' journeys to this meeting and by a thematic analysis (Braun & Clarke 2006) of the six letters of instruction that highlights common factors, dilemmas and preoccupations of referrers. Together these provide a glimpse into the structure of court proceedings and the state of theses six complex systems at the point of referral.

1. Setting the scene for the six Network Meetings

a. Referrers

The six referrals were received in the form of a letter of instruction agreed by all the parties following the guidelines of the Public Law Outline 2008. They are all "joint instructions" (i.e. agreed by all parties) but referrals 1 and 5 were initiated by the local authority social services while the other four were led by the children's guardian, sometimes after initial opposition from the local authority (e.g. NM3 &6).

Table 1 Referrers

Meetings	NM1	NM2	NM3	NM4	NM5	NM6
Main Referrer	Local Authority	Guardian	Guardian	Guardian	Local Authority	Guardian
Supported by	Guardian, Mother	Local Authority	Parents	LA, Parents	Guardian, Father	Grand parents
Reluctant parties	Father	Parents	Local Authority		Mother	Local Authority

b. Reasons for referrals

All letters of instruction provide a chronology of the case with details of the involvement of social services in the life of the family and previous assessments. All were complex cases with a number of disputed referring problems (see Table 1) and previous assessments which were either inconclusive, incomplete or were disputed (see 3 below).

Table 2 Reasons for referrals

Meetings	NM1	NM2	NM3	NM4	NM5	NM6
Stated reason for initial referral	Mother's thoughts of self-harm	Teenage pregnancy	Homicide: father convicted of murder	Non-Accidental Injury	Chronic substance misuse	Emotional neglect
Contributory factors	Mental health diagnosis of 2 parents	Mother in the care of LA	Breach of bail conditions	Can family accept court findings and protect the child?	Parents' transient lifestyle	Birth mother in prison for drug offences
	Domestic violence	Limited engagement with professionals	Mental health diagnosis	Domestic violence	Previous children in care of LA	Children in LA Care pending kinship assessment
Additional concerns outlined in previous assessment	Poor parenting skills	Domestic violence	Domestic violence	Are parents together or not?	Lack of ante-natal care.	Carers preventing contact with sibling
	Substance misuse	Substance misuse	Is mother aware of risk posed by husband?	Alcohol use	Parents absconded from hospital with baby	Attendance at mosque prevents engagement with school
Stated reasons for current referrals	Disputed facts	Disputed facts	Disputed facts	Disputed facts	Disputed facts	Disputed facts
	Parents changed their story	Parents "untruthful to the LA"	"Unable to take advice from professionals"	"Parents reject findings of the court"	Are parents together or not?	Grandparents refusing to provide information to LA

c. Families' biographical details

Biographical details of these six families highlight the vulnerability of the parents involved in the family justice system. Comparison with Brophy's much larger study suggests that this sample share many of the characteristics of the families involved in care proceedings (Brophy 2006). All but one were dependant on state benefits. Four out of six were first generation migrants to the UK from the Asian subcontinent and required some language interpretation. Half of the parents had a diagnosed mental illness. Half of the fathers and one mother had addiction problems. Five out of six mothers had experienced domestic violence; one was found, during the assessment, to have diagnosable learning difficulties. All the letters of instruction stated concerns about the parents' capacity to engage with professionals and questioned their insight into professional's concerns.

At the time of the Network Meeting all children were Looked-After in the care of the local authority. Two were placed with their mother in a mother-and-baby placement, the others were in foster care. The sample had a larger than expected number of babies (4 out of 6 cases focussed on the needs of a child under one year old) and the number of children per family was much smaller than the recent average for the agency.

Table 3 Families' biographical details

Meetings	NM1	NM2	NM3	NM4	NM5	NM6
Family's recorded ethnicity	South Asian/ Muslim	Black British	South Asian/ Muslim	South Asian/ Christian	White British	South Asian/ Muslim
Children involved	1	1	3	1	1	2
Age	<1	<1	<1,10,11	4	<1	9,11
Placements	Foster care	Foster care with mother	Mother & Baby Unit	Foster care	Foster care	Foster care
Income	IS	IS	IS	IS	IS	Self-employed

d. Professional involvement and previous assessments

Four out of the six families (NW 2, 3, 5, 6) had been known to social services for more than a year prior to these proceedings. All six had undertaken some form of assessment prior to this referral, two in a mother-and-baby unit following the birth of the child. Seven out of the twelve parents had previously been assessed by independent adult psychiatrists or psychologists.

2. The six families' journeys: Background information gathered prior to the Network meeting

a. Network Meeting 1: Parental mental health and learning difficulties across cultures.

The referral was received from the local authority solicitor in the form of a letter of instruction which had been agreed by all the parties' solicitors. The local authority had been granted an interim care order for a 14 week old baby boy who was placed in foster care. His two parents were opposing the order and wanted to be reunited with their son. The parties had agreed to commission an expert assessment to address the following:

- Psychological assessment of the mother
- Parenting capacity
- Extended family dynamics
- Parents' relationship
- Parents' insight into local authority concerns
- Management of both parents' mental health
- The father's drug use
- Quality of attachment and contact with parents

The letter of instruction summarised Mr Jamal Ahmed and Mrs Alia Begum's journey to the UK from a South Asian country where they married 5 years previously. They

are first cousins. He was brought up in the UK and speaks fluent English but she does not. She is in her early twenties; he is in his late twenties. At the time of the Network Meeting they have a fourteen week old baby boy. Jamal and Alia reside at his parent's address. A pre-birth child protection case conference had decided earlier that the unborn child's name should be place on the Child Protection Register under the category of physical abuse as Ms Begum was expressing negative thoughts towards the child; she had little knowledge of childbirth or care needs and was making little preparation for the birth. There were reports of domestic violence, drug use and non-engagement with services as well as concerns over the parents' mental health. Ms Begum was diagnosed with bipolar affective disorder and was detained under Section 2 of the Mental Health Act on three occasions during her pregnancy. Mr Ahmed has a diagnosis of paranoid schizophrenia and was also hospitalised in 2002. There were earlier reports that Mr Ahmed used cannabis and cocaine, becoming violent and confrontational whilst under the influence of drugs but he said he stopped using when his son was born and drug tests support this. There was one police record of Mrs Begum reporting physical violence and sexual assault from her husband which Mr Ahmed denies. Mr Ahmed's first wife had also made allegations of physical and sexual violence which were later withdrawn. The baby, Jihad, was placed in foster care at birth under an Interim Care Order. The initial care plan was for mother and baby to be place in a mother-and-baby foster placement. This did not happen due to concerns on the part of hospital staff about the mother's ability to provide him with basic care and manage risk ("she nearly dropped him while holding him"). Both parents are having contact with Jihad in a family centre who are helping them with parenting skills.

Both parents were aware of this research project. The social worker had given them copies of the information sheet and Mr Ahmed had discussed it with his solicitor. Both parents agreed to take part

b. Network Meeting 2: Teenage mother and baby - care and control

The referral was received from the local authority solicitor in the form of a Letter of instruction which had been agreed by all the parties' solicitors. The letter provided no background information but a four page "case summary" and chronology was attached. The assessment request was for a five month old girl, Alicia, and her fifteen year old mother, Danielle. Alicia had been subject of an interim care order before she was born as Danielle was also the subject of care proceedings. The letter of instruction included ten questions to address the following:

- parenting capacity now and in the future
- the mother's understanding of her child's needs
- capacity to work with professionals and "comply with directions and guidance".
- impact of drug use on parenting

- quality of attachment
- capacity to change
- support network

The letter of instruction described Danielle as a young mother of Black African descent, born in Europe before coming to the UK with her parents as a toddler. She was made the subject of a child protection plan together with her younger brother when she was twelve following longstanding concerns of neglect. Her own mother had drug dependency problems, was involved in the sex trade and had been a victim of serious domestic violence. Danielle's behaviour continues to raise concerns as she has been excluded from school and was arrested for assault and possession of cannabis. The local authority initiated care proceedings for her and her brother when she approached fifteen, two months before she gave birth to Alicia who also became subject to an interim care order. Mother and daughter were initially placed with a relative. When this placement broke down they moved to a foster home together where they remain. Alicia's father is currently serving a prison sentence for assault and possession of drugs. Little is known about him from the letter of instruction and it is not clear whether he wishes to exercise parental responsibility.

The lead solicitor had not passed on the research information sheet I had sent as she "did not see it as her role". The baby's guardian arrived early and was able to read the information. She said she was interested in the project and gave her consent subject to the mother's agreement. Mother agreed quickly (passively) without reading the information. I encouraged her to think about it while her guardian observed and listened but did not intervene.

c. Network Meeting 3: Homicide – "rubber stamp"

The referral was received from the social services' legal department, acting as the lead solicitor, in the form of a letter of instruction which had been agreed by all the parties' solicitors. The letter summarised complex court proceedings initiated by social services one year before this Network Meeting, before the birth of the child. It referred to a number of disputed assessments: The father had been assessed by a psychiatrist; mother and child attended a residential unit; the mother's relatives were assessed as potential carers. Social services were granted interim care orders which the parents were opposing. The father was applying for a residence order. A meeting between experts had recommended that this further assessment should include the father's two older children. The letter of instruction included 17 questions for this assessment, to address the following topics:

- the father's insight and ability to understand the impact of his mental health and domestic violence on his children.
- his capacity to engage with professionals and his understanding of the concerns of professionals

- his “capacity to prioritise the children’s needs above his own and meet their needs”
- the likelihood of the children suffering significant harm in his care and what steps could be taken to minimise such risks
- the mother’s understanding of the risk posed by her husband and her capacity to recognise symptoms and warning signs
- her “attitude towards her husband in the light of her minimisation of domestic violence”.

The letter of instruction described the parents as Muslim of South-Asian origin. This is the father’s second marriage. He has admitted and been found guilty of killing his first wife. He was diagnosed as suffering from schizophrenia. His two older children are placed within the mother’s extended family. His second wife says she was not aware of this history when they married but is reported not to be concerned about her safety. They had a child together who is the subject of these proceedings. After a period in a residential unit, mother and son live with their extended family under an interim care order. The father has supervised contact.

The consent form and information about this research had been sent to the lead solicitor who had forwarded them to all the parties. I was copied into their email correspondence including a positive comment from one of the professionals about the value of such research. The parents did not attend the first meeting. A discussion took place between the professionals to understand how this had happened. Were they informed? Did they understand the aim and significance of the meeting? etc… A new date was arranged and a plan of action agreed to maximise attendance at the next meeting.

On the day of the meeting, the mother arrived early and sat in the waiting room with her one year old child on her lap. The father spoke English and said he been told about the research by his solicitor and agreed. The mother was not asked at this stage as the interpreter had not arrived and the alleged history of domestic violence made it inappropriate for him to translate. When asked for her consent, the social worker reinforced that this needed to be discussed separately with the mother and the interpreter. In the event, the mother asked her husband to translate the information sheet and indicated that she consented to the research. By that time the child was playing with his father, standing up on the armchair next to him.

d. Network Meeting 4: NAI across cultures

The referral was received from the guardian’s solicitor, acting as the lead solicitor, in the form of a letter of instruction which had been agreed by all the parties’ solicitors. The letter of instruction referred to an earlier draft that had to be amended following

a “finding of fact” from the court and a psychiatric report on the mother. The instruction was to “prepare a parenting assessment on the child’s family to include the mother and father” “to assist the court in deciding with whom Sarah (aged four) should live”. Sarah was in foster care after bruises assessed to be bite marks were discovered on her legs. The letter referred to the guardian and local authority being “unhappy” about a previous expert report by an adult psychiatrist. It also mentioned disagreements between parties as to whether a maternal uncle should be assessed separately or be included in this assessment.
The letter of instruction includes 10 questions to address the following topics:

- the child’s relationship with her parents
- the parents’ relationship
- whether the child should return home
- what support would the family need
- what alternative placements might be recommended (including within the extended family
- whether the father’s parenting capacity was affected by traumatic experiences and drink and whether “the two were related”.

The letter of instruction described the family as South-Asian and Christian. The parents were in their early thirties, married ten years ago before seeking asylum to escape persecution in their country of origin. Their four year old daughter Sarah was born in UK. They came to the attention of social services 18 months earlier following incidents of “domestic violence from the father who is a heavy drinker”, “in the presence of Sarah”. Sarah is said to have a history of food refusal and problem eating since birth. Following the incident the parents separated and the mother took an overdose of painkillers. Six months after the initial referral social services initiated care proceedings and placed Sarah in foster care when bruises found on her thighs were assessed by a forensic paediatrician to be bite marks. This is disputed by mother who admits to having hit Sarah with a spoon when she was not eating but not to biting. She has been interviewed by the police and bailed facing charges of child cruelty. A fact finding hearing found that “the three marks noted on Sarah were caused by the mother biting her and the mother had physically abused Sarah in the past”.

The mother is the youngest of 8. She was brought up by her siblings as her parents died when she was very young and educated in a convent school. Her university education was disrupted by war. Three of her siblings live in the UK. They are Roman Catholics. She married in her early twenties. Domestic violence started shortly after this. They migrated to the UK nine years before this meeting. Sarah was planned and was born in London without complications. She was a slow eater and remained slightly under-weight. No further information is provided about the father.

On the day of the meeting, the social worker had not received any information sheet from her solicitors and did not think she would be allowed to participate in the research “as the court is involved”, but would agree to take part if all the other parties agreed. The father introduced himself and offered to shake hands. He spoke some English, was aware of the research and quickly gave his consent but his wife looked more worried. I gave her and the interpreter copies of the information sheet and explained that observations would be anonymised. She gave consent after consulting other participants.

e. Network Meeting 5: Trust and Substance Misuse

The referral was received from the local authority solicitor, acting as the lead solicitor, in the form of a letter of instruction which had been agreed by all the parties’ solicitors. An assessment was sought for the two parents of six month old baby Michael who had been placed with foster carers at birth as his parents had continued to misuse drugs throughout the pregnancy and not co-operated with safeguarding plans. The father was now said to be fully engaged in a treatment programme and both parents had agreed to take part in a pilot project involving a specialist Family Drug and Alcohol Court. Discussions had taken place earlier with solicitors about the timing of such an assessment as the agency’s practice supported by evidence based practice suggests a period of at least one year of abstinence before starting parenting assessments.

The letter of instruction includes 17 questions to ascertain “whether it is in the child’s best interests to be placed with his father” and what would the likely timescale. The main topics include:

- the child’s attachment to his parents.
  father’s “parenting capacity both now and in the future”.
- father’s understanding of the local authority’s concerns and his ability to work with professionals both now and in the future.
- the parent’s ability to reflect on previous difficulties
- the parent’s understanding of the risk of relapse into substance misuse and its impact on the child
- the parents’ relationship to each other
- the level of support available in the community and father’s capacity to access it.

The letter of instruction identifies both parents, Martin and Jane, as white British, in their early forties with “a long history of substance misuse starting in adolescence”. They were brought up in the local area and both have children from previous relationships who are looked after by their extended families with some involvement from social services. Both were receiving treatment from their GP but also tested positive for non-prescribed drugs. They lifestyle was transient and they were deemed

intentionally homeless by the local authority. They were referred to social services by the midwife and care proceedings were initiated prior to Michael's birth as they had continued to misuse during the pregnancy. At the commencement of these proceedings they agreed to co-operate with the Family Drug and Alcohol Court and to fully engage with the assessment plan. Martin engaged in the drug programme but Jane continued using until she received a custodial sentence for three months when she stopped. At the time of the Network Meeting, Martin had been drug free for five months. Jane had started the rehabilitation programme a month earlier upon her release and was reported to have maintained abstinence for two months. Both parents were having supervised contact with their son once a week and frequent drug screening which had been negative.

The letter of instruction refers to the parents giving mixed messages to professionals about the nature of their relationship and whether they want to be assessed together or separately to care for their son. They had been directed to file a statement confirming their positions in which Martin asked to be assessed as a single parent.

Information about this research was sent to the lead solicitor 15 days before the meeting asking her to circulate the information to all the parties. The guardian had not received it, but agreed willingly. The mother and the family's social worker knew about the research, and also agreed. The father initially said he didn't know about the research, so I explained. He seemed a bit puzzled at first, and took a while to answer. I took his hesitation as reluctance to participate and I reassured him that it was his choice and that it would not affect the work that we do with him in any way. He then produced a copy of the information sheet that his solicitor had given him which he had with him all along. He said that he had no problem with the observation, but he thought that social services would have to agree to it. I explained that they had already given their consent and he agreed.

f. Network Meeting 6: Family honour and children's emotional needs

The referral was received from the guardian's solicitor, acting as the lead solicitor, in the form of a letter of instruction which had been agreed by all the parties' solicitors even though the local authority was said not to support the assessment. There had been previous assessments in this case including an assessment of the children and their mother three years earlier which recommended that the mother was not in a position to care for the children who could remain with their grandparents with therapeutic and social work support. The local authority no longer supported this position and had removed and placed Amina and Ahmed aged 11 and 9, with a foster family.

The letter of instruction included 12 questions to address the following topics:

- the grandparents' ability to work in partnership with professionals
- the grandparents' ability to meet children's emotional needs

- the children's needs and wishes
- recommendations for placement, therapy and contact

The Letter of instruction describes the children's grandparents as Muslim first generation immigrants from South Asia. The mother is in prison for substance misuse-related offences. The local authority had been granted a care order and initially supported the placement of the children with their grandparents. A previous assessment of the family had recommended that Amina and Ahmed stay with their grandparents as long as they could engage in culturally sensitive and appropriate family work in their local area, "to improve their communication with the children" and "to help them balance the needs of the children with the emphasis that the family placed on honour". This work had not taken place and the relationship between social services and Mrs Chaudhry and Mr Khan had broken down. Social services were now opposing the grandparents' application for residence orders on the ground that they were not meeting the children's emotional needs and the grandfather had refused to give consent for social workers to contact suitable referees. Amina and Ahmed were said to be underachieving in school and to have limited opportunities to participate in after-school activities as they had to attend mosque on a daily basis. The grandparents were also refusing to recognise the existence of their baby grandson (who resides with his father) and blamed their daughter for the current crisis which they attributed to outside forces such as her peer group's bad influence and professional intervention in family life. This raised concerns about their ability to meet the children's emotional needs while they remained unable to talk to the children to help them understand and manage the separation from their mother.

This case was part of the pilot study and took place before the information and consent forms were completed. I verbally described the research on the day of the meeting. The grandparents, guardian and social worker gave their consent before hand. The social work manager agreed retrospectively.

3. Thematic analysis of the letter of instruction

All the letters of instruction followed the format recommended in the Public Law Outline (2007). A thematic analysis of the six letters of instructions highlighted a number of common themes, preoccupations and dilemmas.

a. Complexity

All the referrals can be described as "multi-problem families" (Asen 2001) involved with a number of different agencies and facing multiple psycho-social-economic disadvantages similar to that found in a number of reviews of care proceedings in England and Wales (Brophy 2006). The technical nature and language of instruction letters requires knowledge of the law, care proceedings, professional jargon and systems. These letters are therefore difficult to translate. Cooper describes decision-

making processes in child protection as “notoriously complex”. They involve a number of elements including “psychological and intra-psychic dimensions, an interpersonal dimension and a social dimension” that have “traditionally been reflected in the separate institutional responsibilities and activities of, respectively, psychotherapists, the courts and social workers” (1999 p157). In addition, the emphasis of the UK social policy agenda has been on reducing the delays in and cost of care proceedings and particularly on “the overuse or inappropriate use of experts” (Brophy 2001 p xix). Within this context it is likely that the families referred for this type of lengthy multi-disciplinary assessment have become increasingly complex cases in the high court where initial proceedings have reached “impasse” (Flaskas 2005).

b. “Structure” veils human experience

All letters of instruction provide elements of background information on the families but most focus on the “structure” of legal proceedings, previous assessments and contested issues. It is therefore difficult to get a sense of the human stories and emotions behind these tragedies. Reading the letters often brings a sense of hopelessness at the level of complexity of procedures and decision-making processes, at the perceived injustices, abuses and trauma that the children and their families have endured. The level of conflict and mistrust between stakeholders seems at times insurmountable. My reaction and that of my colleagues in allocation meetings is often polarised between strong desires to blame one of the parties, to rescue or run away, in a way that is reminiscent of Karpman’s drama triangle that is commonly used to clarify the revolving Persecutor, Rescuer, and Victim roles in conflict situations (2007).

c. Contested cases

All the cases in the study had previously undergone assessments which were contested by two or more of the parties. Proceedings had reached some sort of impasse over significant alleged events which needed to be resolved before the case could proceed. In two cases there had been a finding by the court which the parents continued to contest. As required by the Department of Justice guidelines (2010), all the letters of instruction asked the assessors “to advise the court” but also instructed that they “should not seek to resolve disputed facts, which is, of course, the responsibility of the Court”.

The main contested issues, as illustrated by extracts from letters of instruction below include: reports of domestic violence (NM1, 2, 3, 4); substances misused (NM 1, 2, 4, 5); capacity to meet the children’s emotional needs (NM1, 4, 5, 6) or physical needs (NM1, 2, 5); parents capacity to work in partnership with professionals (all NM). In two cases the need for this assessment was contested by the local authority who was directed by the court to attend (NM3, 6).

NM1: Father disputes allegations of domestic violence; "Mother denies having made these allegations and feels" "misunderstood by professionals".
NM2: "The mother denies using drugs" and "claims to have stopped using since she found out she was pregnant". Police reported that "Jason stabbed her. Danielle denies this".
NM3: "The court also timetabled the matter for Issues Resolutions and for a Contested Interim Care Hearing"; "The local Authority was ordered to provide an assessment of (relatives) with a view to mother and child being placed with them". "Father does not accept that there was any need to protect the child or the mother".
NM4: This is "a late replacement of the draft letter of instruction sent earlier making clear that it was unapproved. There have subsequently been findings of fact by the court"... "The judge concluded that the bruises were bite marks. Neither parent accepts that".
NM5: "The local authority sought emergency protection orders when the parents absconded from hospital with the baby against professional recommendations"
NM6: The "local authority permanency panel has approved the long term placement of the children with foster carers which the family is opposing".

d. Polarised systems and relationships

All the letters of instruction referred to concerns about the parents' capacity to work in partnership with the local authority and asked the assessors to comment on the "parents' insight into the concerns of and ability to work in co-operation with professionals".

NM 1: "It appears that due to Ms Begum's movements between different boroughs, there was a dispute as to which midwifery team was responsible for her". The letter of instruction also "draws the attention of the assessors to Question 8… Are the parents able to work in co-operation with the local authority and take on board advice given?"
NM2: "as a result of her parents' drug use, mother does not accept boundaries and does not like to follow rules". "Please assessMs Brentford's ability to comply with directions and guidelines offered by professionals in the longer term"
NM3: "Professionals in the past have viewed that Mr Miah is unable to take advice from professionals". "The father rejected this conclusion, stating that the local authority was simply involved in an unwarranted interference with his family".
NM4: "there has been an issue of father's drinking and his solicitors have obtained a report from a psychiatrist. The Children's Guardian is not happy with that and neither is the local authority".

NM5:"Ms J failed to comply with the requirement of the order and there was a warrant for her arrest". The Parents "were unable to engage with the programme". "You are asked to provide an opinion on Ms J understanding of the local authority concerns and her ability to work with the local authority and other agencies involved, both now and in the future".
NM6: Social services oppose the grandparents' application for residence orders on the ground that they were "not meeting the children's emotional needs" and the "grandfather had refused to give consent for social workers to contact suitable referees".

Some letters of instruction referred to conflicts of interest between parents as in NM 2, 3, 4 and 5 and questioned whether they were together or separated and whether they should be assessed as individuals or as a couple.

There were also conflicting views between professionals. NW 6 referred to the guardian questioning the LA's decision to remove the children, while NW 3 and 5 highlighted disagreements between previous expert reports.

e. Suspicion

All the letters of instruction raise suspicions that the family have misled or are misleading the local authority in one way or another. The chronologies suggest the likelihood of communication difficulties and misunderstanding between families and professionals, particularly but not exclusively with the parents for whom English is not their first language. One area of uncertainty is whether a parent's perceived lack of change or co-operation is deliberate or can be explained by cultural misunderstandings (NM 1, 3, 4, 6), mental health or learning difficulties (NM1, 2, 3, 4, 5).

NM1: "We understand that Mr Ahmed's brother also lives there and there is some suggestion that he may suffer from depression"... "Results of drug testing indicate that he has not used in the last three months although there was a trace of cocaine used within the last six weeks."
NM2: "there have been incidents when the family were untruthful to the local authority". The social worker "discovered that the father had travelled to X without the local authority permission".
NM3: Mr Miah "breached the conditions of his conditional discharge". "To what extend is Mr Miah able to understand and act on the concerns of professionals?" One of the experts is quoted in the letter of instruction as stating that "Mrs Bibi will need to be helped to learn and understand her rights and responsibilities"... "to understand the nature of her husband's mental illness... to learn how to adapt to these special circumstances... to know how and with whom she should be in liaison with and with what regularity"
NM4: "Not much is known about the mother". "Not much is known about the father's background apart from the fact that he is married to the mother".

"You will also note the state of the relationship between the parents. They are separated but they have contact with each other... You will need to investigate the nature of the parents' relationship and the extent to which they are presenting as a couple and likely to be a couple."
NM5: The parents "were requested to provide a weekly urine sample but failed to do so". The parents have "given conflicting messages regarding whether they want to be assessed as single carers or co-parents".
NM6: The letter of instruction refers to social services concerns that the children were "missing out on after school's activities" as they "had to attend Mosque five days per week". It also mentioned the grandfather's older daughters having arranged marriages.

These suspicions were not always made explicit. For example in NM6, social services' stated concern about the grandfather's refusal to give consent to talk to his previous wife next to the statement about an older daughter's arranged marriage suggest (without naming it) the possible risk of forced marriage. Similarly unspoken fears such as risk of relapse into substance misuse (NM1, 2, 5), mental ill-health (NM 3, 4), or violence (NM1, 2, 3, 4) appear through the text without being named.

f. A focus on assessing capacity to change within strict timescales

All the letters of instructions stress the need to assess people's capacity to change and the importance of time. Many of the questions raised at the end of the letters asked to assess the situation "now and in the future". All the letters include a paragraph detailing the court time table and the request that assessors comply with it.

NM1: "whether the parents can meet Jihad's physical and emotional needs now and in the long term".
NM2: "Please indicate what changes, if any, are required to be made by Ms Brentford in order to safely and satisfactorily care for her daughter". "What support services would be of use in assisting Ms Brentford sustain any such changes and the timescales in which you would expect her to make any such changes?"
NM3: "Please comment whether Mr Miah will put his children at risk of harm currently and in the future"... "Based on Mr Miah's historical inability to engage with, and his previous aggressive behaviour towards professionals... what is your opinion of his likely ability to engage with these professionals now and in the future."
NM4: "you are asked to prepare a parenting assessment of the child's family. This is to assist the court in deciding with whom Sarah should live, if she can return home, and if so with what safeguards, if any". "Please deal with the issue of whether or not Sarah should return home, and if so in what timescale

NM5: "Please advise as to further assessment work to be undertaken and the timescales for concluding this work."

g. The importance of neutrality and independence in assessments

All the letters of Instruction refer to the Practice Direction relating to Experts in Family Law Proceedings (Appendix D), particularly Section 3 which clearly sets out the overriding duty of the expert to the court that takes precedence over any obligation to the person from whom the expert has received instructions or by whom the expert is paid. The independence of the assessment is emphasized: "it is essential both to your role as an independent expert and to the parties' perception of your independent status, that if you have any discussions in this case, you need to record those discussions and set out what influence if any those discussions have had upon your recommendations/conclusions"… "You should express your conclusions regarding factual matters but you should not seek to resolve disputed facts, which is, of course, the responsibility of the Court. Where appropriate, it would be of assistance if you could express your opinion on the basis of alternative findings regarding factual issues"… "The conclusion of your report should be verified by a statement of truth in the following form: I confirm that insofar as the facts stated in my report are within my own knowledge I have made clear which they are and I believe them to be true, and that the opinions I have expressed represent my true and complete professional opinion."

4. Attendance at Network Meetings

The average number of participants in the Network Meeting was ten (7<X<13), representing on average 4.75 agencies (3>X>6).
The minimum attendance for each meeting was the children's social worker, guardian and parent (or grandparent for NW6). In addition:

- Five of the six meeting had both parents (or grandparents) attending
- Five had the social worker's manager
- Three had an interpreter
- Two meetings had a child psychiatrist or child psychologist
- Three had adults-focussed clinicians from CMHT (2 social workers and 1 community psychiatric nurse) or substance misuse teams
- Two had the child's foster carer or fostering consultant
- Two had Family Centre workers who had undertaken previous assessments and were supervising contact
- Two of the mothers came with their young child.
- One had a school teacher
- One of the meetings had two representatives from CAFCASS, one for the child and one for the teenage mother.

There were no representatives from health services although most of the children's social workers summarised reports from health visitors or school nurses.
The practice of the agency is to ask legal representatives not to attend Network Meetings. Some solicitors expressed some disagreement with this view (NM2 and 4. A request for a solicitor to attend NM6 was agreed as the court required a detailed and "official" record of the meeting as the referral itself was disputed by the parties. The guardian's solicitor was invited to take minutes but did not contribute to the discussions (NM6).

Table 4 Attendance at Network Meetings

	NM1	NM2	NM3	NM4	NM5	NM6
Numbers attending:	13	9	12	8	13	8
Parents	2	1	2	2	2	2
Child		1	1			
Agency Staff	4	2	2	1	2	2
Other Professionals	7	5	8	5	9	4

a. Profession and ethnicity of participants

The ethnic composition of the families reflects the location of the agency in central London and its recognised interest and specialism in culture. The agency has an integrated team of family therapists or clinicians (the Cultural Therapy Centre) who speak an Asian or Arabic language and are first or second generation immigrants from China, Bangladesh, Pakistan, Egypt or France. Bangladeshi family therapists attended NM1 and 3 while a Pakistani family therapist attended NM 6.
Two of the six guardians (NM2 & 5) and four of the social workers (or their manager) (NM3, 4, 5, 6) were from a similar cultural background to the family.

Table 5 Profession and ethnicity of participants

	NM1	NM2	NM3	NM4	NM5	NM6
Family	SouthAsian	BlackBritish	SouthAsian	SouthAsian	WhiteBritish	South Asian
Guardian	WhiteBritishF	2BlackBritishF	WhiteBritish F	BlackBritish F	WhiteBritish F	White British F
Social Worker /manager	BlackBritishM WhiteIrish F	WhiteAust F	BlackBritish F SouthAsian F	2BlackBritishF South Asian M	BlackBritish F WhiteBritish F	South Asian F Black British F
Family Therapist	BlackBritishM 2South AsianF	WhiteBritish F	South Asian F	WhiteBritishM	BlackBritishM BlackBritishF	WhiteBritish M South Asian F
Psychologist/ Psychiatrist	White British F		2 White European M		White British M&F	
Family Centre Worker	White British F		White British F		White British F White British M	
Adult Social	Black British F		Black British F		WhiteBritish F	

Worker/CPN					WhiteBritish M	
Teacher		WhiteBritish M				
Interpreter	South Asian F		South Asian F	South Asian F		
Fostering	Black British F	White British F				
Solicitor						South Asian F
Total	13	9	12	8	13	8

b. Seniority of participants

Managers are strongly encouraged to attend Network Meetings. All but one of the meetings (NM2) had a social work team manager, two had a family centre manager and one had a consultant child psychiatrist (NM3)

Table 6 Seniority of participants

	NM1	NM2	NM3	NM4	NM5	NM6
Managers	1	0	2	1	1	1
Front line workers	10	7	7	5	10	5

c. Agencies attending

Table 7 Agencies attending

	NM1	NM2	NM3	NM4	NM5	NM6
Total agencies involved:	6	5	5	3	6	3
CAFCASS	1	2	1	1	1	1
Social Services	2	1	2	3	2	1
Family Centre	1		1		2	
Health						
CAMHS	2	1	1	1	1	1
Adult Mental Health	1		1		2	
Substance Misuse					2	
Education		1				
Fostering	1	1				
Legal						1

d. Professionals or Agencies involved but not attending

The practice of the agency is to ask the referring agency and the lead solicitor to invite parents/carers and all relevant professionals to the network meeting. A trawl through the letters of instruction suggests that a number of possibly relevant agencies did not attend, either because they were not invited, or could not come.

Table 8 Professionals or Agencies involved but not attending

	NM1	NM2	NM3	NM4	N5	NM6

Agencies involved but not attending	Health	Health	Health	Paediatrician	Health	School
			Adult Psychiatrist	Fostering	Fostering	Mosque
			CHMT		Adult Psychiatrist	Fostering
	Police	Police	Police	Police		CAMHS

5. Outcome of Assessments / Final report recommendations to court

Following the Network Meeting, the chair (case manager) recruits colleagues from the multi-disciplinary team to undertake the assessment and collates reports to produce a final report for the court.

At the end of these six assessments which lasted between three and six months, three of the families saw their children returned to the care of one of their parents under a Supervision Order (Section 31 of CA 89), one with their grandparents under a residence order and one with extended family under Special Guardianship arrangements (CA 2004). One assessment recommended placement away from the family.

NM1: The mother engaged well with the assessment but the father continued to use drugs and left the family home. The mother was found to have complex learning difficulties. Her extended family joined the assessment and was able to take on the main caring role for the child and mother under Special Guardianship.

NM2: The mother engaged with the assessment for a while then dropped out after making a complaint. She remained in the foster placement with her child while another assessment was undertaken.

NM3: The assessment recommended that the child be placed for adoption as the parents did not shift their position and the risk of harm remained.

NM4: The mother engaged with the assessment and the child remained in her care under a supervision order with supervised and limited contact with father.

NM5: The child returned to the care of his father after six months of intensive assessment, under a supervision order. The mother dropped out of the assessment.

NM6: The children returned to the care of their grandparents after six months of further assessment

6. Summary

The analysis of the sample and of the letters of instruction highlights a number of characteristics of Network Meetings that provide some insight into the nature of the family justice system:

- Families involved have a high level of socio-economic deprivation and vulnerability similar to that described by Brophy in her studies of Child Care Proceedings (2006).
- Families have complex needs involving several members of the family and a number of statutory agencies (health, mental health, substance misuse, domestic violence, social care etc…).
- Most families were taking or had taken part in prior or concurrent specialist assessments (parenting, mental health, substance misuse, learning difficulties, domestic violence etc…).
- All cases involved disputed facts that had already been investigated but were contested by two or more of the parties involved. In two cases, the court had made findings of fact prior to the Network Meeting.
- The relationship between the families and professionals was questioned in all the letters of instruction with a degree of suspicion and/or misunderstanding between the parties.
- All referrals were joint instructions with letters of instruction emphasising the independent nature of the assessment requested and the need to adhere to a strict time table.
- All the children in the sample were in foster care at the time of the Network Meeting but half (3) were returned to the care of one of the parents before or shortly after the final hearing, one third (2) were placed within the extended family and one was permanently removed from the family and placed for adoption.
- A thematic analysis of the letter of Instruction provided some insight into the state of these six systems within the structure of the court. The main themes identified were:
    - Complexity,
    - Contested facts and binary oppositions,
    - Polarised systems/relationships,
    - Suspicion,
    - The tendencies of structure to veil human experience,
    - A quest for independent assessments of families' capacity to change
    - Time pressures

7. The story so far

The six family systems involved in this project had been in the court arena for longer than recommended by the Legal Services Commission (LSC). All had undergone previous assessments that had ascertained and evaluated most of the facts and disputed events. Yet the request for further assessment suggested that there was insufficient evidence or knowledge to assist judges in determining the best interest of children involved. Proceedings appeared to have reached impasse leading to an

agreement by all parties to commission this additional referral. The above analysis of the sample and of the letters of instruction provides some insight into the quality of impasses and the request for further assessment. It brings to light significant aspects of the strengths and weaknesses of the family justice system.

All the letters of instruction in the sample provided a clear chronology of the professional involvement leading to these proceedings and of previous assessments and findings. This suggests that the court had been able to bring order and clarity to very complex situations involving often volatile and dangerous systems that had been referred to court by local authorities. This is likely to have been achieved by the establishment of a clear structure within a strict time-table as illustrated by the recent introduction of the PLO and the "case management conference" aimed at clarifying issues and setting clear time tables for assessments.

In the second part of the letters of instruction, the questions that the assessments were commissioned to address provide an insight into the areas that maybe more difficult to fathom within the court arena and therefore require further assessment. Most questions seemed to focus on qualitative issues related to quality of relationships, emotional states, insight and capacity to change that are situated in the more subjective realm of therapeutic, emotional and relational understanding. The main preoccupations centred on contested issues and polarised relationships characterised by suspicion, blame and misunderstandings including cultural differences. All letters of instruction referred to conflicts between parents and professionals and asked for an assessment of the capacity of parents to work with professionals in the future.

The literature review and the above analysis of referrals to the agency within the context of child care proceedings suggest that the court system functions primarily within the domain of "structure" (Giddens 1984, Turner 1967) regulated by rules, law and customs. For a large number of cases, the intervention/imposition of a legal framework on complex and often dangerous situations appeared to provide a containing environment for decisions to be reached within a strict timetable (Brophy 2006). In many cases care proceedings move through a number of prescribed steps towards a final hearing where final decisions are made as illustrated in Chapter 2, Diagram A. Local authorities tend to initiate care proceedings for children when the risk of harm has reached the "significant" threshold and statutory powers aimed at bringing "structure" in the form of a child protection plan involving the family and inter-agency co-ordination appear to have reached impasse. In these situations, the role of the judicial system in child protection can be seen as an attempt to establish order, justice and safety to complex, adversarial relationships that were assessed by the local authority to leave children at risk of significant harm. The intervention and sanction of the state are called upon to determine uncertain facts and impose rules and a higher level of "structure" to protect children and ascertain how to meet their long-term needs. This can provide a thinking space within a strict timetable were

each party, represented by a solicitor, can write and respond to each other statements until a decision is reached or the judge adjudicates at a final hearing.

The literature review and in particular Brophy's research has identified how some cases appear to remain stuck within the judicial system raising concerns about cost and delays in reaching decisions for children. It is my contention that the six families in this sample, are examples of a situation in which the court process itself appears to have reached impasse and new information is required for the court to determine the best interest of children (Diagram B). The letters of instruction suggest some recognition within the judicial system that the court may struggle with aspects of human experience that are outside of "structure" (e.g. assessing capacity to change, suspicion, emotional harm and neglect) particularly when there are cultural differences, moral / ethical dilemmas or relationship difficulties within families or with professionals. In this context, the referral to the agency can be seen as a request from a "structure" dominated system (the court) to an agency with a reputation for multi-disciplinary work, therapeutic and relationship-based practice that may be more suited to unravel contested issues in the domain of experience, emotions and relationships.

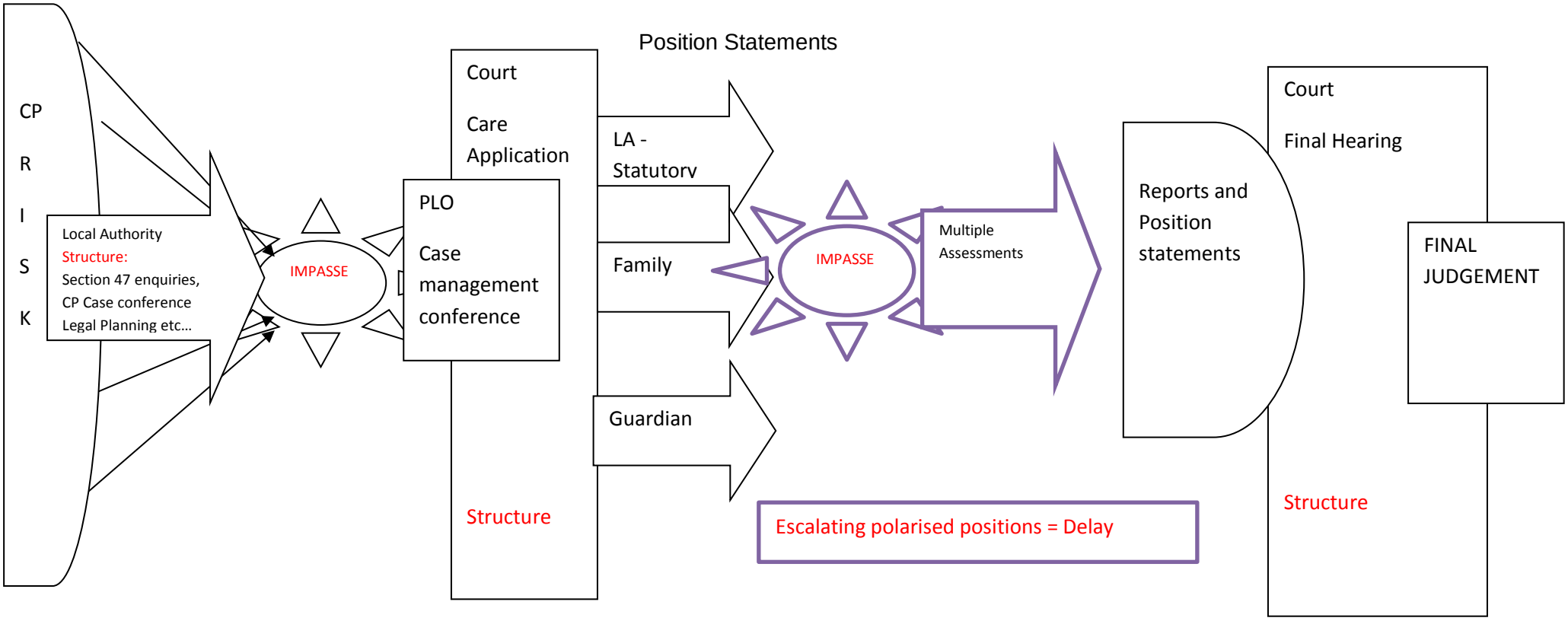
The analysis of referrals illustrated aspects of the uneasy relationship between the domains of the court and the clinic (welfare) identified in the literature review (King and Piper 1995, Cooper 2000, Brophy 2006) and the letters of instruction highlighted differences between the two domains. For example descriptions of families' histories focused on their journey through the justice/social care systems and appeared to be dominated by procedural concerns with rules and binary opposition (e.g. parents not doing what they had been asked to do or staying in a relationship when they have been advised not to). It was often difficult to capture the human stories behind the factual descriptions and a sense of hopelessness often affected the researcher reading these. Questions tended to focus more on forensic investigations of contested facts than on explorative, developmental or explanatory narratives of people's experiences, well-being and relationships that are likely to be favoured by CAMHS practitioners. Although letters have been agreed by all the parties involved in the case, the language suggests that they are written by solicitors and clearly assert the authority of the court system over the clinic. All letters set out the duties of the expert witness and emphasise the need for independence with clear communication channels via the "lead solicitor", within a strict time-table

8. What next

The Network Meeting provides a first-hand opportunity to observe what happens when the world of the court and the clinic come together for the first time after a referral has been made. The agency's practice is to ask referrers to invite all relevant professionals involved, the children's guardian and the parents/carers to a meeting to discuss the referral and plan (see Chapter 1). The six meetings were observed,

audio recorded and analysed by the researcher (see chapter 3). The next chapter will present the findings of the first three stages of the analysis as a composite synchronic narrative of Network Meetings.

Diagram B: Care proceedings process - contested cases



Chapter 5: The Network Meeting - synchronic description and analysis

Having studied the state of the six systems referred to the agency in the context of the family justice system, this chapter will describe and analyse the content of the six Network Meetings at a semantic and synchronic level (Braun & Clarke 2006 p 84). Although the agency has not yet drawn up guidelines for chairing Network Meetings, the six meetings observed followed a similar format which was used as a template for describing what happened in the meetings. The findings of the three column analysis and thematic analysis (Braun & Clarke 2006) are presented as a narrative of what happened in meetings and will be illustrated with extracts from each meeting.

This synchronic description of Network Meetings will be supplemented with an overview of the observer's emotional responses and reflexions.

The chapter will end with a summary of findings to review what happened in Network Meetings through the lens of a kind of ritual (Turner 1986) and lay the foundation for an ethnographically informed analysis of "structure and communitas" in Chapter 6.

1. Synchronic descriptive analysis of Network Meetings

a. Introductions

<u>Before the meeting</u>

Chairs appeared to prepare by reading and adding notes to the letter of instruction, drawing a family tree, network map and a list of questions or hypotheses about disputed facts. Several of the chairs reported feeling anxious beforehand. In five out of six meetings, the chair was accompanied by another member of the assessment team.

Parents and professionals were asked to wait in the waiting room until everyone had arrived. The observer noted a level of tension and expectation / drama before meetings with most parents sitting away from social workers. Guardians were more likely to sit next to the parents and to engage parents in conversation (except in NM3 where the guardian joined the consultant psychiatrist in pre-meeting discussions).

<u>Clarifying the purpose and introducing participants</u>

All chairs took the lead in meetings and invited people to give their name and position. This was usually but not always followed by a brief description of the agency, the agenda and timing of the meeting. Most chairs explained something of the dual role of the agency as a generic CAMH Service and its additional involvement in providing expert assessments for the court.

NM6: The chair says the agency is "a CAHMS multidisciplinary team working to support children and families in (the local area) but we are sometimes asked to offer independent advice to the court when there are worries about children"

The independent position of the agency in undertaking this task was emphasised in all meetings either directly (NM2, 6) or in action (NM1, 4):

NM4: The chair explains the purpose of the meeting in short clear sentences emphasising the need to "make sure that everybody understands why we are being asked to do some work with you" and "to check whether people are in agreement with the work" or "have a different view of what is being asked of us".

Five out of the six chairs addressed the parents directly at this stage to explain the purpose of the meeting and check that they were aware of and understood the letter of instruction.

NM 1: "the purpose of the meeting is to discuss the referral of your family and the concerns that have been highlighted in the letter of instruction";
NM2: "do you know what you are letting yourself in for?"... "We work in kinds of two ways... We do assessment and therapeutic work..."
NM5: The chair explains that the purpose of the meeting is to "discuss the referral of your family to this services" and the instruction letter "with a list of questions which everyone should have discussed with their solicitors".

From the start of the meeting, the letter of instruction appeared central to the positioning of the agency as neutral (Cecchin 1987) and helped reinforce its independence. Chairs emphasised that the letter should have been agreed by all parties (including the parents) and but there was often recognition amongst professionals that it is not unusual for parents not to have seen the letter (NM1, 2, 4, 5).

NW2: When mum says she has not seen the letter of instruction, the guardian laughs and says "this is not unusual"

In this sample, five out of the six families were aware of the existence of a letter but only two of the parents remembered discussing it with their solicitors and all needed further explanation. One parent asked through her interpreter "what is the letter of instruction" (NW1). Most chairs worked hard to ensure that the letter was explained to the parents and check their understanding. The onus was often placed on social workers to explain, reinforcing further the chair's neutral position (above the fray):

NM1: CHAIR: "Okay, I'm going to start with you Paul (social worker) because I have no idea based on what I've just learnt so far how much the family really understands about coming here and I'm going to put the ball in your court so you can clarify exactly what you (.) what conversations you've had with them

before and how that relates to this letter of instruction so we can all be clear (.1)in terms of what they understand (.1)and how we can then move forward () yeh?"

There was often a sense of drama around the letter of instruction. In three meetings a member of the assessment team had to leave the room to make additional copies of the letter for participants. In another (NM4) the letter was being amended by lawyers at the time of the meeting and was faxed half way through. There was sometimes confusion about amendments to the letter of instruction and question marks about which version people were referring to (NM1, 2, 5).There was also implied and direct criticism of the judicial system, particularly the parents' solicitors whose task was said to include explaining the letter of instruction to parents but this had not always been carried out (NM1, 4, 5).

As well as providing a practical focus for the meeting, the letter of instruction can also be seen, in this part of the meeting to provide an emotional container (Bion 1961) for participants, particularly for chairs who frequently referred to it, held on to it physically and ensured that copies were provided for everyone. At the same time there were a number of comments suggesting that professionals have learnt not to rely too much on the letter of instruction either because of inaccuracies, or because parents are not aware of its existence or meaning (flawed container). This seemed to raise suspicion and mistrust between stakeholders and most chairs paid attention to setting the context of the meeting by ensuring that the letter's central position was understood by participants and explained to parents.

b. Summaries of professionals' involvement and assessment of the family

The longest part of the meeting consisted of a round-up of stakeholders' involvement with the family, starting with the social worker. Chairs tended to take an active role in this part of the meeting, interviewing participants in the presence of others, mapping out relationships and exploring differences between stakeholders until significant themes or impasses (Flaskas 2005) emerged (See Table 8).

Chairs seemed to pay particular attention to the quality of relationships between stakeholders, by asking about it, commenting on it or by encouraging interactions between people that demonstrates it in situ (NW3).

NM3: The chair encourages Dad to clarify his relationship with social workers. When Dad says he has a good relationship with "this lady" the chair asks if he knows her name… The chair asks Mum what her relationship with social services is like. When she says it is fine the chair asks the social workers if it is reciprocated… The chair says "Okay. So, we don't have to hear all the detail now, I'm just getting a flavour that there are some tensions".

NM4: The chair tries to clarify the nature of the relationship between the parents ("Are you together, are you separate"). This causes some confusion as the parents do not seem to understand what she means by relationships saying that they are "together for the sake of their child". The chair perseveres asking about the level of contact. The parents help each other during this conversation and the chair surmises that they "are separated but have a good relationship"
NM5: The chair comments on the good co-operation between professionals and with parents then asks "Has there been a time when communication hasn't been so good for you two with the professionals, when it's really got on your nerves". All laugh. Martin says it has been difficult at times because he thought "am I allowed to say that… should I be thinking that".

Chairs appeared to focus on differences of opinion between stakeholders and spent time tracking particular themes and exploring the implications of such differences.

NM1: The chair asks if the child witnessed domestic violence. The parents say once but the social worker suspects more. The chair summarises the different opinions and comments on the parents' body language when they laugh with each other. Dad says that social workers have seen a lot of violence in their work but "maybe they exaggerate" what they think happened in his case…"
NM4: The chair asks the guardian and social worker what their position will be if parents do not accept the judge's findings. The guardian answers first and addresses the parents directly to explain that it will be difficult to go ahead with the assessment if they do not accept the judge's finding. The mother agrees that she "cannot go against the judge" but she cannot discuss it because she is "100% sure" she did not do it.
NM5: The chair asks if there is "a reason why Martin's … being put forward as a single carer as opposed to as a couple". The social worker explains "from my point of view" that they "both try their best but they are at different stages of their recovery and Jane is not ready". "That's why we decided for Martin to go first"
NM6: The chair enquires whether it would be possible to have a further assessment if social services opposed the grandparents' application for residence order. The social work manager responded that social services were "not opposing the assessment but (that they were) also not supporting it and would obviously not be paying for it". The grandparents reiterated their support for the assessment.

Chairs appeared to continue to strive for a neutral position between stakeholders and work hard to engage parents, frequently checking their understanding of professionals' accounts.

NM1: "So, it would be useful for you two to tell us what you've understood so far about the plan for this meeting and what it means for you as a family
NM3: The chair thanks the manager then asks both parents how they understand the purpose of the assessment…"do you understand what she meant by non-compliance?".
NM5: The chair invites the parents to comment: "is there anything you, you two would like to say in response to anything that has been said so far about that?"... "Any comments on that glowing performance?".

However there was often an uneasy balance between engagement and forensic exploration of disputed facts which raises the level of tension in meetings. For example in NM1, the father responded angrily when the chair asked about domestic violence and drug tests and the social worker hesitated and was encouraged by the chair to continue. Similarly in NM2 the chair highlighted concerns about substance misuse (which the social worker did not mention in her summary) even though this seemed to anger the mother. Later in the same meeting the chair had to ask three times what concerns people had about the father before the social worker talked about domestic violence incidents which "would be a worry if the parents were to remain together". Professionals in this meeting seemed reluctant to say anything that may upset Danielle.

When contested issues were highlighted, professionals' language tended to become even more forensic and impersonal as in NM4 when the social worker stopped addressing the father by name and used "father" or used words like "incident"...)" after the chair asked him/her to comment on the father's whereabouts at the time of the injuries. In several meetings the word "emotional needs" was not translated by interpreters and the chair had to ask professionals to explain what it means. The language used by professionals was also laden with jargon when professionals explained the welfare and court systems. For example:

NM1 *the Chair invites the social worker to briefly explain the background and reasons for the care application. He does this in short sentences to be translated literally. Language is official and carefully phrased. Some jargon (issues, contact, domestic violence, psychological assessment) is repeated in English and not translated. The interpreter seems to try to mirror the SW's tone of voice.*

This part of the meeting also highlighted a certain hierarchy between professional groups (discussed below) and a level of competition between professionals. In some meetings it seemed that professionals competed to represent the parent's best interests. For example in NW1 the CPN, psychologist and social worker ended up arguing over what sort of assessment tool would be most culturally appropriate and interrupt each other to ensure that the parents understand the other.

NM1: The CPN intervenes "Can I check in with Alia just to see what she actually understands from… from what's being assessed because … er… it's a lot of information and I'm just, er, looking at her here … I've seen her … look like this … as if to say, what the hell is going on".
NM1: The psychologist interrupts the social worker's summary to "check the parents' understanding of words like contact, care order. "Can I ask (.1) do you think Alia understands that? … we don't know whether she does really understand, so [stutters] I don't want to put any pressure at all on you, but if you could just tell us a little bit about why you think you're here () today, or about why we're meeting today, it will help us know if we're explaining it well enough to you".

The child psychiatrist in NM3 seemed to position himself as an advocate for the parents (and for justice) by pushing the social worker to provide evidence of conversations and letters they allege to have sent the family to invite them to a meeting they did not attend. In NM4 the social worker is quick to distance herself from paediatric reports which led to the child's removal and says she understands how "traumatic" this was for mother and daughter.

Chairs sought to open up different perspectives and points of view before searching for a consensus or agreed formulation of the main issues to be assessed, often related to the themes identified in Table 8. They also asked professionals to clarify "what parents need to change" for their family to be reunited:

NM3: The chair summarises that "it is an issue of trust". The manager agrees and describes how Dad says he accepts the concerns "to prove to professionals that he is doing it" rather than "understanding the risk and the need to change". The chair makes sure that this is translated to the mother.
NM4: The chair names the impasse ("we are stuck") and tries to find a way through by asking what the parents "would need to do differently in order for the department to feel confident to return Sarah to their care". This lead to a discussion about other risk factors that need to be addressed such us immigration status, safe relationships between the parents, father's alcohol consumption, support available from the extended family, cultural differences in parenting and chastisement etc...
NM5: The chair asks a question to clarify Dad's position ("if you had a choice what would be your preference") to which Martin says "if I had a choice now I would prefer if… if, if it was a joint thing to be honest, you know, yeah". He then agrees with the chair's comment that "Ideally you'd like to do it together". Jane also agrees that "ideally I would like to be joint carers". The chair thanks them and says "it's important for us just to be honest" and "for everybody to know that actually ideally you'd rather be doing this together as a couple" even if "it is not possible right now".
NM5: The chair addresses the parents directly to explain that "it'd just be good for us to hear all together a summary of those things so we're all clear about

what's happening now" and that "there will be a chance "for you two to tell us whether you agree with some of those things or not, what you're finding helpful, what's not so helpful, 'cos at the end of this meeting it would be useful for us to know if when you come to the (agency's name) what's going to work best for you as a family".

The end of this process often felt rushed and chairs commented or bemoaned the shortage of time as they tried to move the meeting along. Guardians were often asked whether they wanted to comment on the process or not before the letter of instruction took centre stage again.

NM1 "I don't know how much time people have got (.) eh so can we just double check when people want to leave because I think this is going to take some time"..., "Would you mind then just, we're not going to have time to get through all the details, but to provide a summary of what led you to becoming involved with the family, what's happened since, and what your concerns are, then we'll go round each person"... "I'm very mindful of time"
NM2: The co-chair returns to dates. When a date is agreed, the teacher asks how the assessment will fit around school...The Guardian asks if an assessment of Dad would add time.
NM4: The chair again summarises the difference of views and bemoans the lack of time. "Before moving on to the letter of instruction" she asks the social worker to continue with her list of issues. .
NM5: The chair moves on with some humour: "Okay, um, any other comments before we move, move on … to … I don't know who we're going to pounce on next. There are a few social workers here… I got a bit confused then" (laughter)"

c. Setting the context for the assessment

<u>Letter of instruction</u>

In this part of the meeting, all chairs went through the letter of instruction, reading the questions one by one, checking that the parents understand the language and what is required from this assessment:

NM2: Chair to Danielle: "I actually think it is important for me to go through the letter of Instruction just so that you know some of the questions that we've been asked okay so I'm going to go through it and we will make sure that you have a copy of it 'cos you should have it really to be honest before today". She then reads the letter of instruction going through the questions one by one. She stops after each question and asks mum is she understands then continues as Danielle nods.
NM3: The chair invites the parents to comment "Is it… is it, do you understand what's being said or do you want to ask Dr W some questions to clarify it", and specifically to Mr Miah "do you want to comment on it, I noticed that

you're smiling". Dad says "I will explore that, she will explore that… she will learn it…I mean she will work on it and we'll see how this can take place".

Chairs seemed to strive for a neutral position by inviting other professionals to explain or clarify what a question meant and why it had been included. Solicitors were positioned as the commissioners of the assessment and authors of the letter.

NM2: The chair asks for clarification about the proceedings for Alicia and for Danielle and her brother. Her tone changes from the previous dialogue with Mum and she addresses her question to professionals. The social worker talks about "the department's decision" and alludes to possible conflict of interest between mother and child which might require separate legal representation and different social workers. The guardian helps the social worker to clarify the legal position. Her voice seems to bring the authority of the court.

NM4The chair starts going through the questions and says: "the first questions they still want us to look at"... "is each of your relationships with Sarah". She asks the social worker to clarify what this means and checks whether there is a translation for the concept of attachment. The manager helps with translation as the interpreter had used the English word. A discussion follows about the meaning of the concept.

NM5: The chair reads Question 2 about Michael's emotional needs and suggests that someone explains this to the parents. Dad says he does understand. The social work manager describes the developmental changes that Michael will go through and that his dad will need to adapt and plan for the future. The family centre worker says she has started this work already.

The change of tone and language in this part of the meeting was striking. Lawyers were frequently blamed for the wording and complexity of the letter of instruction, suggesting an element of scapegoating or projection of unwanted emotions.

NM3: The chair continues at a pace noting that some of "the questions are repetitive". He also changes the wording, for example adding "alleged" to some sentences. "So, so some of the questions here, to me there is a bit of a repeat of other questions so, like question 11, we'll still answer it but it's again his ability or inability, alleged inability to engage with professionals or to become aggressive when challenged, we already know that, that's to do again, it's the same kind of issue, um, um".

NM5.The chair moves to the instruction letter. Martin says he wished he could have looked at it earlier. The social work team manager who had been silent until then intervenes to tell father he should have checked with his solicitor who has a copy. The chair intervenes "this is not the first time this has happened… it's unfortunate…I mean ideally you should have looked at them before but it happens time and time again which is why we're going to go through them now and then"… "then if there isn't any agreement… then we'll get that to the lead solicitor and she can tweak them… and you probably need

to talk to your solicitor again about that and why you haven't received them before now".

After each question, chairs explained how the request will be addressed during the assessment and what context/activity will be put in place to answer it.

NM3: "Um, okay, the letter of instruction tells us that we're meant to do a number of different things, um, and if I can just go through that, very briefly, how, to explain how we might be doing that, okay. So the first one is, um, you know, to assess your ability, Mr Miah, to understand (the effect of) domestic violence on the children's development and so on… so the way we would do this would be eh, we would be meeting with you on your own a few times, okay". "He talks directly to Dad, showing him his copy of the letter. He stops to ensure translation to Mum. He says the work will include "observation of Dad with the children", "to see it, not just talk about it".

NM5: The next questions are about Jane and "the risk that Mother poses to Michael should she misuse drugs". The chair says "I guess the assessment is going to focusing on talking to you a bit about how you're managing yourself and obviously how Mum's managing her and asking you questions about where things went wrong in the past"…" Yeah, because I don't know whether, unless there's some consensus in the room that Mum has posed more of a risk to Michael than Dad has or is it 'cos Dad's putting himself forward it's just about protection? All agree it is the former and the chair tells Jane he will probably talk to her about this later.

Most Network Meetings identified a significant theme or a new issue (Table 9) that was not always adequately covered in the letter of instruction and required amendments to the letter of instruction. For example,

- NM1 focuses on the mother's possible learning difficulties and how to assess it;
- NM2 recognises the need to involve the father in the assessment and mother's reluctance to take part;
- NM3 identifies possible cultural misunderstanding as contributors to a breakdown in trust between family and professionals which would need time to address;
- NM4 considers the possibility of recruiting members of the extended family in an attempt to find a way through the impasse;
- NM5 recognises the competing needs of the two parents and redraws the letter of instruction so that they could be assessed at different times
- NM6 identifies cultural themes such as "honour" which have contributed to a breakdown in relationships between grandparents and social workers and needed to be unpicked.

Table 9 Significant themes and impasses identified in the six Network Meetings

NM1	NM2	NM3	NM4	NM5	NM6
Complexity of Assessing Parental Mental health and Learning Difficulties across culture	*Who is the child: teenage mother or baby*	*Polarised systems in battle-mode*	*Non-accidental injury across culture*	*Can parents change in time: the tyranny of time*	*Polarised systems not communicating*
"what sort of psychological assessment"	*"What about father?"*	*Is father in need of treatment or containment (Ill or bad)*	*"Are you together, are you separate"*	*"Do you want to be assessed together or separately?*	*Understanding the place of Izzat (Honour) in Asian culture*
"What sort of relationship"? (between parents)	*"Who is testing substance misuse"*	*Fake compliance: "it is an issue of trust".*	*"If I say I did it can I have my baby back?"*	*"it's important for us just to be honest"*	*Meaning and translations of emotional needs*
Are parents requiring mental health treatment or are they lying about drug use	*"Well I don't wanna do it but I have to!"*	*Is mother potential victim or collaborator*	*"we are stuck"*	*"So this is it then… one more strike and you're out"*	*Taking the risk to "open the book"*

This lead to sometimes lengthy discussions and complex negotiations, mostly involving social workers, chairs and guardians about amendments to the letter of instruction. The language was often very technical and impossible for parents to understand or for interpreters to translate accurately. In some cases a compromise was reached and the chair agreed to write the new question in a letter to the lead solicitor (NM2, 3). In most cases there was a great deal of anxiety about the new question being acceptable to the lawyers or not (NM1, 2, 4, 5, 6). Guardians often took on a mediating role between the family, clinic and court and on two occasions agreed to support the chair by contacting solicitors directly. The spectre of the court's power was often palpable during these discussions (as in NM1 when professionals hesitated to change a question in the instruction letter). In this situation chairs appeared to attempt, with the help of the guardian, to assert the authority and independence of the assessment team and create some manoeuvrability within the legal process.

> *NM1: The chair suggests changing a question about the parents living together, following an earlier comment from the guardian. The social worker says "Well perhaps we could reach an agreement between the four of us" and suggests drafting a new question. The guardian asks father if he "would be happy with this"… The chair, guardian and SW co-operate to rewrite the solicitor's question to take in consideration the information given by the parents. The social worker concludes "what we want to do is fire this off to the nearest solicitor". The chair says he will write to the lead solicitor.*
>
> *NM2: The chair asks a direct question to Danielle about her relationship with the baby's father. She says they are just friends. Alicia's guardian suggests asking the lawyers in court to add a question to the letter of instruction as she is not sure Danielle has decided what to do about their relationship and she "does not want to set her up to fail".*

NM4: The chair points out that the issue of alcohol and domestic violence raised earlier is not included in the questions. She explains to the parents that they will include this in the discussion around their relationship. The guardian says this should be included in the new letter of instruction.
NM5: There is a longer discussion about the next question about whether father's stated decision to separate can be relied upon which has to be rewritten after Dad's disclosure in the meeting. The chair, family centre manager and social worker explain the importance of exploring all permutations of the parents' relationship openly during this assessment. The guardian helps reword the question

Although the letter of instruction often felt simultaneously too simplistic in its implicit view of human nature and over-complicated in terms of language, there were times when a question appeared to help professionals name and tackle a difficult topic that people seemed to be avoiding. For example in NM2 questions about violence and substance misuse seemed to alert the chair when these issues had not been mentioned by professionals in their summaries. In NM5 the chair appeared reluctant to talk about the possibility of the parents relapsing and seemed surprised and relieved when this was named by the lawyers in the letter.

NM5: The chair reads the next question about the risk of relapse and sounds surprised that this is brought up. He says this will be discussed later. He alludes to differences between adult-focused workers and children's: "we can come on to that in a minute, what, what the consensus is because the Substance Misuse Team have a particular way of working with families…The chair moved the conversation on quickly saying that the issue of abstinence would be discussed at the "very end"

This part of the meeting tended to concretise the high stakes involved in care proceedings that had tended to be avoided or minimised in the early part of meetings. This sometimes felt emotionally intolerable. Five out of six chairs attempted to tackle the issue head-on and frequently encouraged other professionals to explain their concerns and name what they would recommend in court if the parents were not able to achieve the required changes. The exception was NM2 when the chair appeared less comfortable with the forensic side of the work and emphasised the therapeutic aims of the intervention over the assessment. All chairs explained that they will write a report at the end of the work that could include recommendations to separate children and parents. Most chairs also emphasise at this stage the agency's commitment to children remaining in the care of their family.

NM2: The co-chair says "right… lots of people don't want to do it so its, it's okay for you to say that". The chair adds "and also it can be kind of scary because it's like, you come in here… I'm going to be watched, plus I'm coming here with all other people, it's kind of exposing, you know people are going to be looking at you and watching you and, you know, writing things and talking to you about things, those are all perfectly normal feelings okay, its, its

okay to kind of have those, those feelings"…Alicia's guardian says: "I think (cough) I hope you don't mind (cough) me adding this (unclear) I think um (cough) Danielle it's important that you do understand why you're doing this... Um at the end of the day you've told me you want to keep Alicia, yeah, so that is your main reason, as you've said to me, okay, so I just wish you luck and just get on with it".

NM4: The chair uses the question about whether the child should be placed with the parents to explain to the parents that the "assessment could go either way". She adds that this is not an easy question to look at and says she has also been asked to look at contact. She checks that both parents knew they would be asked "that sort of question".

NM5 The chair explains that "if for whatever reason we don't think Michael can be in your care then they, everybody, has to look within your family"… "by the time we've reached that conclusion I think there will be some consensus that we'd need to be doing some work with Jane maybe, I don't know how that would work but just, just so you know that we have to make a determination about whether we think it's okay for Michael to return home or not, yeah, I just want to be clear about that. Any other points before I start answering some questions?"

NM5: The chair asks drug specialists "what would happen if Martin had a relapse… I mean [unclear] using in that sense, if, if for some reason something went wrong between now or halfway through the assessment, what has been discussed about that?" Martin's key worker says "Um, I think it would be quite difficult if Martin went into a full blown relapse… it would be quite difficult to come into court at this stage given how far down court proceedings we are, that Michael would be able to be placed with him." The chair says "So this is it then, this is, yeah, one more strike and you're out".

All chairs seemed to attempt to preserve an element of choice for the parents and asked them to consider whether they wanted to take part in the assessment. In the meetings observed, this choice felt sometimes hollow as in NM2 when mum said she had no choice; sometimes more genuine as in NM 3, 5, 6 when parents appeared to engage in the process; but in most cases, no real alternatives were offered to the parents.

Planning

The end of meetings often appeared very rushed with insufficient time for planning with most chairs interrupting discussions by explaining that they will write a summary of what has been agreed. In four out of six meetings the parents were asked to stay behind to visit the centre and set up appointment dates. In three meetings, professionals continued the conversation after the end. Organising dates around the rigid court time table was often complicated and rarely resolved on the day because of unknown factors (e.g. lawyer's response to the changes in the letter of instruction

in NM1); or complications that people had not thought about (mother's holiday and school dates in NM2); or requests to map out complex appointment schedules in writing (NM3, 5). During this noisy part of the meeting chairs seemed to work hard to maintain an engagement with parents by checking their understanding, apologising for the rush, explaining what will happen next or advising them to consult their legal advisors.

> *NM1: The chair attempts to close the meeting by saying that he will write to clarify his position and "what we are prepared to offer". The SW suggests that professionals stay after the meeting to write the questions. The chair says "if required" then invites people to agree dates for next meetings. The guardian warns the therapists that solicitors will want to know what they will be assessing... The chair moves the argument on by agreeing to write to the court. He then thanks the participants and ends the meeting. During this discussion the chair made very good observations about the father being excluded from much of the discussion. Everybody nods but this is not really taken up.*
>
> *NM2: The mother's guardian speaks for the first time to ask if there will be "a sort of midway meeting" which leads to a discussion about the court time table which will be negotiated in court the next day. Professionals talk about their holiday dates which happen to fit with the time table so the date agreed is "fine", "ideal". Danielle whispers to her foster-carer that the dates clash with their family holiday. The chair reassures them that they will be flexible but the social worker says Danielle will "still have to get permission from the court to leave the country". When a date seems to be agreed, the teacher asks how the assessment will fit around school.*
>
> *NM3: The chair checks the time table and suggests a plan. "Okay, so, I mean, I think, I think those are basically the things, so the way we would go about doing this, let's say if we have, remind me when the final hearing is, by what time do we have to submit the final report, do you know? Father says "October". The chair asks about the children's school and suggests that "we'll need to do some of this in, maybe in the holidays (unclear – baby noise) don't miss out on school".*
>
> *NM4: The chair apologises for cutting the meeting short and explains that they will look at all these questions again during the assessment. The social worker asked if the assessment will include separate meetings with the parents. The guardian helps her to ask about an aunt who had a Section 38 assessment which is still incomplete because their response to the finding is yet to be assessed. The chair asks why the uncle is not included in this assessment. The guardian says this needs to be discussed…The chair suggests that the "parties discuss this with legal" and agrees a wording for the assessment of uncle. She ends the meeting and asks the parents and interpreter to stay behind to fix dates of further meetings.*
>
> *NM5: The chair says that "because of time, this meeting can only give a "flavour" of the work and needs to move on to discuss the time table. He*

describes what a report might look like. The guardian asks if an interim report could be written. The chair says we would do a letter not a report. The social work manager asks if there could be a review meeting. A date is agreed for the meeting with people flicking through their diary and laughing. The guardian says it has to be before the court date. When dates clash with another meeting they agree to postpone it. Another date clashes with Jane's therapy and is ruled out. The guardian seems to keep the court timetable in mind.

Table 10 length of meetings

	NM1	NM2	NM3	NM4	NM5	NM6
Minutes	120	60	80	105	95	80

Meetings lasted on average one hour and a half (60<X<120)

2. Emotional dynamics of Network Meetings

a. Observation process

The observation process started before the Network Meeting when the researcher consulted the agency's two parenting assessment coordinators to access the incoming letters of instruction and contacts for the lead professionals. Most of the chairs expressed anxiety about being observed, expecting that parents would refuse or worried that the research would negatively impact on the families' engagement. In the event, only three parents declined consent. Interestingly these were White-British families who appeared on the surface more vocal than other families in the sample. One apologised when we met after the meeting saying that she would not have minded after all. She explained that she had refused because she wanted to express her anger to professionals. This points to the importance of power imbalance and fear of racism in considering stakeholders' responses to professional authority and raises the possibility that some BME families may felt less inclined or empowered to refuse to participate in the research than parents from the dominant culture.

The next part of the observation was in the reception area before the meeting while chairs were reading the letter of instruction (NM2, 4) or meeting with colleagues to prepare for the meeting (NM1, 3, 5, 6). There was often last minute activity to prepare the room, field calls from late-comers (NM2, 3, 4, 6,) or copy the letter of instruction and the atmosphere seemed tense. Approaching the parents was experienced by the observer with a mixture of anticipation and anxiety probably related to the fear that they would refuse or that I would disrupt the process. Three of the lead solicitors had responded positively to the request to forward information to participants, but one refused and the others did not respond. Therefore four families said they had not been informed of the research before the meeting, two of which still consented on the day (NM2, 4).

In most meetings the observer sat in the circle and introduced himself in the round at the start of the meeting as a researcher seeking permission to record and anonymously transcribe proceedings.

Overall, the observation process was very tiring and stressful as the level of tension was often high and the amount of material to be processed felt overwhelming both in quantity and emotional quality. Tensions showed when I became unusually irritated by small distractions such as a colleague asking me what I am doing in the waiting room (NM4) or a social worker asking me not to rely on a father's translation (NM3). I was often exhausted after meetings, feeling overwhelmed by the amount and complexity of data gathered and found it difficult to consider observing the next meeting until I had transcribed the current one.

b. Analysis of observation

Data from the observation, including audio recordings, transcripts and observer's notes were presented at a monthly research seminar and colleagues' responses were discussed to provide a way of triangulating my own responses and analysis. Initial reactions in the group were often critical of the intensity of meetings with worries about the level of pressure placed on social workers at the start or about the legal conversation being too much for parents to understand. Colleagues with experience of court proceedings were surprised that participants were able to question the letter of instruction which is often seen as a court order that has to be implemented uncritically. People with no direct experience of court expressed outrage at what they saw as the complexity and brutality of the system.

A search for neutrality was identified as a central theme both for participants in the meeting and for the researcher. I therefore became alert to occasions when I was pulled out of the neutral observer position. For example in NM4 when the emerging impasses became intolerable, I became convinced that a compromise could be found between the mother and the judge's finding of fact that would allow the child to return home. I went as far as writing a question on a piece of paper that I was tempted to give to the chair. Before I could, the social worker made a very similar intervention which did not have the impact I hoped. In spite of this, I remained more optimistic of the outcome than other professionals appeared to be, as if I could not consider the possibility of this mother and child being separated. The mother appeared at times to look towards me and I felt drawn to rescue her. I was moved by her inability to comprehend the power of state interventions in family life and with her frustration when she said "if I lie, can I have my baby back?"

During meetings I made brief notes of the way I was feeling at particular moments. A number of themes reoccurred as I was drawn towards one particular point of view or the other. For example in NM2 I noted feeling unusually relaxed and impressed by the nurturing environment provided by professionals until I started feeling envious and resentful without knowing why. It is only when the mother said she did not want to be here but had no choice that I understood something of the resentment she might have felt with people encouraging her to do something she does not want to do. While reviewing the recordings during the analysis I noticed clear signs of her anger in the early parts of the meeting that I had not picked up on the day.

At times, I became aware of incongruence between the content of what was being said and the way people behaved. For example in NM2 and NM3 when several professionals focused their attention on babies, smiling engagingly while others talked about serious matters including the findings that the father had killed his first wife. Becoming aware of my own emotional reactions (transference) helped me consider what may have been avoided or guarded against, including sadness at

stories of loss in the past and guilt at the likelihood of separation to come (counter transference); for example when the father in NM5 hints at but cannot quite name the possibility of his son being adopted; or when the mother in NM1 repeatedly asks why she cannot join her child in the foster placement; or in NM3 when the knowledge of the father's past makes it difficult to consider a positive outcome to the assessment. Discordance between stakeholders appeared at times to be exacerbated by cultural misunderstandings. In NM1, 3 & 6 parents appeared unable to comprehend the possibility of children being removed from their families until differences in the role of state intervention and kinship between cultures were discussed and key terms like emotional needs were explained.

In all meetings participants displayed considerable courage in addressing very painful and contested issues directly. The letter of instruction sometimes provided helpful prompts by naming problematic areas that could be attributed to solicitors. The paramouncy principle was also used to remind participants of the need to prioritise the best interest of the child. Example of this include NM1 when the interpreter struggled to translate the possibility of the child being adopted away from the birth family; NM3 when the chair continued to encourage the mother to reconsider her position towards the finding of facts; or NM5 when the chair eventually addressed the implications of the parents' possible relapse on the child.

c. Summary of emotional themes

An overview of the emotions identified by the observer as each meeting evolved is provided in Table 11. This contributed to the thematic analysis and is included in the composite synchronic description of Network Meetings in the first part of this chapter (Section 1).

A level of anxiety was present in all meetings, probably relating to the seriousness of matters at stake, the aura of the court and the potential conflict arising from contested matters. This was often followed by momentary relief when parents appeared to respond to professionals' engagement and positive descriptions of the parents were shared. After a while, it became difficult not to make value judgments about the quality of the work of professionals or to ascertain the veracity and honesty of people's contributions as trust seemed to take a key position in discussions. I sometimes felt pride in a helpful professional intervention (NM4), irritation when professionals argued (NM1, 6), or disappointment when parents were not heard or opinions were not questioned (NM 2) or when meetings appeared to get lost in procedural matters (NM1, 4).This sometimes led to a compulsion to rescue parents (NM1, 2, 4); to wanting to help professionals (NM4, 5) or to feeling disappointed and hopeless.

Table 11: Observer's emotional reaction in different parts of meetings

NM1	NM2	NM3	NM4	NM5	NM6
Worry about vulnerable parents	Anxiety about recording	Expectation of drama	Anxiety	Intimidated by numbers	Fear of failure
Relief when mum speaks	Cosy	Consider hiding tape	Hopeful	Keen to help professionals	Anger at social workers
Disappointment in professionals	Envy	Impressed by professionals	Sadness Empathy for parents	Worry about recording	Sympathy for grandparents
Losing attention	Thinking about what is avoided	Confused by incongruence between seriousness of crime and jovial atmosphere	Impressed by professionals	Envy of adult professionals' relationships	Anxiety (walking on egg shells)
Fear of disintegration	Sad for vulnerable mother	Anger	Bored Frustrated	Suspicion	Frustration with grandparents
Hopeless & disappointed by complexity of systems	Wish to rescue parent	Suspicion and Disappointment	Compulsion to intervene	Competitive about engaging parents	Wish to take charge and rescue children
Powerless; wish to help parents	Anger that she was coaxed	Disgusted by perceived incongruence	Disappointed by lack of resolution	Guilt about competitive reaction	Determination to find a way through

Significant moments were often accompanied by a fear that the recording equipment would fail (NM1, 3, 4, 5) while a feeling of boredom seemed to be associated with a lack of authenticity or hopelessness (NW 1, 2, 3, 4). Table S provides a summary of the observer's impression of the overall state of the system, the quality of the relationships in the meeting and identifies significant moments when the observer was pulled out of a preferred neutral position.

Table 11 Observer's overall impression.

	NM1	NM2	NM3	NM4	NM5	NM6
State of system	Well-meaning but sad & hopeless	Maternalistic attempt to cajole angry young woman	Battle of titans, both looking for evidence to prove case	Stuck	Guarded optimism	Polarised
Quality of relationships	Compete with kindness	Caring but patronising	Loggerheads	Empathetic	Compete with competence	Distrust
Significant moments	Disappointment in professionals and in the complexity of the system	Wish to join the rescue of mum	Consider hiding tape; Anger when people laugh at mum	Compulsion to intervene and ask question	Wish to rescue dad while remaining suspicious	Anger with and empathy for both sides
Position experienced by the observer	Powerless	Caring	Mad / disgust	Omnipotent	Rescuer	Mediator

3. Summary: What happened in Network Meetings

This chapter presented data gathered and analysed in the six meetings into a composite synchronic description of processes observed in Network Meetings. The analysis highlighted the sense of drama surrounding these meetings with a great deal of anxiety and tension. All six meetings followed a similar format, moving through a number of steps from introductions to planning of the forthcoming assessment. The beginning of meetings tended to be dominated by "structure" with

chairs leading introductions and checking the parent understanding of the court proceedings and the reason for the assessment.

In the second and longest section, chairs invited professionals in turn to summarise their involvements and assessments before encouraging questions and dialogue then searching for a consensus or agreed formulation. Chairs emphasised the neutral position of the agency, as independent advisors to the court separate from the legal and social care fields. All worked hard to foster a sense of common purpose and collaboration between participants, but there was often an uneasy balance between engagement and forensic exploration of disputed facts. Some meetings managed to carve a space for dialogue to explore different perspectives and experiences. New themes not addressed in letters of instructions were identified or modified. Other meetings seem to struggle to move away from procedural concerns and polarised positions (NW1, 2).

In the third part of meetings, letters of instruction were scrutinised for their meaning and purpose so as to ensure that it was understood, fit for purpose and adequately addressed the themes/concerns identified. The questions appeared to bring back the authority and structure of the court in meetings but were also frequently criticised and subject to amendments. Questions sometimes helped participants address painful or contentious topics that had been avoided earlier. The end of the meeting was often rushed with professionals attempting to negotiate dates for the forthcoming assessment to fit with the court time table.

These three stages of Network Meetings identified in the analysis (introduction; summaries; planning the assessment around the letter of instruction) are reminiscent of Van Gennep's descriptions of the ritual process (1909) (Turner 1969).

4. The story so far: ritual-like qualities of Network Meetings

The letter of instruction analysed in Chapter 4 identified some of the benefits and limitation of a court system dominated by structure. The request from the court for a parenting assessment emerged as a search for a thinking space (Bion 1961, Britton 1998) to understand complex and often contradictory stories, perspectives and experiences that may be difficult to unravel in a structure dominated system.

In the above analysis, the Network Meeting comes across as a place of transition between the domain of the court dominated by structure and binary thinking and the more existential domain of the clinic. The main purpose of Network Meetings appears to be the creation, with the consent (more or less) of all parties, of a protected space where contested issues and impasses that have been identified can be revisited from different angles and the possibilities of change can be explored. The process comes across at times as quite "messy", tense, rushed, and emotionally charged. Yet a pattern emerged in the six Network Meetings that is reminiscent of a

kind of ritual identified by anthropologists with chairs striving to engage participants in a critical review of the past in order to create a safe place for an independent assessment that will inform future recommendations. Turner described rituals as a process with a number of prescribed steps that help move from one stage to another, particularly at times of transition, illness and anxiety-provoking situations (1969). Like Van Gennep (1909) earlier, he identified three stages of rituals: separation, margin and aggregation. Looking again at the three phases identified in meetings through the lens of a ritual can help analyse and understand its function within the process of transition from the court to the clinic.

- Separation: Inviting participants together for this first meeting outside of the court arena without their legal representatives (at a time when they had become accustomed to communicating indirectly through court statements agreed with their legal representatives), marks an important difference between the court proceedings and the forthcoming assessment. The decision to exclude lawyers and not write detailed minutes sends an important message about the separation between court processes and the clinic. It comes across as a statement of difference, an attempt to create a special space that will report directly to the judge. This is reinforced by the chair taking the lead, stressing the independence of the clinic while using the authority of the letter of instruction to assert the importance of the assessment process. Asking everybody to wait in the reception area until all participants had arrived could indicate the "levelling" (Goffman 1959) intentions of the meeting. It may also add to the sense of drama and occasion that was palpable in all meetings.
- Margin (Liminality): The second stage of the meeting tended to be more conversational and appeared at times to provide a taster of the clinical method likely to be dominant during the actual assessment. Chairs invited participants to summarise their involvement and assessment of the family and interviewed them in the presence of others, using a number of clinical interviewing styles including systemic techniques. They encouraged questions and dialogue between participants to open up different perspectives and provide opportunities to observe the quality of relationships between stakeholders. These interactions were described by chairs as "taster" (NM1), giving a "flavour" (NM3) of the situation or examples of the type of questions, thinking and work that will take place during the forthcoming assessment. Chairs also attempted to draw out the complexity of the systems and dynamics involved and bring the emotional qualities of families' stories to the fore. They seemed to strive to support and check parents' understanding of the process but there often remained an uneasy balance between engagement and forensic exploration of disputed facts.

- Aggregation: In the third part of the meeting, chairs reintroduced the letter of instruction in an attempt to identify how the questions raised in the court arena could be answered in the clinic within the time table set by the court. The letter of instruction brings in the formality of the court but is deconstructed in the meeting. This also provided a taster of the forthcoming assessment, but this time within the structure provided by the court. This section of the meeting came across as an attempt to integrate the domains of the court and the clinic. This was an incomplete process and the end was often rushed. The plan remained incomplete, even messy with chairs offering to write directly to the judge via the lead solicitor, sometimes with the support of the child's guardian. This suggests that the main interest of chairs was in understanding processes and relationships and in engaging participants rather than just setting a structure for the assessment. The incomplete ending of meetings and the offer to summarise the plan in a letter to the court may also provide chairs with additional space and time to reflect on the processes and information gathered during the meeting and to keep some manoeuvrability. Most chairs invited parents to take time to consult their solicitors afterwards and consider whether they wanted to take part in the assessment

5. What next

The findings of this research have so far illustrated many of the concerns identified in the literature review about the dichotomy between justice and welfare domains. The Network Meeting emerged from the above analysis as a kind of ritual to facilitate the transition between the two domains. Before exploring further the characteristics of this ritual-like space, I would like to explore in more detail how the two domains emerged in Network Meetings. I will use Turner's concepts of "structure and communitas" to represent aspects of the two domains. Turner described how he came to develop the concept of communitas as a counterpoint to prevalent studies of social life that had become dominated by structural analyses:

> *"It is as though there are two major models for human interrelatedness, juxtaposed and alternating. The first is of society as a structured, differentiated, and often hierarchical system of politico, legal and economic positions with many types of evaluation, separating men (sic) in terms of more or less. The second, which emerges recognisably in the liminal period is of society as an unstructured or rudimentarily structured comitatus, community, or even communion of equal individuals who submit together to the general authority of the ritual elders" (1967 p 96).*

Turner (1969, 1986) developed the concept of communitas to access what he described as the "anthropology of experience". It is an attempt to define what he considered to be outside of "structure", what is less tangible but can be understood at the level of experience, be it at the level of cognition, emotions, relationships, or ethics/spirituality. "Communitas" refers to the way social situations are lived, felt and

expressed (consciously and unconsciously through language, emotions and relationships). Communitas is what we share, the humanity behind structure, “an undifferentiated experience of communion, equality and openness to the other” (Krause 2012 p xxxii)

Structure is easier to define and observe. It is “a term used in the social sciences to refer to patterned social arrangements in society that are both emergent from and determinant of the actions of the individuals” (Wikipedia 2013). “Structure” refers to social arrangements in society that emerge from and determine the action of individuals (i.e. the norms, rules (written or unspoken), system and patterns of behaviour, beliefs or relationships that underpin how we live (Krause 2012, Giddens 1984). “Structure is rooted in the past and extends into the future through language, law and custom” (Turner 1969 p 113). It is of “society as a structured, differentiated, and often hierarchical system of politico-legal-economic positions with many types of evaluation, separating men in terms of ‘more’ or ‘less’.” (1969 p 96). The search for explanations of social facts within the realm of structure rather than in terms of the individual was for a time dominant in anthropology and social sciences in general (Giddens 1984).

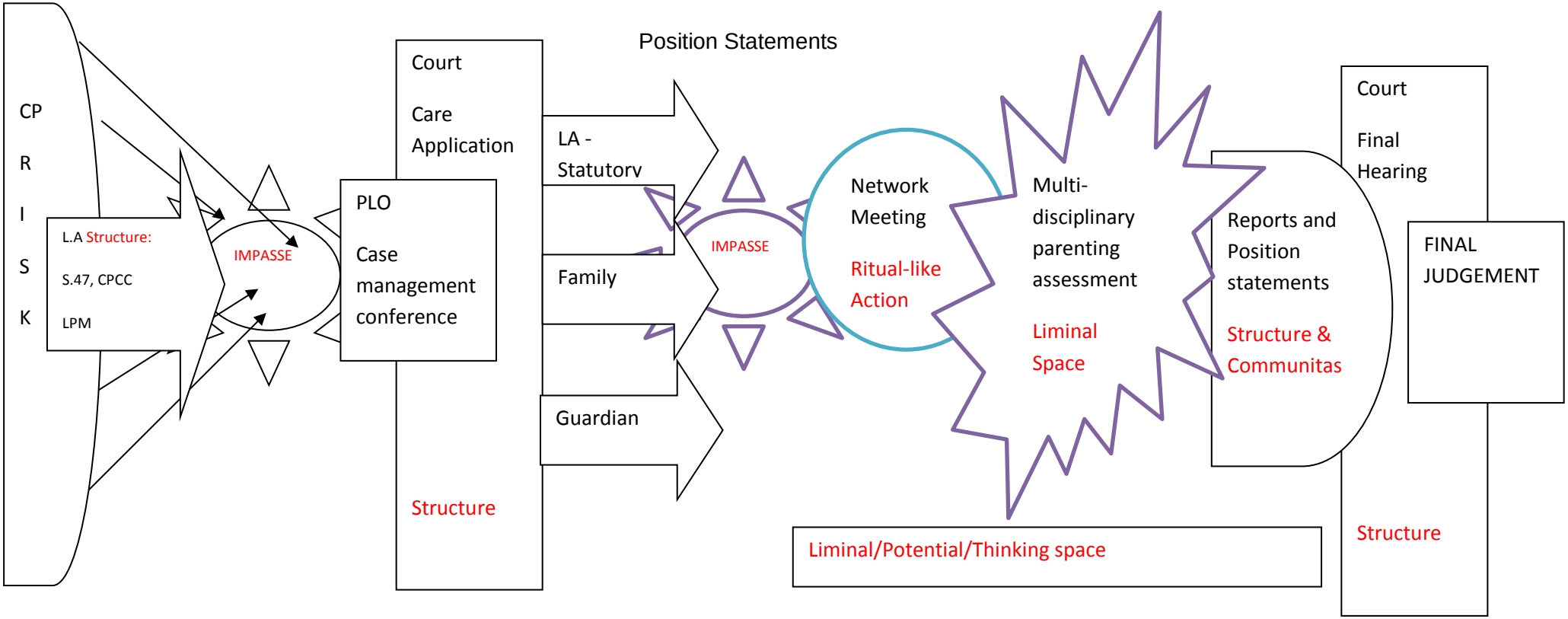
Turner’s concept of communitas on the other hand is located in the here-and-now and the less tangible domain of emotions, agency and interactions. It can be seen as a way of reintroducing the individual’s experience into the analysis of social processes. Like Bateson’s concept of “ethos” it provides a “class of explanations” (Krause 2007 p 122) to help clinicians and researchers identify processes based in the realm of emotions, experience and relationships. It provides a useful umbrella concept that can encapsulate the epistemological locus of the therapeutic domain prevalent in CAMHS and capture significant aspects of psychoanalytic and systemic analyses of human experience (Flaskas 2005).

For Turner, “communitas” is not an alternative to “structure” but another side of the same phenomenon which means that they can only be grasped in relation to each other (1969 p.127). While there is a dialectic between “the immediacy of communitas” and “the mediacy of structure”, in rites of passage there is a movement between the two as “men are released from structure into communitas only to return to structure revitalised by their experience of communitas” (1969 p 129).

During this analysis of Network Meetings, Turner’s concepts of “structure” and “communitas” came to represent helpful descriptors of the phenomena observed in Network Meetings with the former appearing dominant in the court domain and the latter being favoured in psychotherapy.

The next chapter will review the six meetings individually for evidence of and movement between “structure” and “communitas”.

Diagram C: Care Proceedings Process – multidisciplinary assessment in contested cases



Chapter 6 Locating “communitas” in a structured world

This chapter will review the analysis of the six Network Meetings for evidence of Turner’s concepts of “structure” and “communitas” and consider significant moments when the balance between the two seems most salient. These two concepts are used as conceptual tools to assist in the interpretation of data.

The summary will also consider the factors that may foster and hinder the shift from a “structure” dominated domain to promote the emergence of “communitas” which is seen as potentially helpful in facilitating the transition from court to clinic and the creation of a space to think.

1. NM1: “Structure” dominated process

The underlining story of this family felt very sad. A young mother brought up in the Indian subcontinent married a relative later diagnosed with schizophrenia and found to use drugs. She arrived in England, not speaking the language, reported incidents of domestic violence, was admitted to hospital with a diagnosis of bipolar affective disorder and had her first child removed at birth when professionals suspected she may also have learning difficulties. Yet in spite of many well-meaning interventions by professionals to empathise and engage with the parents, the meeting remained dominated by legal processes and arguments about the structure, brand and timing of a psychological assessment requested for mother. The social worker who had been involved in legal negotiations appeared anxious to ensure that the decisions agreed in court were implemented in this assessment. He clashed with the psychologist who wanted time to build a relationship with the family and argued for maintaining some manoeuvrability and autonomy in her selection of assessment method. The guardian blamed the mother’s solicitor for the rigidity of the request and agreed to mediate between court and clinic.

Although this argument seemed impossible for the parents to understand and felt at times very frustrating, recognition emerged in the network that the system was “too complicated” and rigid for parents to comprehend. The chair reinforced the need for good inter-agency coordination to minimise the family’s distress *(“I think it’s important that we’re going to have to… whatever we do with this assessment, is to keep communication with everybody. There are going to be so many people doing different things and we have to make sure that … all of these different commitments don’t impact on this additional commitment now they’re having to go for a court assessment”*). The guardian recognised that the social worker would need back up from other stakeholders to persuade legal advisors to agree to a simpler structure for the assessment. This recognition emerged at the level of “communitas” as stakeholders

experienced at an emotional level the stuckness and futility of the arguments as well as the vulnerability of the mother.

The meeting managed at times to move beyond “structure”, when professionals delivered their summaries with sensitivity and empathy directly to the parents in the presence of others. The chair encouraged a three way dialogue with the CPN and the parents which allowed a more meaningful and sympathetic understanding of the mother’s thinking that may have been misinterpreted in court (e.g. the guardian explains that *“the family might have some desire for the baby to be cared for in the short term by family members rather than in foster care”… “her wish would be with her aunt while this assessment is going on, so… not in a foster home”.)*

The psychologist made several attempts to engage the mother in conversation and said she will *“try to describe in plain English”* what the assessment will entail by giving examples of questions she will ask the mother. The family therapist who shares a similar cultural background to the parents agreed that the mother had been “*given information in a way that is not coherent”* and joined the conversation. The mother became more spontaneous and responded positively. She answered the psychologist’s sample questions in the here-and-now but was reminded by the chair that this conversation would have to take place later during the assessment, not in this meeting. This was a significant moment when the mother answered in the domain of “communitas” (here and now) while professionals’ response remained dominated by the “structure” of the assessment. However this enactment in the meeting allowed a deeper understanding of the dynamics involved and all participants seem to become aware of the tendency and risk of the parents being silenced by the assessment process and of challenges involved in translating such a complex process.

A similar pattern emerged later on in the meeting when discussing a question raised in the letter of instruction about domestic violence. While the lawyers and social worker seemed to be asking for a determination in binary terms *(“there are only two interpretations”)* as to whether violence had taken place or not, the chair and the family therapist outlined the complexity and sensitivity of the issue. She empathised with the parents about their reluctance to discuss this topic but asked the meeting to reinforce the need of doing this work *(“I think it’s very important, just one thing… that the parents are aware that, while it is a very sensitive issue, but this is something they need to work on, they have to be feeling comfortable to work with us…”).* In this extract the family therapist appears to interweave both domains, using “structure” to reinforce the necessity to explore domestic violence while recognizing at an emotional (“communitas”) level, how difficult this will be for the parents.

2. NM2: Discomfort with "structure" limits the emergence of "communitas"

This was an assessment of a young parent who is also a child subject to her own protection plan and child care proceedings. The meeting fluctuated between addressing her as an adult who has choices/responsibilities and as a child who needs guidance, support and reassurance. On the surface, there was a "cosy", nurturing atmosphere in the meeting and a high degree of co-operation and agreement between professionals that sat uneasily with her passive demeanour which made sense towards the end when she said "Well, I don't wanna do it but I have to". This brought more congruence in the meeting but it was not explored further as professionals used authority, somewhat apologetically, to coax her into agreeing. The guardian said: *"I think (cough) I hope you don't mind (cough) me adding this (unclear) I think um (cough) Danielle it's important that you do understand why you're doing this... Um at the end of the day you've told me you want to keep Alicia, yeah, so that is your main reason, as you've said to me, okay, so I just wish you luck and just get on with it"*. This significant moment illustrated how the emergence of "communitas", (when Danielle's experience of the process appeared to be understood at a deeper level), was closed down as she was coaxed into agreeing to take part in a court assessment dominated by "structure" and binary thinking (co-operate or risk losing your child).

The meeting started formally with the chair asking people to write down their titles and roles but the format of the meeting and court proceedings was not explained as it was in the other five meetings in the research. The chair asked forensic questions from the beginning *("why isn't he (father) here"; "who is monitoring" substance misuse…)* which implied that the meeting has legal authority in the domain of "structure". But this was not made explicit. The chair appeared to minimise the authority and high stakes of parenting assessments. Only twenty minutes into the meeting did the chair ask Danielle if she knew *"what you are letting yourself in for"*? She described the dual role of the centre ("… *we do assessment… and therapeutic work*") but she strongly emphasised the latter and minimised the former.

Later in the meeting, there was recognition of the importance of the legal framework as all agreed that copies of the letter should be circulated. *"I actually think it is important for me to go through the letter of instruction just so that you know some of the questions that we've been asked okay? So I'm going to go through it and we will make sure that you have a copy of it 'cos you should have it really to be honest before today"*. However the chair went on to read the questions one by one, accepting Danielle nods of understanding. There seemed to be resignation, at a non-verbal level, and explicitly that *"it is so complicated" even for "a social worker"*. The chair

offered to photocopy the letter for Danielle to read at home later, but without entering into dialogue to check meanings. The authority of the letter of instruction was also undermined when mum says she has not seen it and professionals laugh with the guardian saying *"this is not unusual"*. This suggests that the worlds of "structure" and "communitas" in this meeting remained largely separated and appeared at times unbridgeable. Professionals came across as uncomfortable with their dual role as experts and clinicians and did not engage with either in any depth. Danielle's views struggled to emerge, maybe because she was thought too young to engage fully in decision-making processes.

A sense of "communitas" did emerge at times, particularly when attention was drawn to the baby, whose noises drew the attention of adults and appeared to provide a sense of common purpose and togetherness. But Danielle seemed disengaged and her relationship with professionals continued to feel inauthentic. This changed for a while towards the end of the meeting when, with her foster carer's support, she was more able to express herself. There was more congruence between language and demeanour and more dialogue than monologues (Seikkula 2006) as Danielle briefly shared her views about the assessment and her relationship with Alicia's father. She also surprised everyone by showing strengths and organisational skills in preparing for the family holiday. However this did not last long as professionals persuaded her to agreeing to the assessment. The discussions moved on quickly to detailed planning of dates and logistics of the forthcoming assessment before a formulation of the situation had been agreed. This suggested a level of reluctance to engage overtly and deeply with either domains of "structure or "communitas" which seemed to pervade this meeting as a whole.

I later learnt that Danielle did not complete the assessment and made a formal complaint against one of her key workers. This was the only assessment in the sample that was not completed and with hindsight, it is possible that a more challenging Network Meeting, engaging meaningfully with human aspects of the process (e.g. understanding Danielle's reluctance and engaging at an emotional level with her experience, the frustrations, polarities and complexities of the situation) may have improved the outcome.

3. NM3: "Communitas" emerging within containing functions of "structure"

This was a high profile case which had reached impasse one year into proceedings in spite of the outcome, at the level of "structure", seeming obvious as the prognosis for Mr Miah seemed, on paper at least, very poor. Such referrals are nicknamed "rubber-stamp" in the service and often turned down as the likelihood of change is so limited. However first impressions of

the parents in the meeting were more positive as the one-year old boy moved cheerfully from his mother and father who displayed good parenting and communication skills. This dichotomy between the description of the father on paper and in person is likely to have contributed to the impasse and to this referral. In spite of strong evidence, the local authority had not been able to convince a judge who seemed to require a more qualitative assessment of the relationships, personalities and capacity to change. This highlights one of the limitations of the "structure" dominated court system in adjudicating on data based in the more subjective realm of "communitas".

The social work manager was clear from the beginning that the father should not be trusted as he might *"co-operate with the assessment to prove he is doing it but he does not accept the need to change"*. The chair started the meeting by reminding participants of the independence of the agency before inviting the social worker to briefly *"summarise the reasons for this assessment".* He invited the parents to comment and checked their understanding and the purpose of the assessment. He then encouraged a dialogue between the father and social work managers about their communication. This allowed for an enactment (Minuchin 1974) of the relationship in the here-and-now and demonstrated some underlying assumptions that they held about each other and the patterns of their relationship (Chair: *"Okay. So, we don't have to hear all the detail now, I'm just getting a flavour that there are some tensions*"). These enactments helped identify and illustrate some of the concerns and polarities, at the level of language, interactions and emotions, bringing forth a sense of "communitas" in the meeting. Attention was afforded to non-verbal communication *("I notice that you are smiling… do you want to comment on it"*) and interactions (All laugh as baby crawls under dad's chair. The psychiatrist says *"we've lost the baby*"). This seems to help people feel heard and understood.

In the second part of the meeting, the letter of instruction helped to bring "structure" back in the meeting but there remained a sense of integration between "structure" & "communitas" as the chair explained then frequently checked the parents' understanding and willingness to engage in this process. The forthcoming assessment was framed as a "*space to think*" and explore complex issues which were spelt out and explained (e.g. father's capacity to co-operate with professionals, Mrs Begum's capacity to stand up to him when this may not fit with her cultural expectations, and the older children's understanding of their father's mental health and their mother's death). There was recognition that this will take time, commitment and support. The forthcoming assessment was reframed as a *"taster" or "a trial of therapeutic work*" to give a chance the parents and professionals to understand and initiate change. There was a shift in the father's position towards the end of

the meeting during a discussion about his children's understanding. He appeared more emotionally connected and acknowledged some vulnerability when he said *"Okay, yeah, okay, we coming to that (unclear), we'll explore everything around that"… "I did find it confusing. I'm confused exactly what we're talking about"*. He seemed to move from a position of certainty to one of not-knowing (Anderson 2005) or depressive position (Klein 1944) before agreeing to take part in the assessment. The chair moved on *"Okay. So, I mean, we just put it on the map now"* to describe how the assessment will address these issues.

The "structure" of the court remained present as the chair said *"Okay, so… remind me when the final hearing is, by what time do we have to submit the final report, do you know? Father says "October"*. He reinforced that this assessment was time limited and that attendance once agreed would be compulsory. He stressed that a final recommendation would be made to the court for a final hearing, but that until then the team would maintain a neutral position. Attention was paid to the whole network around the child, including absent people. For example, the psychiatrist brought up an "organisational issue" about dad's psychiatrist who was not willing to come to this meeting "unless he was paid". He talked about the importance of inviting the Adult Mental Health team to further meetings and he emphasised the need for the assessment to take a holistic picture including the children's needs (*"I would like to add…I'm not just concerned about protection issues, but also"* whether the parents can meet the *"holistic needs of their children including the older two who witnessed domestic violence"*.

4. NM4: Structure as container and constraint

Previous assessments in this case appeared so far to have been conducted in the "structure" dominated domain of court including complex criminal proceedings. A fact- finding hearing in the family court was seen as an injunction that all the parties had to accept as truth. The process had reached impasse as the parents did not accept the finding. Within the realm of "structure" this would be likely to lead to the child not returning to the care of the parents while they remain "in contempt" of the court. However there seemed to be recognition in the legal system that the parents may need time to consider their position on the finding before a final life-changing decision can be reached by the court. An understanding seemed to emerge in the meeting that this shift needed to take place at a psychological and emotional level ("communitas"), not simply because parents have been instructed to ("structure").
The chair started by asking for the parents' understanding of the reasons for the assessment. Mother initially took responsibility *("I made a mistake" and "want to learn how to bring up my child"*) then blamed professionals for the

severity of their response saying that she asked for help from dieticians *"with good intentions*" but social workers "*snatched her*". She cried when she said this was a "*big punishment*". The chair attempted to maintain a neutral position stating that she knew there were disputed facts about the nature of the injuries to Sarah and that "*we'll come back to this… after hearing from social services first".*

The social work summary remained factual and answered forensic questions from the chair. She seemed aware of the human tragedy and pain of a child's removal from her parents and to distance herself from the original decision taken on the recommendation of paediatricians. The chair encouraged dialogue between the parents, guardian and social worker about the impact of the fact-finding hearing. This allowed some enactment of the powerful dilemma and impasse that was experienced at the levels of language, interactions and emotions ("communitas"). However dialogue remained dominated by the "structure" of proceedings as the chair explored what various agencies would do if parents do not change their view. The mother said she was frustrated because the judge says *"it is 100% bite mark"*. Father says he wanted to believe the judge but could not accept the implication that his wife would have had to be "*drunk or insane"* to do something like this. The chair summarised the situation as *"we are stuck"*. The social worker tried to offer a way out by asking the mother if she would respond differently if she was not worried about further criminal prosecution. Mum asked in English *"if I lie, can I have my Baby back*" before adding that she could not because that would mean "*there is something wrong with me and I need counselling or something" or that she is "mad"*. This felt like a very powerful heartfelt intervention that encapsulates her experience of her stuckness and impasse ("communitas").

The chair's response remained in the domain for "structure" by restating the position that "*we can't, we can't give your baby back if you say it just because you think it's what we want to hear, um, … We, we have to accept the Judge's findings, we are not in a position to disagree with what a Judge has said*". But the impasse had been felt and understood at an emotional level and there was a recognition that the family would need time, support and a space to think: *"What we want to do is some work with you to help you think about what happened, how things got so difficult, um, that it led to something like this happening so that we can think about helping you find ways of not, not letting the situation get so difficult again*".

The presence of the court in the Network Meeting was reinforced by the guardian going out of the room on two occasions to check whether an amended version of the letter of instruction has been faxed to the office. But when the new letter finally arrived, the questions actually appeared to help

widen the discussion to the family history, including traumatic experiences that were understood at an emotional and embodied level as the chair said she could see from the father's reaction that *"those things are still affecting him*". Questions enquired about the views of other members of the extended family which helped clarify the parent's position. The father explained that his family did not understand how a child could be removed and blamed him for allowing this to happen. The chair acknowledged the importance of context (including culture, religion and community) and explained that "*part of the work we'll do together is, is talking about the different cultural expectations of children and of parents and the difference in the law and what you're familiar with and what's happened here".* The chair also used a question in the letter of instruction ("whether the child should be placed with the parents") to explain to the parents that the assessment could go either way. She added that this was not an easy question to look at. She checked that both parents knew they would be asked "*that sort of question*". This part of this meeting can be seen to illustrate how the domains of "structure" and "communitas" can be interwoven to start to address the family's experiences of the impasse. The chair seemed able to use the constraints and containing features of "structure" in the court arena to pursue very emotionally painful topics in order to provide a more in-depth understanding of the family situation and clarify the challenges ahead.

The analysis of "structure" and "communitas" in this meeting was further illustrated by the complexity of the translation process. At one point the social work manager pointed out that there might have been mis-translation of the words "hit and bit(e)", earlier in the court process which the family felt had led to an injustice. This was initially addressed in the domain of "structure" with a number of requests from professionals for the interpreter to offer a more "literal translation" of discussions. In order to do so, the interpreter often had to use English words for concepts and institutions that have no easy equivalence in the other language. Words like attachment, care order, etc… pepper the translation. Literal translation also made it more difficult for the interpreter to convey some of the meaning and context behind some of the questions and answers. She appeared increasingly frustrated and at times her demeanour appeared at odds with the content (e.g. smiling when discussing domestic violence or self-harm, and seeming reluctant to translate emotionally laden words like adoption). The request for literal translation can be seen as an attempt on the part of professionals to keep the conversation in the domain of "structure" which soon proved inadequate for the purpose of the meeting, particularly when discussing emotive subjects like mental health, domestic violence, adoption or the family's incomprehension at the level of state intervention in family life. Mother's interventions in English ("if I lie, can I have my baby back") brought the attention of the meeting in a very powerful way to the emotional qualities of the impasse and wide-ranging implications at a

personal and relational level of accepting the judgement of the court (e.g. shame, fear of madness, of losing a daughter, of being ostracised by the community and extended family etc..., as well as the fear of arrest identified by the social worker).

5. NM5: From structure to structure via communitas

This referral arose in the context of an innovative pilot project chaired by an experienced judge in the family court focusing on parents who misuse drug and alcohol (FDAC). One of aims of FDAC is to improve communication between court and professionals and "involves co-ordinating a range of services so that the family's needs, concerns and strengths are all taken into account, with everyone working towards the best possible outcome for the children - a stable and safe family which is able to stay together" (FDAC 2008). Within the context of this research the development of FDAC can be interpreted as an attempt to engage with both levels of "structure" and "communitas" by reducing the formality of proceedings and building relationships between stakeholders with fortnightly meetings with the judge.

From the start of this Network Meeting it was apparent that parents and professionals knew each other well but there remained uncertainties and suspicion about the level of parental co-operation, competing interests between the two parents and differing views between children and adults-focused professionals. The heavy silence at the start of the meeting, when the chair left the room for a few minutes, suggested that participants expected a "structure" similar to that of the court where the judge probably chairs meetings.

On his return, the chair took the lead but quickly marked his intention to provide a different structure to that of the court. He engaged the parents and their key workers from the start with humour and care (e.g. *"it'd just be good for us to hear altogether a summary of those things so we're all clear about what's happening now"; "there will be a chance "for you two to tell us whether you agree with some of those things or not (…) 'cos at the end of this meeting it would be useful for us to know if… when you come (here) what's going to work best for you as a family"*). He also asserted the difference between this meeting and court hearing. When he noticed "people scribbling" he explained that there was no need for minutes as *"I will do a summary letter for the solicitors"*. He frequently invited the parents to comment: "is there anything you, you two would like to say in response to anything that has been said so far about that?"

The chair moved on to forensic enquiries about the parents' relationship which was identified as an issue in the social worker's summary. In court, the

parents had stated that they had separated in spite of recent evidence to the contrary. They had therefore been asked to provide a written statement to confirm their intentions to which they could be held to account. In the meeting, with a lot of encouragement from the chair and reminders about the importance of "honesty" the father acknowledged that he is "not sure". The following sequence highlights the distorting effect of "structure" on people's relationships and decision- making processes.

> Martin explained with a lot of hesitation that he was *"kind of being led to"* apply as a single carer because he has *"been told (he has) got till Michael is a year… then the social services want him placed with… you know with me… within a year with, yeah with me and, and, basically Jane's timescale doesn't, doesn't fit that so, yeah, kind of, that's the understanding why I put myself forward ehh…"* When asked for clarification, Martin says *"if I had a choice now I would prefer if… if, if it was a joint thing to be honest, you know, yeah". When asked about their relationship Martin says "it's on hold and basically you've just gotta give it time and see what happens, you know, it's, when we both stopped using then yeah it's just seeing you know seeing what happens, give, give stuff time you know*". He then agreed with the chair's comment that *"ideally you'd like to do it together"*. Jane also agreed that *"ideally I would like to be joint carers*". The chair thanks them and says *"it's important for us just to be honest" and "for everybody to know that actually ideally you'd rather be doing this together as a couple" even if "it is not possible right now"*. Other professionals express relief that "the truth" came from the parents and praise their courage.

In trying to do what they thought professionals expected of them, without the time and support it would take for them to achieve this, they had come to be seen as dishonest. By encouraging a more open dialogue the meeting managed to bring out the complexity and emotional impacts of these decisions on family relationships as well as the high stakes involved. Their dilemma was experienced at an emotional level in a powerfully embodied way that altered the course of the meeting. The atmosphere became more open for a time but unspoken tensions remained between the urgency of the child's attachment and permanency needs and the mother's need for a lengthy and uncertain treatment. The high stakes and emotional enormity of this decision seemed to hover in the room but was guarded against. Martin seemed unable to talk about his son's foster carer. When he did at the end of the meeting it was to complain about her. Jane declined invitations to think about the uncertainties of her situation and seemed unable to think beyond the successful completion of her treatment. The chair, strongly encouraged by Jane's key workers, refrained from asking her difficult questions as her demeanour suggested this would be emotionally too difficult for her at this

point. There seemed to be recognition at all levels that the binary opposition *("are parents using or not"; "one strike and you are out"…*) underlying the questions in the letter of instruction was unhelpful at this stage. However there was also acknowledgement that decisions would have to be made by the end of the assessment process. The chair prepared the parents for the forthcoming assessment by reminding them that he would continue to ask them difficult questions to help make a *"determination*" to the court.

During the Network Meeting the father appeared to move from someone who was perceived as reluctantly complying with the "structure" of the court to someone who could take the risk to open up and take time to explore the complexity and uncertainties of his situation. The professionals' perception of the father also moved from suspicion that he was reluctantly doing what he was told, to an appreciation of his difficult position.

By allowing time and space for uncertainties to be tentatively explored, the meeting allowed for an in-depth and embodied understanding of the complexities and emotional nature of decision making processes. A "Both-And" (Goldner 1992) approach emphasising words like "choice and honesty" and keeping the possibility of future changes open allowed different positions to be considered and named before the forthcoming assessment. Something of the fragility and uncertainties surrounding drug recovery were understood and accepted by both sets of professionals together with the conflicting time frames between the situations of parents and child which were mediated by the "paramount principle" and the accepted need of the child for permanency. The letter of instruction helped the meeting ask difficult questions, name the risk of relapse and focus on the child's timetable from a more neutral position. The meeting ended with agreement that the assessment would stop if the parents use; with recognition that the mother was not ready for the assessment without anyone having had to reject her and with a clear but flexible timetable.

6. NM6: Carving a space for communitas in polarised contexts

The conflict between family and professionals was apparent from the start of this meeting. The grandparents started to complain about social services being unreliable while the social work manager took an official position of non-co-operation with the referral, arguing that "the department" had made a decision to place the children for adoption and did not support further assessments. The family and the professionals' position within the court proceedings were in binary opposition with no room for further exploration of the complexities involved. At the level of "structure" this was a closed system (Cooper 1999) that had reached impasse with the local authority refusing to

engage in the assessment process and asserting their authority to convince the court to sanction their plan for the children. The strength of emotions and apparent stand-off between the local authority and the grandparents made it at times difficult to imagine how the meeting could proceed.

The grandparents appeared to have positioned professionals into two camps: the guardian as benevolent rescuer and the social worker as incompetent and insensitive invader. Social services also appeared to take rigid positions. The emotional pulls during the meeting were at times overwhelming as the balance of the argument appeared to shift from one side to the other. Phrases like “children’s emotional needs” were used by social workers to build a case against the grandparents without explaining or defining them. Such labels appeared to contribute to the essentialising of culture and a retreat to unspoken stereotypical positions which when left unchallenged in the court context can sometimes take on the status of fact. For example the social work intervention in this case was partly triggered by the grandparent’s attempts to protect and retain the ‘honour’ of the family from outside negative influence, but this was seen by the local authority as deceptive or unco-operative. Concerns about the children’s emotional needs that the grandparents did not seem to understand appeared to include unspoken fears of future forced marriage that could not be explored until named.

Part of the intervention of the chair and his colleague (who shares a similar cultural background with the family) was to slow down the meeting to unpick the meaning and explore the context of such labels in order to highlight their complexity and negotiate with the parties for a timed space to reflect. The chair attempted to reframe participants’ positions in more constructive, less blaming ways, adopting a stance of curiosity informed by knowledge of professional and family systems and culture. The authority of the court was used to keep participants on the task of prioritising the children’s welfare. This involved at times taking a challenging position, first encouraging the grandparents to think in front of professionals about what they might need to change to convince the court that the children were safe with them, then inviting professionals to explain their expectations and the decision to remove the children.

This allowed the children’s plight to take centre stage and recognition by all that they had become caught up in this polarised system. Amina had taken the side of her family, making allegations against her foster mother while Ahmed reported that he had been physically chastised by his grandfather, prompting social services to cancel contact. In spite of this the children were making obvious efforts to preserve their relationship, providing the stakeholders in the meeting with an incentive and model for bridge building. The guardian’s role was pivotal in reminding the local authority of the

imperative “structure” of court proceedings including the “paramouncy” of the children’s needs, including cultural and religious needs and the “presumption of no order” central to the Children Act 89. This allowed the creation of a time-limited space for an assessment to take place and an acceptance that engagement would need to take place at an emotional level. The analogy of an “open book” was used to help the grandparents consider the benefits and risks involved in trusting the assessment process (Malik & Mandin 2012). This metaphor became a synonym for the family’s story, experience and memories that facilitated the emergence of “communitas” in this meeting and provided a useful frame for the forthcoming assessment.

7. The story so far

a) Summary

This chapter has provided an overview of each of the six meetings observed by summarising and analysing the processes involved through the lens of Turner’s “structure” and “communitas” (1969). The analysis of significant moments in each of the six meetings helped identify important differences between the domains of the court and the clinic and shed some light on the interactions between the two domains in Network Meetings.

The analysis flagged up some of the tensions between the court and the clinic (NM2, 3, 4, 5) that illustrate the finding in Chapter 4 where the analysis of the letter of instruction had identified some of the benefits and limitations of a legal system dominated by structure. The referral to the clinic had come across as a request from the court system to understand the more experiential aspects of families involved and assess their capacity to change. This analysis highlights the value of engaging with both levels by finding a space for emotions, experience and relationships within the boundaries of the court structure. It also highlights some of the struggles experienced by participants in moving from one domain to the other.

To conclude the analysis I want to consider what we learnt about “structure” in Network Meetings before reflecting on factors that may foster and hinder the shifts from a “structure” dominated domain in order to promote the emergence of “communitas”.

b) Structure

i) Structure as container

“Structure” was apparent in a number of ways and particularly dominant at the start and end of meetings (as shown in chapter 4 & 5). Introductions were

formal with all participants following the same format and remaining boundaried and guarded. The letter of instruction took centre stage bringing a practical/tangible framework to anchor the meeting. The letter also appeared to provide a level of emotional containment (Bion 1961) for the chairs in particular as they held on to it physically and frequently referred to it. All chairs appeared to use the authority of the letter of instruction to legitimise taking the lead and to reinforce the importance of the meetings and the high stakes involved in the assessment process.

"Structure" was often located with solicitors who were credited (and often criticised) for the letter of instruction and with social workers who in all meetings were asked first to summarise the background and set the context to the assessment. "Structure" appeared more dominant in some meetings than others (particularly NM 4 & 1), as exemplified by the number of times the words court, judge and solicitors were mentioned in each meeting (table 12).

Table 12: Word search in transcripts of six Network Meetings

NM	Court	Judge	Solicitor	Total
1	13	2	32	47
2	16	0	9	25
3	1	0	2	3
4	7	49	4	60
5	15	0	8	23
6	3	18	9	30
Total / Average	55 / 9	69 / 11.5	64 / 10.5	188 31

ii) Structure as constraint

In the second part of meetings structure-dominated processes often came across as constraining and made it difficult to get a sense of people's experience. Conversations tended to focus on practicalities (NM2) or procedures (e.g. the lengthy disagreement over the psychological assessment in NM1 or the decision of the adoption panel in NM6). At these times, language was increasingly jargon-laden and discussions were dominated by technical issues that were impossible for parents and several of the professionals to understand. Conversations were often curtailed by binary opposition and contested positions that had reached impasse and appeared irreconcilable (e.g. the findings of facts in NM4; the parents' relationship in NM 1, 2, 5; the decision of the permanency panel in NM6). The parents writing a statement to the court (NM5) stating that they were separated when they hoped to stay together or the mother's statement "if I lie can I have my baby back" (NW4) illustrate the distorting effects of "structure" on people's relationships and decision-making processes.

In most meetings professionals appeared mindful of the powers of the court and at times weary of solicitors. For example in NM4 the chair declares *"We, we have to accept the judge's findings, we are not in a position to disagree*

with what a judge has said". The Guardian in NM1warned the psychologist that solicitors *"will want to know what you will be assessing" and said "I think I need to write actually to all parties and say just … (Yeah) … repeat sort of what you said", and "warn mum's solicitor that this is coming".* Any amendment to letters of instruction had to be approved by solicitors, e.g. NM5 *"then if there isn't any agreement… then we'll get that to the lead solicitor and she can tweak them… and you probably need to talk to your solicitor again about that and why you haven't received them before now".*

iii) Structure as empowerment

While meetings remained at the level of structure, tensions and frustration seemed to escalate (NM1, 2, 4). Once these impasses were identified and named, the recognition helped reduce tension by bringing new information into the system that could be added to the list of themes to be explored in the forthcoming assessment. For example when the chair summarised "we are stuck" (NW4) or explained to the parents that they will be asked difficult questions about their relationships and substance misuse during the assessment (NM5).

In the last part of meetings the letter of instruction helped bring "structure" back while attempting to integrate both domains. The questions of the letter of instruction that had been seen as providing the parameters for the assessment were now open for discussion and some amendments. This sometimes facilitated some exploration of complex issues within the parameters of the court (e.g. exploring the consequences of relapse in NM5). Thinking together about how to answer questions raised in the court context within the clinical setting helped identify some of the differences between the two domains. This allowed the team to plan and explain who would need to be seen in the clinic, by whom and in what context, in order to inform the court system of possibilities of change.

c) The emergence of communitas

The realm of communitas identified by Turner (1967) brings to view the exploration of emotions, relationships and experience which appear to fit the more experiential world of the clinic. Engaging participants at this level of communication permitted a thickening of the procedure-dominated stories and provided opportunities to open up alternative explanations and perspectives on the binary polarities that had reached impasse in court. The analysis highlighted some significant moments that seemed to open a space for human experience, relationships and emotions to fleetingly emerge within a structure dominated arena. Extracts from the six Network Meetings provide

examples of the kind of situation/interventions that may bring forth a sense of "communitas".

- When the constraints of "structure" and the nature of impasses were recognised and directly experienced at an emotional and relational level:
    - NM1: Chair: *"for me it's nonsense and I think we're just going to go round in circles… now we'll put it in writing, it'll go to court and I suspect the solicitor will back down and this is what we're going to offer".*
    - NM2: Mother: *"Well, I don't wanna do it but I have to"*
    - NM3: the enactment of the relationship between father and social services
    - NM4: Chair: *"We are stuck"*
    - NM5: Chair *"it is important to be honest"*
    - NM6: Chair *"so Amina wants to go home but Ahmed wants to stay in foster care*"
- When participants recognised that the impasse could not be resolved straight away in the domain of "structure" and a space needed to be set aside in the future to undertake the assessment:
    - NM1: *"I think it's important that we're going to have to… whatever we do with this assessment, is to keep communication with everybody. There are going to be so many people doing different things and we have to make sure that … all of these different commitments don't impact on this additional commitment now they're (the parents) having to go for a court assessment"*
    - NM3: Chair: "*Okay. So, we don't have to hear all the detail now, I'm just getting a flavour that there are some tensions"*
    - NM4: *"we can't, we can't give your baby back if you say it just because you think it's what we want to hear, um…"*
    - NM6: Guardian: *"take the risk to open the book"*
- When aspects of shared human experience were brought to the fore:
    - When the attention of participants was drawn to the babies in the room in NM2 and 3,
    - When the possibilities of children being permanently separated from their parents was raised or hinted at (NM1, 2, 4, 5, 6)
    - NM4 when the father talked about past traumatic experiences
- When participants recognised at an emotional and relational the level the complexity of decision-making processes and the high stakes involved for families
    - NM1 & 3 when interpreters hesitated before translating the words for adoption or permanent placement.
    - NM3 when the father acknowledged that he did not fully understand what is expected of him;

    - NM5: when the father described that he had *"been told (he has) got till Michael is a year… then the social services want him placed with…"*
    - NM6 when the grandparents' fear of losing their reputation ("izzat") in their community is named and the impact of the relationship breakdown between grandparents and social workers on the children is experienced.
- When the relationships between stakeholders were demonstrated and understood in the here-and-now.
    - NM1: When mum responded to the psychologist's description of the forthcoming assessment in the here and now and demonstrates her understanding of the situation and highlighted translation difficulties.
    - NM2: mum says "Well, I don't wanna do it but I have to"
    - NM3: the chair summarised *"so there is an issue of trust"*
    - NM5: *"if I had a choice now I would prefer if… if, if it was a joint thing to be honest, you know, yeah" but "basically Jane's timescale doesn't, doesn't fit that so, yeah, kind of, that's the understanding why I put myself forward ehh…"*

d) Structure + communitas = liminal thinking space

The significant moments highlighted in this analysis point to fleeting moments when participants had the opportunity to understand something of their predicament as individuals and as a group or system. This sometimes helped to resolve a sticky issue as in NM1 when the futility of the arguments over the psychological assessment was recognised at an emotional level and when the anxiety of the social worker was understood and accepted. This led to the guardian agreeing to back changes to the letter of instruction. Remaining within the domain of "communitas" alerted participants to the need to create a space in the near future to explore the complexities of the issues involved to provide good quality independent advice to the court. Engaging at the level of communitas demonstrated that this space would involve a different state of mind from that of the court and provided a taster of what the forthcoming assessment would look and feel like. Chairs worked hard to forge a relationship with participants, particularly with parents, to identify the issues that could be fruitfully addressed in the assessment. This involved both engagement skills and forensic analysis of disputed facts. Naming and examining areas of disagreement between parties seemed to provide small windows of hope that the forthcoming assessment could possibly make a difference. The most successful meetings appeared to be the ones where chairs were able to navigate within and between the two domains of "structure and communitas". For example in NM1 the chair used "structure" to reinforce the necessity to explore domestic violence while recognising at an emotional

("communitas") level, how difficult this will be for the parents. This alerted professionals to the need to redraw the letter of instruction to allow more space to engage with the mother before deciding on the type of cognitive assessment.

Network Meeting 3 provides a good example of the way that structure and communitas can be integrated in meetings. The chair remained within the structure of the court but frequently invited conversations, debates and enactments of the issues raised in the letter of instruction. He frequently referred to the forthcoming assessment as a "space to think" in the near future and to the Network Meeting as a taster, bringing a flavour of the issues to be addressed later. This provided opportunities for stakeholders to understand the nature of relationships between them and helped the parents understand in a concrete, embodied way what is likely to happen in the main part of the assessment.

Network Meeting 2 was perhaps the least successful as the chair and other professionals appeared uncomfortable with their dual role as experts and clinicians. It is likely that chair's reluctance in the early part of the meeting to be explicit about the structure of the court and to create a space to explore the mother's reluctance to take part in the assessment is likely to have contributed to the limited emergence of "communitas" and to the guardian's use of authority to coax the mother into taking part in the assessment.

In Network Meetings 4 & 6 the structure of the court remained dominant as chairs worked tirelessly to find ways around the rigid polarities. In NM6, the metaphor of the "open book" helped to persuade stakeholders of the benefits of taking time to understand and thicken the story. NM4 was also dominated by the over-riding authority of the court's finding of facts which was experienced at times like a straitjacket. But professionals persevered to explain the systems, provided space to hear to the family's experience of the process and experienced the stuckness at an emotional level. This allowed professionals to move beyond binary polarities to think about the wider cultural context of the family and consider a number of alternative perspectives to be further explored in the forthcoming assessment.

8. What next

The next and concluding chapters will critically review theoretical underpinnings for this analysis and consider the application for social work/CAMHS practice, the family justice system and research methodology.

Chapter 7: Finding a space for experience, relationships and emotions to emerge in a structure-dominated domain

1. Summary of findings

In Chapter 4, a thematic analysis of the letter of instruction and referral information highlighted some of the characteristics of care proceedings, particularly:

- The complexity of the family and professional systems involved
- The court's emphasis on structure to bring clarity and determine on contested evidence in order to reach permanent decisions for children
- The tendencies of "adversarial systems" towards polarisation, binary thinking and closure.
- This drew attention to the often fraught relationship between the court and the clinic identified in the literature review (King 1994, Cooper 1999).
- The families in the sample appeared to have reached impasse and had remained in the court arena for longer than recommended by the LSC.
- The referral came across as a request from a "structure" dominated system (the court) to an agency with a reputation for multi-disciplinary work, therapeutic and relationship-based practice that may be more suited to unravel contested issues in the domain of experience, emotions and relationships.
- In this context the request for a parenting assessment emerged as a search for a liminal space (Turner 1969), transitional space (Winnicott 1971) or thinking space (Bion 1961) to unravel complex and often contradictory stories, perspectives and experiences.

The Network Meeting was analysed in chapters 5 and 6 as a developing professional practice comparable to a kind of ritual (Turner 1969) that evolved over time in a particular agency and context in an attempt to create a boundaried space for a "therapeutic assessment of change" to be planned within the court timetable.

Findings illustrated the attempts of professionals to move the system from the "structure" dominated domain of the court to a space where less tangible aspects of human experience could be brought into light and opened to scrutiny. The concept of "communitas" and its relationship to "structure" as defined by Turner were used loosely to identify aspects of this transition during Network Meetings.

In this chapter I will construct an argument in support of developing the practice of Network Meeting as a kind of ritual to facilitate the transition between court and clinic and set the scene for the creation of a space for human experience, relationships and emotions within a structured environment. In order to do this I will critically review the theoretical underpinnings of the analysis.

2. Critical theoretical analysis

a. The need for a thinking space

The families and their professional networks referred to the clinic for an assessment within child care proceedings have been shown to have reached some form of impasse. Trust between parties had often broken down with allegations, counter-allegations and suspicion. Research in the field of attachment has long demonstrated that under such polarised conditions, thinking and the capacity to "mentalise" can become restricted (Fonagy 2012, Hodges 2003). In order to provide useful advice to the court, the assessment team has to create an environment where new kinds of thinking, experience and relationships are allowed to develop and where new information can emerge. Attachment research suggests that the development and transmission of knowledge requires what Fonagy calls "epistemic trust" (2012). The analysis of the context of Network Meetings in Chapter 4 suggested that this would be difficult for the assessment team to achieve with participants who are themselves in conflict with each other. The letters of instruction and observations of the first parts of meetings suggested that polarisation was increased by the adversarial nature of the system in which the parties are encouraged to communicate via their legal representatives within strict procedures. The detailed analysis in Chapters 5 and 6 portrayed the Network Meeting as an attempt by the assessment team to bring people together without legal representatives to signal a new way of relating and thinking.

The concept of liminality introduced in the last chapter provides a helpful metaphor to visualise the position of Network Meetings within the overall court proceedings (Diagram C). Meetings often came across as a space of transition from the structured world of the court to the more experiential world of the clinic. Turner describes the term liminal (from the word "limen" or "threshold") as "a no man's land betwixt and between the structural past and the structural future as anticipated by the society's normative control of biological development" (1986 p 41). It is a space in between, a state of 'limbo'" before new possibilities can be identified, considered and internalised (1969 p.128). He gives a flavour of a liminal phase

> "being dominantly in the subjunctive mood of culture, the mood of may be, might be, as if, hypotheses, fantasy, conjecture, desire - depending on which of the Trinity of cognition, affect, and conation is situationally dominant". In contrast to "ordinary life"… "where we expect the invariant operation of cause and effect, of rationality and common sense", liminality can perhaps be described as a storehouse of possibilities, not a random assemblage but a thriving after new forms and structures, the gestation process" (1986 p 42).

Turner (1978) turned to Freud and psychoanalysis to make sense of the actions and symbols he was observing during rituals. His concept of liminality as the middle phase of rituals where new possibilities can emerge has much in common with Winnicott's theory of transitional objects and transitional phenomena (1971).

Winnicott argued that the capacity for creative thinking and change is dependent on the individual's ability to trust and the creation of an "intermediate zone between the individual and the environment" (1971 p.144). He identified three characteristics of this potential space; safety, being in touch with appropriate elements of the cultural heritage, and experiencing trust over a long enough period (p148). He hypothesised after observing parents' and infants' interactions that the sense of trust and safety formed over time through repeated experiences of separation and reliable reunion that could "give the baby a sense of trust or of confidence in the environmental fact" (1971 p 138). This space was manifested in the child's confidence to play and experiment, the capacity to tolerate the uncertainties of "not-knowing" and to respect apparently paradoxical positions. Winnicott saw the importance of a child's cultural heritage in promoting the "interplay between originality and the acceptance of transition as the basis for inventiveness" (p.13). His advice to professionals was "to ask for a paradox to be accepted and tolerated and respected and for it not to be resolved" (1971 pxvi). He argued that a "paradox accepted can have positive value" and that the "resolution of paradox leads to a defence organisation which in the adult, one can encounter as true and false self-organisation" (1971 p 19).

Viewed through this lens, the Network Meeting can be seen as an attempt to create this kind of transitional/liminal space where a sense of trust and safety can be promoted within the containing framework of care proceedings in order to allow participants to explore new possibilities. The inherent power differences between parties involved in care proceedings combined with the levels of suspicion identified in these contested hearings raise complex challenges. But chairs of meetings could be seen to work hard to engage with both parents and professionals in an attempt to assert their independence or neutrality and to emphasise the need to work together with honesty, curiosity and courage in order to create this future space to think.

b. Creating a thinking space: a ritual-like process

The synchronic analysis of Network Meetings in Chapter 5 identified three distinct phases of Network Meetings that I argued were reminiscent of the three stages found in rituals by Van Gennep (1909) and Turne r (1969). I am not advocating Network Meetings as a formal ritual practice but I would like to examine how ritual actions (Krause 1998 p.102) can be used to represent, communicate and help maintain the desired movement or shift from a structure dominated domain of the court to the more experiential domain favoured in CAMHS. My interest is in understanding the individual's experience and the process of transition from one state to another (Turner 1986). Van Gennep described rituals as procedure "which accompany every change of place, state, social position and age" (Turner 1969 p 94). These transitions appeared to go through three different stages starting with "detachment from an earlier point in the social structure", moving to a middle "ambiguous" phase before returning to a different place within structure. Turner became particularly interested in the middle phase of rituals as a "liminal space". In Network Meetings this liminal space was located in the second part when chairs asked participants in turn to summarise their involvements and assessments. Chairs seemed to maintain a position of curiosity and neutrality to invite questions and forensic explorations of different perspectives before searching for an encompassing formulation of the process or themes identified. This phase was often described as a "taster" of the assessment to come or as providing "a flavour" of relationships and dynamics involved.

The forthcoming parenting assessment can itself be theorised as a liminal space between the Case Management Conference and the final hearing with the Network Meeting as a kind of ritual to facilitate the transition from court to clinic (see diagram C). In this context the Network meeting can be interpreted as "a form of communication" (Krause 1998 p 100) from the assessment team to participants about the nature and expectations of the forthcoming assessment. Bateson described rituals as a kind of meta-communication similar to play (1973 p 154) "with the message that within this frame something different from normal action is taking place" (Krause 1998 p 102). Theorised in this way, ritual actions, such as the ones identified in the Network Meeting, can be interpreted as a frame for the development of different kinds of thinking space that will move from the court context to the clinic and back again. All chairs reinforced the difference between the workings of the court and that of the clinic and explained how a space will be created within the clinic "to ask difficult questions" (NM5), to "understand about your needs" (NM1), "make sure you understand the judge's finding" (NM4), etc… They described and gave examples of the type of work that will take place during the assessment, reinforced the support that would be made

available to families and encouraged participants to take the risk of trying new things. Quoting Bateson (1973) Krause describes liminality as “a space where we may move between map and territory” (1998 p.104) and “where a kind of freedom is created for individual performers”. She also talks about “the ritual stance in which the intention to mean is more important than the meaning itself” (p.104). Within this frame, demonstrating what the forthcoming assessment might feel like, is likely to be more effective than just talking about it.

An important aspect of the chairs attitude during meetings was their apparent courage in tackling difficult issues and their commitment to understanding and engaging with all parties involved. As Cooper said of social work practice:

> “our job in child abuse or protection work is not to pursue a correct theory of causes as a prelude to decision or action, but to sustain sufficient courage in the face of all emotional forces acting to prevent it, to believe and bear witness to the belief that something happened ...” (2000 p 257)

Maintaining an ethical stance is crucial in this kind of socio-legal work where individuals’ integrity, credibility and honesty (as exemplified by the delivery of evidence under oath) mean a great deal. This implies an ability to work both within the structure of the legal domain and within a professionals’ ethical code of practice (UKCP, AFT, HCPC) but also a capacity to maintain a reflective stance while working in “border zones” (Cooper 2000), “at the extreme” (McCarthy 2006).

c. Working with structure and communitas

The analysis in Chapters 5 and 6 showed the movement in the three parts of meetings from a structure dominated system to more experiential, exploratory interventions from the chair before the letter of instruction brought back the authority and structure of the court in order to plan the assessment.

Turner makes clear in his analysis of rituals that “communitas can only be grasped in relation to structure” (1969 p 127) as they represent different aspects of the same human processes that are equally important to our understanding. These two levels of understanding appeared to clash repeatedly during Network Meetings (in ways that are reminiscent of King & Piper’s analysis of “welfare and justice” discourses discussed in Chapter 2) and participants seemed at times to struggle to find a way through. However, perhaps the most important and surprising finding of the research was the value of holding simultaneously to both the structure of the court process and the experience-near domain of communitas while avoiding being dominated

by either. This has important implications for social work practice as a whole and echoes Fergusson's interpretation of Gidden's argument that structure can be both enabling and constraining (2009).

While structure in the first part of the meeting was accompanied by a higher level of frustration and a feeling of stuckness, the more fluid second part could at times feel messy, confusing and anxiety provoking, so that the reintroduction of the letter of instruction in the third part appeared to bring a welcome level of containment (Bion 1961). In meetings that appeared more successful, chairs seemed more confident in their ability to navigate between the two domains by encouraging dialogue and exploring differences while using the framework and authority of the court to keep some shape to the meeting and a flavour of the forthcoming assessment. The capacity to name the unsaid (Mason 2011) such us the high stakes involved in these assessments and the authority of the court to impose decisions seemed crucial in preparing the ground for a genuine plan of work. While the "liminal space" appeared necessary to the generation of new thoughts and experiences, structure was required to express, notice and name important themes to be explored in the forthcoming assessment.

This way of thinking will be familiar to family therapists who have for some time advocated a clinical position of "both/and" instead of the binary either/or stance (Goldner 1992) in order to maintain the therapist's maneuverability within systems (Carpenter & Treacher 1993). This is however difficult to maintain as the court pushes for binary resolution of disputed facts while clinicians' attempts to engage with difference and maintain a "neutral or meta-position" can be "re-framed as evidence of muddled thinking" (Asen 2003) by lawyers and have been criticised in court for remaining "on the fence" (Cooklin 2003). The challenge is for clinicians to maintain a position of curiosity and uncertainty in the explicit knowledge that clear and unambiguous opinions and recommendations will have to be reached by the end of the process. This research suggests that holding a mental image of the Network Meeting as a process, as a time limited transitional space is likely to assist chairs navigate between engagement and forensic exploration, encouraging curiosity while reminding participants of the high stakes of decisions to be reached at the end of the process. It can provide a frame for chairs to tolerate uncertainties (Mason 1993) and make sense of the necessary chaos in the middle part of the meeting in order to foster creativity (Winnicott 1971).

Chairs could be seen in meetings to encourage thinking within the structures and constraints of the court. They offered frequent summaries and attempted to build systemic formulations that encompassed the complexities of families' lives, of the systems around them and of the subjective nature of people's experiences. This required translation of content and meanings across

domains and curiosity about the cultures of families and of the different professions/organisations involved in these meetings. The aim was to identify and name the main themes, processes and impasses that would need to be addressed in the assessment while avoiding and challenging narrow reductionism (Harvey 2000).

3. Theoretical underpinnings of the research

a. Multiple perspectives

The study used psychoanalytic ideas (especially about containment, thinking, attachment), dialogical theories (primarily Seikkula 2003, 2005, 2006, 2008) and systemic family therapy (Bateson 1972). As the research evolved I also became inspired by anthropological theory – in particular Turner's work on ritual, liminal space and the relationship between structure and communitas (1975). The literature review in Chapter 2 highlighted the complex theoretical landscape of this research and provided a brief description of important concepts considered to map out the territory. Chapter 3 described a complex methodology that evolved through a number of distinct steps with different epistemological stances. I argued that this search for "multiple perspectives" (Krause 2013) was driven by the practical necessities of the court context, the complexities and high stakes involved in care proceedings and an ethical stance. I now want to consider how these ideas 'fit' with each other within the critical-realist frame and review other attempts to integrate theories in social work and family therapy.

A number of researchers in a social work profession that straddles many theoretical domains have argued for adopting a "toolkit" approach to research (Seale 1999), encouraging pragmatic positions over restrictive philosophical considerations (Silverman 2001 in Ritchie & Lewis 2003). In family therapy, creative clinicians have successfully used two or more theoretical frames to provide a more complex and rounded description of their work. Goldner at al (1990) used psychoanalysis, attachment and learning theory to complement systemic ideas to capture the experience of romantic love and violence while Byng-Hall (1995) introduced attachment theory to the systemic family therapy field. Preston Shoot & Agass made a convincing case for the integration of psychoanalytic and systemic theory within social work practice (1990).

Flaskas reviewed the debate about the "possibilities and limits of 'mixing' knowledges", particularly psychoanalytic ideas within systemic family therapy" (2005 p131). Earlier in her exploration of family therapy beyond post-modernism, she had considered the intersections between the two paradigms and made a "plea to allow the space for theory diversity in enriching family

therapy knowledge and practice" (2002 p 175). However she remains cautious about the need to integrate theories and talks instead about "integrative practice" and the pragmatic use of well-researched concepts from different fields of knowledge to inform practice.

Pocock (2013) also starts from a pragmatic, practice-informed stance. Like Flaskas who "welcomed the freedom of engaging with diversity and tension knowledge" as long as it comes with "self-consciousness" (2002 p 224), he makes a strong case for reflexivity to access the assumptions we make about the world. Pocock quotes Bateson's view (1979) that

"everyone has an epistemology, and those who don't believe they have, generally have a very bad one indeed" (2013 p 5).

Within the realm of practice, recent government guidelines in the UK require expert witnesses to state the extent and limitations of their knowledge to the court and to end reports with the following statement: "I confirm that I have made clear which facts and matters referred to in this report are within my own knowledge and which are not. Those that are within my own knowledge are true. The opinions I have expressed represent my true and complete professional opinions on the matters to which they refer." (DoJ 2010). In this section of the thesis I would like to set out the parameters of my own knowledge and the evolution of my theoretical position. First I need to re-define the qualities of the phenomena with which this research has engaged.

b. The Network Meeting as a process and an event

The family and professional systems involved in this research were all found to have reached impasse. All appeared stuck in the structure-dominated domain of the court with unknown, misunderstood or contested facts that were disputed in an adversarial context. The referral to the agency came across as a request by the justice system for advice on psychological, emotional, systemic and relational matters that are not easily accessible to the court in order to assess capacity to change and inform complex decisions about children's futures.

The three distinct methodologies provided specialist lenses to analyse the realms of language, relationships and emotions. This raised a number of epistemological and ontological questions. The context of the court and evidence-based practice pushed towards a more realist epistemology with a search for hard facts and evidence "that can stand up in court". The emotional content of the work, the cultural and power differentials encouraged a more relativist position which at its extreme suggests that we can only know the social world through the language that we use to describe it.

In Chapter 3 I argued that at a methodological level, critical realism (Bhaskar 2008) helped bridge theoretical differences by providing an epistemological and ontological position that recognises the existence of "structures that determine, constrain and oppress our activities" (Barlow 2010 p 22) as well as the limitations in our capacity to get to know them. Bhaskar's distinction between "the Real, the Actual, and the Empirical" (Bhaskar 2008 p 2) places the scientist (or the participant/observer) within the frame of scientific understanding. The Real recognises the existence of underlying structures and mechanisms; the Actual represents the events and behaviours generated in the Real; while the Empirical consists of what we experience. Our understanding of the Actual and the Real is therefore mediated by the observer in the Empirical domain that Bhaskar suggests must be continually tested (Pocock 2013). Although Bhaskar's theory was developed in the natural sciences, it fits well with social sciences and seems to keep the door open for analysing complex phenomena from different theoretical viewpoints.

However this research goes beyond the description and reporting of complex phenomena as I became increasingly interested in understanding the process of change and movement within those meetings. A significant finding of this research is that participants appeared to strive, more or less successfully, to move the system from a state of impasse dominated by "structure" and binary closures (Cooper 1999) to a space where less tangible aspects of human experience could be brought into light and opened to scrutiny. These movements were observed in meetings through the quality of dialogue between people, through the shifting positions between participants but also in the emotional qualities at different times in meetings. But none of the three methodologies appeared to fully and singly capture the whole event, the complex processes that evolved or the sense of movement I was observing. Turner's ethnographic method provided a wider lens to conceptualise the network meeting as an event and a social performance within which changes and movements could be observed and interpreted from different perspectives.

So while critical realism allows for the synthesis of sometimes contradictory epistemological positions in research (Pocock 2013) this project also engaged with the possibilities of change and I now want to consider the assumptions that each theory makes about how change occurs in human systems.

c. Theories of change

i. Dialogical:

Seikula's research offered a promising take on the phenomena observed in this research. He describes his "dialogical" stance as

“bringing all protagonists in a meeting to listen respectfully to every voice and fostering conversations between some participants to be heard by the others with the aim of “constructing a new shared language” and offering “a healing alternative to the language of symptoms and difficult behaviour” (2005 p.471).

His methodology focusses on a micro-analysis of conversations and explores in detail the way that one person’s utterance is influenced by the previous one and in turn influences the next.

The theory of change appears to rely on the emergence of new voices challenging dominant narratives which allows individual participants, “through dialogical processes of “telling a story to an audience”, to create new functional and adaptive stories” (Auletta 2012 p.174).

It is broadly phenomenological (Merleau-Ponty 1962) and focusses on the languaged content of interactions between people. Seikkula locates his dialogical model within the social constructionist philosophy of Bakktin (1981) who argues that “the individual does not exist outside of dialogue” (2003). For dialogical theorists reality is constructed through dialogue within relationships in the moment. There is therefore less interest in the wider context of what Cooper and Lousada (2005) call the “state of the system” or in what is invisible or outside of dialogue (Shotter 2005).

This post-modern emphasis on language has been criticised by family therapists (Pocock 2009, Flaskas 2009, Larner 2000). Krause argues that dialogue is only half the story as “meaning is not coterminous with language and…might not be expressed adequately in words”. “Meaning is generated in the relationship between those representations and knowledge that already exist” (2013 p 12). People bring with them existing knowledge and meanings from previous relationships that can be seen as real but often remain unconscious or “doxic” (Bourdieu 1998).

ii. Systems theory

Systems theory as initially developed by Bateson (1972) places the locus of change in the relationship between people within their environment not just through dialogue or in the mind of individuals. Systemic epistemology focuses on “the patterns which connect” rather than on single events or individuals in isolation. Bateson strove “to present the whole of culture” (Krause 2013) and advocated for a “circular understanding in which all the elements of the system are seen to interact, influence and are influenced by each other” (Mandin 2007). Systemic family therapists have developed a sophisticated understanding of culture and power within relationships (Guilfoyle 2003, Rober & Seltzer 2010, Krause 2013) both in the therapy room and in the

social, cultural and institutional context. This led to the development of a therapeutic stance emphasising reflexivity, curiosity or a “not-knowing” approach and a collaborative attitude to identify circular patterns in relationships.

Bateson recognised the complexity and unpredictability of human systems but continued to seek an understanding of whole systems by identifying patterns and remaining alert to what he called “news of difference”. Change is seen as unpredictable as it occurs through a process of feedback loops that can amplify or balance behaviours or meanings. While Bateson recognised the importance of emotional processes (Krause 2013 p 17), systems theory’s emphasis on relationships has contributed to a limited theoretical understanding of the person, individual agency and meanings outside of awareness that has prompted a number of family therapists to revisit the usefulness of psychoanalytical concepts.

iii. Psychoanalysis:

Psychoanalysis is interested in what people bring to relationships from their own emotional experience, feelings, unconscious fantasies, desires as well as the associated meanings and beliefs. Bion also became interested in the relational context of the capacity to think (Flaskas 2002, Larner 2000) and explored complex processes emerging within groups. His work marked “the shift to relational psychoanalysis” that has resonance with Winnicott’s idea of the holding environment and Bowlby’s attachment theory (Flaskas 2002 p 122).

Freud conceived of psychoanalysis as a scientific method. In psychoanalytic thinking unconscious processes are seen as psychic realities that shape and structure the social world. Clinical techniques and “a clinical sensibility” were developed to “notice, name and give conceptual shape” to unconscious processes below the surface” (Cooper and Lousada 2005 p 211). Psychoanalytic principles are thought to be consistent with those of the critical realist school of thinking (Bhaskar 1979) that accepts a reality even when it is difficult to access (Cooper and Lousada 2005, Rustin 1991). Cooper and Lousada clarify that “the surface is not the realm of the superficial, but of the available `to be known’, if only we have at our disposal the means to come to know” (2005 p 224). They argue that “knowledge of this kind can only be acquired via a degree of direct emotional contact with the object of study” and that “a psychoanalytic approach to the study of social life is close to … ethnography” (2005 p 211).

The theory of change is based on the capacity to study what lies below the surface within individuals, groups and society. Although it is accepted that there are always multiple meanings or interpretations of reality, Bion emphasises the importance of searching for emotional "truth". Change is conceptualised as a slow, continuous process that necessitates the development of a capacity to tolerate intolerable states of mind and paradoxes, to think the unthinkable and to express strong feelings in order to develop insight and a sense of emotional congruence or authenticity. Bion is clear that "trying to find and hold the capacity for thinking is a process that both requires and achieves emotional containment" (Flaskas 2002 p 163). Psychoanalytic concepts such as containment, transference and projection were helpful in tracking what may be going on below the surface in Network Meetings and in identifying changes in the quality of thinking of individuals and between people.

Although psychoanalysis' interest focusses on the individual and unconscious processes, Cooper and Lousada have argued that it has become increasingly concerned about society as a whole "as an eligible field of study" (2005 p 206). However the model has been criticised for the level of certainty afforded to the clinician's interpretations (Flaskas 2002). It provides limited conceptualisation of patterns connecting whole systems and processes involved in systemic change that have been identified by systemic and complexity theorists (Prigogine 1980, Chapman 2004, Stevens & Cox 2008).

iv. Turner's anthropology of experience

What Turner's anthropological studies brought to this research was the visualisation of the network meeting as a whole "event", "a social performance" and as Kapferer (2014) puts it "as a site for the realisation and revelation of potential". Turner studied ritual events not as empty (mechanical, ritualistic) occasions but for their potential for change. The three steps of rituals came to represent the experiential movement from one structure to another via a temporary space of liminality.

Kapferer recently reviewed anthropologists' long-standing interest in "the exotic" to "highlight the development of a methodology of the event as a re-centring of what is immanent in the role of the exotic for anthropology" (2013 p 829). His approach to the event "accents an attention to the emergence of the extraordinary within the domain of the ordinary". It "concentrates on what would be deemed atypical, what is often excluded from consideration, the marginal, the minority, the suppressed and the strange." He argues that "this not only opens up or reveals the potential in what already may be but also emphasises the role of the unique, of the event for a rethinking of what is immanent in the structures of human practice in their particularities and … as

a whole" (2013 p 829). Turner agreed with "Freud's view that disturbances of the normal and regular often give us greater insight into the normal than does direct study" (1975 p 34.) This also fits with Bateson's search for "news of difference" that contributed to the development of strategic family therapy techniques (Watzlawick 1974).

Turner's interpretation (1969) of rituals appears to capture that sense of movement between knowing and not knowing. Although both structure and experience have doxic aspects, his concept of communitas can be associated with intuition, "knowledge of the whole" and "we" relationships while structure is in the realm of reductionist analysis, "reason or discursive understanding" (1975 p 47). He reiterates the importance of holding on to both structure and communitas, to whole as well as parts and to maintain ongoing paradoxes between the two. This approach has similarities with Bion's concept of containment and thinking (1967); with Winnicott's ideas of a transitional space where paradoxes can be tolerated (1971); with the "holding environment" in attachment theory (Bowlby 2008); and to Bateson's search to understand human systems through experiencing emotions as well as systemic processes (Krause 2013 p 17).

d. Synthesis

In this section I have argued that critical realism can provide a philosophical frame to bridge some of the epistemological contradictions in research methodologies and also in practice between the domains of the court and the clinic. It allows for a realist ontology within a more relativist epistemology where our understanding of the Actual and the Real has to be continually tested in the Empirical domain (Pocock 2013). It implies a commitment to empirical research into social structures and experience as real phenomena while retaining a sense of unknowability and unpredictability. What is less clear in the work of Bhaskar is how these structures can be tested in practice. Within the context of care proceedings, how does one reach a good enough description of the family/professional system and assessment of its capacity to change knowing the fallibility of our senses, techniques and theories?

In this analysis I see the Network Meeting and the subsequent parenting assessment as a kind of laboratory where complex systems can be observed, analysed and tested within a boundaried space and time frame. Conceptualised as an event, the Network Meeting acts a containing social structure in which changes in language, relationships and emotions can be observed from different perspectives and studied through a number of theoretical lenses. Seen as a process and a kind of ritual, the Network Meetings brings to light the potential for shifts and movement in the system as a whole and helps to facilitate the transition from court to clinic. The meeting

as a whole (and the liminal phase in particular) provides a taster of the forthcoming assessment where themes and impasses can be experienced, identified, performed and examined at a dialogical, relational, and emotional level; where systemic hypotheses can be formulated; and where a plan is agreed on how to test the possibilities of change within a clearly defined and boundaried future space. Each theoretical perspective contributes to an understanding of the overall experience. This provides a "thick description" of events in context (Getz 1988) that "remains close to the concrete reality of a particular event (e.g. the Network Meeting) but at the same time reveals general features of human social life" (e.g. the family-professional-court system) (Hammersley 1992 quoted in Price and Cooper 2012)

The expectation of the court is that the assessment will have to reach closure to allow for a determination of facts within an empirical domain and for concrete decisions to be made in the best interests of children. While this can be seen to add to the pressure experienced by families and professionals it also brings a sense of urgency and joint purpose. The Network Meeting provides a space for new information to emerge within a time-limited frame. Being in the room together allows participants to experience the complexities and unpredictability of change while acknowledging the responsibility and sense of agency that stakeholders share in moving the system towards a satisfactory outcome for children. The role of the chair is to intervene to create a safe space to think by engaging all participants into a joint evidenced-informed search to understand both structural and experiential patterns that have contributed to the current state of the system. By the end of the assessment process a formulation has to be agreed by the assessment team and recommendations made to the court. This comes with a great deal of responsibility and requires a strong ethical position (Harvey 2000). The critical part of critical realism therefore has to encompass an understanding of power differentials, a commitment to social justice, self-reflexivity, curiosity and engagement skills.

While it may be possible to study such complex processes from a single theoretical perspective, this project illustrates the value of exposing stake-holders to "the tension and creativity of difference in ideas" (Flaskas 2005 p 133). This promotes critical thinking, curiosity and self-reflexivity as well as providing a form of triangulation to test out the validity of hypotheses/interpretations.

In the next chapter I will consider further the skills and processes involved in chairing Network Meetings and the implications of this research for practice.

Chapter 8 Applications of findings to clinical practice

This research has demonstrated some of the aspirations and challenges involved in bringing stakeholders together within the structure of care proceedings as a kind-of-ritual at the start of assessments where the qualities of the system and the nature of impasses can be experienced at an emotional and relational level. The creation of a liminal space was seen to facilitate engagement with complex and emotionally-laden processes by experiencing the polarised positions of stakeholders and starting to air the multiple perspectives involved in order to plan and provide a taster of the forthcoming assessment. This chapter will consider the skills and processes involved in conducting Network Meetings. I will then consider the implications of these findings for the family justice system, and the application to CAMHS and social work practice. The chapter considers the applicability of the concepts of liminality, structure and communitas to research methodology. The challenges of defining and researching "communitas" will be explored through a critically reflective review of the methodological journey in this project.

1. Review of the skills and processes involved in conducting Network Meetings

a. Maintaining a stance of curiosity

The aim of Network Meetings is not to resolve the complex issues at stake or answer the questions in the letter of instruction. The purpose of this meeting can be seen in the light of this research as a way of signalling the difference between court and clinic by providing a flavour of the type of thinking that will be required during the forthcoming assessment. It combines forensic exploration of disputed facts with repeated attempts to engage, explain and check understanding. It encourages participants to explore different perspectives on the themes and impasses identified and to consider the possibility of change. The chair's stance in these meetings comes across as curious, encouraging co-operation and openness. It seems important for the chair not to understand too quickly (Anderson 2005) but simply to identify areas of difference and when possible name and question the nature of impasses. This fits with Winnicott's findings that "a paradox accepted can have positive value" (1971 p 19). There were examples in all the Network Meetings of chairs recognising and naming impasses that later formed the basis of the forthcoming assessment: e.g. what is the extent of the mother's learning difficulties (NM1); the mother's reluctance to take part in the assessment (NM2), the lack of trust between parents and professionals (NM 3 & 6); "we are stuck" (NM4); the parents' relationship (NW5).

b. Engaging with language, relationships and emotions

The role of the chair in Network Meetings required a wide range of skills for chairs to engage with reluctant families and professionals, encourage dialogue and explore contested issues while continuing to pay attention to developing therapeutic relationships. These, I have argued, required knowledge, skills and experience from different fields of study and practice (Flaskas 2007).

Attention to language, use of jargon and quality of interpretation for families for whom English was not their first language played a significant part in understanding and deconstructing how misunderstandings and polarised positions had contributed to impasses. The “dialogical stance” developed by Seikkula in adult mental health provides a useful model to describe chairs’ attempts to listen respectfully to every voice and enable conversations between some participants to be heard by the others, even if in the court the achievement of this aspiration is likely to be more limited. Seikkula described the aim of the dialogical approach as “constructing a new shared language” that “affords a healing alternative to the language of symptoms and difficult behaviour” (2005 p 471).

The language of these Network Meetings remained dominated by the legal framework. There were numerous attempts to check parents’ understanding of jargon which highlighted the complexity and overbearing nature of child protection/legal processes. The resulting frustration was often experienced at an emotional level and appeared to provide opportunities to empathise and negotiate relationships. There was also an appreciation that “understanding is not only a cognitive process” (Arnkil 2011 p 66) as participants attempted to connect at a more emotional level. In her work with African-American families, Boyd Franklyn found that engagement was largely dependent on what she called “vibes” defined as “all of the nuances of behaviour and not just the verbal message. Perceptions are not just based on what is seen or what is said but on a very basic 'gut feeling' level” (1989, p 96). Providing a forum where participants’ experience of the process can be understood at an emotional and relational level, if only fleetingly, is likely to contribute to the development of epistemic trust.

Systemic psychotherapy has developed a wide range of skills and techniques to address relational levels while psychoanalysis has generated concepts and methods to engage with emotions and unconscious processes. A number of commentators in the field of social work (Preston-Shoot 1990) and family

therapy (Flaskas & Pocock 2005) have outlined the complementarity of systemic and psychoanalytic ideas in understanding complex social systems. Chairs in this research used a number of systemic interviewing techniques such as circular questions (Selvini 1980) and a stance of curiosity (Cecchin 1984); interventive questioning (Tomm 1988); reframes (Watzlavick 1974); solution focused interventions (De-Shazer 1985, Gumbleton & Essex 1999); unique outcomes (White 1995); questions on the extreme (McCarthy 2006); and metaphors (Larner 2000). These have been developed in family therapy to help bring a wider understanding of family relationships within their own history and cultural context, to explore multiple meanings and perspectives and encourage meaning-making dialogues. Chairs also used techniques drawn from structural family therapy (Minuchin 1974) such as tracking, enactments and intensification developed to assess family relationships and dynamics.

The concept of communitas provides a useful conceptual tool to encapsulate the qualities required to access the depth of human experience through language, relationships and emotions. It offers a counterbalance to structure that can provide an additional diagnostic tool to assess the qualities of impasses at an emotional, relational level or in the more procedural domain of structure. Chairs may notice the push and pulls from one domain or the other and reflect on the qualities of the system and on their own practice (by recognising which they might be most comfortable with or adverse to). This can be used in supervision as an additional tool to improve reflective practice and consider the emotional impact of the work on practitioners.

c. Ethics, hope and the possibility of change

This research suggests that chairs needed to be comfortable in both domains, using the enabling features of structure to foster impetus for change, while appreciating the complexity of people's experiences and the emotional, relational and practical impact of the changes required. Brophy found in her review that "about 30% of applications for care orders changed during the course of proceedings" (2006 p vi). In this research, in three out of the six families, children were returned to the care of their parents while another two were placed with family members. Although the sample is not representative and changes cannot be entirely attributed to Network Meetings, which only play a small part in the process, it is possible that the principles and culture behind the practice helped set the tone for a more productive assessment by retaining a space for hope and for the possibility of change.

Working in this field requires a capacity to work with a high level of tension, to tolerate uncertainties and manage the tensions between extreme polarised positions. Asen suggests "a way of resolving this struggle is to focus on the

child's best interest and welfare and to consider the likelihood of change being possible in the family and the helping network" (2003 p 9). The stance of "neutrality" advocated in family therapy appears insufficient in the face of such polarised tensions, extreme human suffering, trauma, inequalities and injustices. Personal qualities such as courage, persistence and a strong ethical commitment were significant in sustaining the level of curiosity and thinking required (NM1, 4, 6). Most parents in the sample seemed to enter the assessment with a sense of injustice and a suspicion that professionals had already decided. Most chairs worked hard to remind stakeholders of the agency's independence from the local authority and justice system. The attention to cultural difference and inequalities, the agency's reputation as a multi-cultural service, and the presence of interpreters and professionals from a similar cultural background to the family were important contributors to a family's capacity to engage in the assessment process.

In order to create a meaningful future space to understand and assess people's capacity to change, Network Meetings need to convey a sense of hope that family systems may be able to change. Yet this must be achieved without setting false expectations or underestimating the constraints of the law. Flaskas' exploration of the balance between hope and hopelessness in family therapy practice advocates "in equally strong measures for an attention to the coexistence of hope and hopelessness in families' experience as well as our own; for an orientation to the balance of hope; for an appreciation of the importance of witnessing and holding hope and hopelessness in the therapeutic relationship; and for the benefits of the discipline of reflective practice" (2007 p 200). The uneasy balance between hope and hopelessness was apparent in most Network Meetings as the desire to reunite parents and children had to be balanced with the best interests of the child and the constraints of the law. This was most visible in the mother's statement in NM 4 ("if I say I lie can I have my baby back"). Chairs strove for a sometimes uneasy balance between engagement with participants and forensic exploration of contested facts. They asked professionals to explain the changes expected of families and explored how this could be assessed within the time frame of the court.

In spite of the seriousness of matters discussed, humour was also used in most meetings as part of the engagement process together with empathy and an ability to listen to and bring forth individual and often contradictory perspectives. A fitting analogy for the professional chairing these meetings is the geographer Harvey's idea of an "insurgent architect" whose task he defines as

> "to be distinctively ourselves in a world of others: to create a frame that includes both self and other, neither dominant, in an image of

> fundamental equality" (2000 p 245), while ascertaining "where we learnt it from" as well as "what we can see and from where we see it from" (2000 p 238).

Quoting White (1990 p.257) he said this involves

> "confronting unbridgeable discontinuities between texts, between languages, and between people. As such it has an ethical as well as an intellectual dimension. It recognises the other – the composer of the original text – as a centre of meaning apart from oneself. It requires one to discover both the value of the other's language and the limits of one's own. Good translation thus proceeds not by the motives of dominance and acquisition but by respect. It is a word for a set of practices by which we learn to live with difference, with the fluidity of culture and with the instability of the self" (p 244).

d. From a containing structure to emotional containment

In his study of complex systems Chapman (2004 p 63) quotes Fraser & Greenhalgh's findings (2001) that "the experience of escalating complexity on a practical and personal level can lead to frustration and disillusionment". This was apparent in most meetings as stakeholders experienced impasses and the power of polarised positions. The temptation in these situations, as indicated in the literature review, is for practitioners and policymakers to fall back on increasing levels of structure and procedures. But this tends to close down thinking and creativity. The challenge for chairs is to provide a sufficient level of emotional containment required to tolerate the "messiness of everyday life" and encourage exploration within the parameters of the court timetable but without over-dependence on structure as container. In this research the letter of instruction appeared to provide both structure and emotional containment. In the first part it set the parameters and provided legitimacy for the meeting. In the third part it was open for scrutiny while helping to raise difficult topics and provide a structure for the forthcoming assessment. Developing a framework for the Network Meeting based on the three steps of ritual is likely to contribute to a more containing environment to help reduce the level of anxiety, tolerate and manage conflict and foster more creative thinking. The image of moving from structure to communitas with the aim of returning by the end of the meeting to a structured plan is likely to make it easier for chairs to make sense of and tolerate the necessary uncertainties and occasional chaos of the middle part of the meeting.

The task of the chair is also to assess and manage relationships between stakeholders. While systemic thinking and techniques were used effectively to explore patterns of relationships, psychoanalytically informed research into

organisations also provides a framework to analyse group processes. For example Bion (1961) showed the tendency of groups to be diverted from their primary tasks and identified three basic assumptions that can arise in and explain much of the irrational and chaotic behaviour seen in groups. Menzies-Lyth's action research in a hospital identified seemingly irrational structures that appeared to have developed in order to contain anxiety (1988). An example of such behaviour was the lengthy discussion in NM1 about the kind of psychological assessment that the mother required. A split emerged in the meeting between the social worker the psychologist which the chair found difficult to contain until he was able to recruit the guardian who offered to mediate with the court. Psychoanalytic understanding of group processes is likely to help chairs understand or at least reflect on such complex dynamics. Bion's theory of containment also emphasises the need for the human container to be contained. In five out of the six meetings chairs were accompanied by another clinician from the agency who provided support and supervision. The agency also has a weekly multi-disciplinary workshop that offers consultation and support to clinicians that plays a significant role in a clinician's capacity to take on this type of work (Fyvel & Mandin 2003).

Although all of the Network Meetings in this research proceeded to the assessment stage, this is not always the case. Professionals are usually asked to explain what would happen if families did not want to go ahead with this assessment and some choose other options. A secondary aim of the meeting is to assess the capacity of the system to enter into this time-limited liminal space. When stakeholders appear unable to reflect on their position, or consider the possibility of change or when there appeared to be sufficient evidence to determine the outcome of a case, a "paper assessment" is offered instead.

2. Implications of the research for the family justice system

This research supported some of the findings in the literature review about the incompatibilities of the justice and welfare systems. It also identified some of the strengths and weaknesses of both approaches. It provided a theoretical framework to conceptualise the two domains as dominated by either structure or communitas and defined a practice model aimed at facilitating the transition from one to the other. There has been relatively little process research into such meetings and the findings of this research can contribute to:

- decision makers' appreciation of the complexity of courts' requests for expert assessments;
- a recognition of the importance of creating a boundaried but relatively autonomous liminal space within the parameters and time frames of the court;

- an appreciation of the therapeutic skills required to engage with polarised systems in order to assess their capacity to change.

This research suggests that commissioning independent multidisciplinary assessments for complex contested cases as a thinking space within the boundaries of the court is likely to be more effective in assessing family systems capacity to change than single expert assessments. This may be particularly helpful in situations when the relationship and trust between family and professionals has broken down or when cultural differences raise the risk of misunderstandings. The role of the assessment team in those cases would include time to build trust in order to build bridges and increase mutual understanding between family and professionals. The role of expert witness could evolve from the delivery of specialist knowledge to the provision of a "neutral" overview or critical evidenced based analysis of the complex history and relationships of the child, the family and their interface with professional systems. Teams would seek consultation from other experts including cultural consultants. The presence in this research of clinicians from a similar cultural background to the family significantly improved engagement and brought new information to the system (NM1, 3, 6).

The practice of Network Meeting outlined in this research could, with some adaptations, be adopted by the new multidisciplinary family justice teams recommended by Norgrove (2011). However, the findings also suggest that there may be some benefits to preserving a boundary between the two domains as the dialectic exploration seemed to provide opportunities to develop a space in between to identify and explore impasses. For example NM5 showed that the FDAC model with judge and professionals working effectively and collaboratively together had been helpful in engaging both parents with the substance misuse services. However the Network Meeting found that the level of their corporation risked remaining at the level of obedience (McCarthy 1995 p 51) and continued to raise escalating suspicion within the system. This was addressed in the Network Meeting at the level of "communitas" when a space was created to encourage the parents to explore the complexity of their situation and to understand the difficult choices that they had to make at an emotional and relational level. The juxtaposition of the two domains seemed to shed light on the impasse, to provide the impetus for naming the complexity of the issues at stake and to negotiate a future thinking space. This finding may also be helpful to judges in the FDAC pilot as a model for chairing the fortnightly hearings.

It is likely to be difficult in a current political climate focussed on reducing delay and cost of proceedings to make an argument for more space to think. It would therefore be crucial to undertake further research to ascertain which

cases might require this level of multidisciplinary assessment and which could proceed to early disposal.

Further research would also need to be undertaken into the benefits of emphasising the liminal qualities of parenting assessments within care proceedings. The current emphasis of the justice system is on outcome over process. This is a recognised feature of court systems although a number of commentators advocating restorative justice in Australia/New Zealand (Braithwaite 2006 & Strand 2001) and therapeutic jurisprudence in the USA (Winick, B.J & Wexler 2006) are now highlighting the importance of process and the expressive functions of the law. King refer to the "non-instrumental role of the court" in attempting to ensure that participants feel that the dispute process has been "fair and open". They identified four main elements of procedural justice: "neutrality, respect, participation and trustworthiness" (2009 p 14). These qualities are likely to be difficult to achieve consistently within an adversarial system but have been found to be significant features of Network Meetings and subsequent assessments.

A significant finding of this research is the need for professionals involved in this field to remain alert and sensitive to the brutality of the adversarial system, its lack of fit with many cultures and to families' distrust of mainstream services (Sapnara 2010). This research showed that the context of the court can be extremely intimidating while the level of state intervention in family life can be difficult to understand. Families that have been bruised in one domain may find it easier to engage in the other. For example the grandparents in NM6 were able to work with the assessors when they had refused to cooperate with social services. Conversely the parents in NM1 seemed to rely on their solicitor and the judge to redress perceived injustice in the welfare system.

3. Application to social work practice

The practice of Network Meeting analysed in this research proposes a way of working with polarised systems that could be adapted to social work practice at different stages of the child protection process. The literature review highlighted the tendencies of the child protection system to manage risk by imposing structure under Section 47 of CA 89, child protection plans and applications to court (diagram A). A number of research into the application of the Children Act 1989 have commented on the negative impact of statutory interventions and the difficult transition from child in need framework to child protection which often increased polarisation and left both parents and professionals bruised by the intervention (Farmer and Owen 1995). Research into black and ethnic minority families' experiences of mainstream services has identified a "cycle of fear" (Ferns 2007, Fernando 2009) where people's

reluctance to engage with statutory services can be interpreted as resistance that negatively impact on professionals' assessment of risk and increases coercive practices which further increase polarisation. Research has shown consistently that in the majority of cases referred to the court, the relationship between professionals and families had broken down with allegations regarding the failure of parents to co-operate by welfare and child health professionals (Brophy 2006, Jhutti-Johal and Owen 2003). Initial contacts between family and social worker in child protection are often difficult as each bring very different cultures, beliefs and practices to this first encounter in a context of fear and suspicion. In this moment of drama and tension, it is likely that both parties will emphasise the structure behind their culture (personal and professional) and adopt more rigid positions in an attempt to ground themselves emotionally and ethically. Social workers tend to do this by emphasising their duty, explaining their role and the procedures they have to follow. Some parents can adopt a defensive attitude to repel allegations or rationalise criticism of their parenting by referring to "the way things are done in my culture". Although understandable, this increased reliance on structure risks increasing polarity, binary thinking and misunderstanding.

The meeting as a kind of ritual described in this research proposes three steps that can be adapted to organise initial social work interviews with the aim of creating a thinking space within the structure of the assessment. In order to create a liminal space, social workers first need to build trust and convey at an emotional and relational level that they understand something of the likely impact of social work intervention and a willingness to hear families' journeys and stories before deciding on a course of action to be discussed in supervision.

- The first phase includes introductions, engagement and checking that the family understands the roles/powers of professionals and the processes involved.
- The second part needs to convey a willingness to explore, in some depth and with an open mind, the risks and strengths of the family in its cultural context and from different perspectives.
- The third part can then return to structure by exploring what might need to happen next and what decisions could be made after consultation with managers.

Adopting this three-phase approach to child protection assessment interviews may provide a level of containment to help social workers move temporarily from the security of structure to take the calculated risk of entering the domain of communitas in the knowledge that they will return by the end of the interview to the more linear outcome required of their role.

The model of Network Meeting and some of the recommendations for chairing meetings could also be adapted to different processes at different stage of the child protection cycle, such us Team-Around-the-Child meetings. Further research would be indicated to consider how concepts developed in the field of anthropology, such as structure, communitas, liminality and ritual practice, can be incorporated into current social work theories and practice.

The concepts of structure and communitas reflect the care and control functions of social work (Parton 2008) and much has been written about social workers having to develop skills to work in both domains. These two concepts can contribute to reflexive practice by providing an additional tool to analyse the push and pulls in a particular case from one domain or the other. They can also be used in supervision to reflect on social workers practice by identifying the area that a practitioner might be most comfortable or drawn towards in particular situations.

4. Review of the research process and applications to research methodology

I have described the "methodological tangle" in Chapter 3 and argued that it somehow mirrored important aspects of the research subject. The approach adopted by the researcher also resembled something of the position of CAHMS clinicians in the role of expert in care proceedings, between structure and communitas.

Mapping out the epistemological terrain and research methodology provided a necessary structure to organise the mass of information gathered in an honest, explicit and methodical fashion. However methodological and theoretical concerns became at times overbearing and risked overshadowing the lived experience of the researcher and the families' involved. This tension between evidence-based and experience-near practice has been evident in much social work and psychology research (Hollway 2009). Critical realism provides an epistemological position from which to get to know the structures that determine and constrain our activities while keeping a space for human agency and different experiences of reality.

A similar debate is occurring within CAMHS as the application of evidence-based practice promoted by the National Institute for Clinical Excellence is questioned. Weisz et al's research showed that the efficacy of evidence base practice in trials shrinks "markedly when EBPs are tested in practice contexts … and compared to usual clinical care" (2013 p 274). The stance adopted in this research can best be described as an 'evidence-informed' approach that aimed to integrate the best research evidence from empirical studies with clinical experience, theoretical knowledge and reflective practice.

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Keeping this balance was not easy as the early attempt to work within a prescribed methodological structure was replaced by potentially endless reflective considerations and a fear of reaching premature closure or conclusions. Reflecting on both these aspects of the research process with the help of supervision and a diary formed an important part of the analysis that informed the findings. The imposition of structure in the form of a delivery date seemed at times necessary to the conclusion of the research.

The concept of communitas has been extremely helpful in bringing together a number of concepts that were very difficult to explore in isolation i.e. experience, language, emotions and relationships. Bringing my three data sets together made the analysis more manageable when the three column analysis was becoming unyielding and over technical. Contrasting the concepts of structure and communitas allowed to me to access the more ephemeral domain of human experience and emotions. The difference between structure and communitas seems to make sense intuitively and to provide a useful lens with which to grapple with these difficult concepts even though linking structure to the court and communitas to the clinic can be problematic. Such binary separations run the risk being too simplistic as judges can also be seen to strive towards a more holistic understanding of families (Hickman 2009) while clinicians often rely on structure (Fergusson 2009).

The use of these concepts needs to be investigated further as communitas in particular can be slippery and difficult to define. Its use in ethnographic research has until recently focused on the sacred aspects of communitas to analyse religious rituals (Eade 2011, Coleman 2002). But it has also been adapted in psychology to evaluate people's experience of residential accommodation (Hornum 1995, Spencer 2001), disability (Willett 2001) and the use of social media (Herwig 2009). I am therefore recommending further research into the use of these concepts as research tools and as practice tools for the reflective practitioner and supervisor.

Chapter 9: Concluding thoughts and recommendations

This research stemmed from a long term interest in the challenges of engaging with families often described as “multi-problem families” who appear reluctant to engage with or are unable to access the complex professional systems that are put in place to protect and support children. I set out to investigate the complex dynamics between parents and professionals involved in care proceedings, through detailed observations of the Network Meeting - a practice that has developed in one particular CAMHS at the start of court mandated multi-disciplinary parenting assessments. The research questions entailed a detailed exploration of what happens in these meetings and a contextual review of the family justice system leading to an analysis of the Network Meeting as a developing clinical practice aimed at mediating the transition between court and clinic and improving social work/clinical practice. The study evolved into an ethnography-inspired exploration of the structures, relationships and emotions emerging in Network Meetings and in the wider context of child-care proceedings.

The analysis of the referral information provided an insight into the state of the systems involved and flagged up some of the differences between court and clinic. The thematic analysis of the letter of instruction found a system that is characterised by:

- Complexity,
- Contested facts and binary oppositions,
- Polarised systems/relationships,
- Suspicion,
- The tendencies of structure to veil human experience,
- A quest for independent assessments of families’ capacity to change
- Time pressures

Many of these themes mirror findings of the literature review which highlight a range of incompatibilities between the justice and welfare systems with the former functioning primarily within the domain of “Structure” (Giddens 1984, Turner 1967) regulated by rules, law and customs. The research also identified some of the strengths and weaknesses of both approaches. The intervention/imposition of a legal framework on complex and often dangerous situations sometimes seemed to provide a containing environment necessary for decisions to be reached within a strict timetable (Brophy 2006). Indeed, the number of care applications increases sharply following Serious Case Reviews such as the Laming report (2009). However, for other cases including the six family systems involved in this research, proceedings appear

to reach impasse after several contested “expert” assessments and to remain in the court arena for longer than recommended by the Legal Services Commission (LSC).

The referrals to CAMHS for a multi-disciplinary assessment suggested some recognition within the judicial system that the court may struggle with aspects of human experience that are outside of “Structure” (e.g. assessing capacity to change, suspicion, emotional harm and neglect) particularly when there are cultural differences, moral or ethical dilemmas, and relationship difficulties within families or between families and professionals. In this context, the referral to the agency came across as a request from a “Structure” dominated system (the court) to an agency with a reputation for multi-disciplinary work and a therapeutic, relationship-based practice that may be more suited to unravel contested issues in the domain of experience, emotions and relationships.

In practice the two domains often remain polarised as the justice system’s push towards structure, rationality and a binary determination of contested facts clashes with the therapeutic need to engage with the complexities and messiness of ordinary life in order to build the level of trust required to assess people’s capacity for change. I have argued that in order to provide useful advice to the court, the assessment team has to create an environment where new kinds of thinking, experience and relationships are allowed to develop and where new information can emerge. The Network Meetings observed in this research had many of the qualities of a liminal space (Turner 1969) and transitional space (Winnicott 1971) that helped facilitate the transition from the court arena to the forthcoming multidisciplinary assessment.

The Network Meeting emerged from the thematic analysis as a kind-of-ritual to facilitate the transition from court to CAMHS and bridge some of the differences between a structure-dominated system and the more experiential domain of the clinic. Its main purpose appears to be the creation, with the consent (more or less) of all parties, of a protected space where contested issues and impasses can be experienced in the here-and-now at an emotional and relational level. This sometimes allowed new themes (not raised in the letter of instruction) to be identified, named and challenged. It helped clarify the areas that needed to be addressed during the forthcoming assessment. It gave a chance for families to understand and question professionals’ expectations in order to explore the possibilities of change. It also helped professionals appreciate families’ experiences and some of their challenges and barriers to change.

The analysis of Network Meetings identified a pattern with three more or less distinct stages that are reminiscent of Van Gennep's descriptions of the ritual process (Separation, Liminality, and Aggregation):

- **An introduction** that stresses the independence of the clinic, checks people's understanding of the process, clarifies people's roles and ensures that participants are aware of the letter of instruction. The emphasis is on engaging parents without lawyers in the room. The tone of meetings suggests a "levelling" (Goffman 1959) intention.

- **A summary** of the professionals' involvement to date and an assessment of the family that is forensically examined and questioned. A more conversational and interactive style is encouraged that appears at times to give a "flavour" of relationships or impasses and to provide a taster of the clinical method. This helped to identify or modify themes that were not addressed in letters of instruction.

- **Planning** the assessment around the letter of instruction to identify how the questions raised in the court arena could be answered in the clinic within the time-table set by the court. This section of the meeting came across as an attempt to integrate the domains of the court and the clinic.

I have argued how these three steps can be adapted to the social work context, for example to organise initial social work interviews with the aim of creating a thinking space within the structure of the assessment. This format can provide a tool to help social workers re-balance the need for structured assessments and planning with the reflective, relationship-based practice recommended by the Munro Review. It also provides a framework to integrate the dual "care and control" aspects of the social work role and combine the forensic and engaging skills required.

Network Meetings came across as very stressful for all involved but provided unique opportunities to engage with aspects of human experience and relationships in the here-and-now. The research identified some of the characteristics required to create a space to think:

- Chairs strove to maintain a position of curiosity and encouraged participants to tolerate uncertainty in the explicit knowledge that clear and unambiguous opinions and recommendations would have to be reached by the end of the process.
- The main task of chairs came across as helping stakeholders to move from the containing structure provided by the court to a level of emotional/relational containment required for thinking creatively and assessing people's capacity to change
- Chairs needed an understanding of structure as well as a capacity to engage with participants at an emotional and relational level in order to

build trust and gain a realistic and embodied picture of the issues at stakes. The most successful meetings appeared to be the ones where chairs were able to navigate within and between the two domains of "Structure and Communitas"

- Chairs attempted to provide a space where the family's experience of the process could be understood, the complex language and system could be explained and different perspectives and positions could be experienced at an emotional and relational level.
- Chairs needed to keep a space for hope and the possibility of change within the strict-time boundaries of the court time-table. This required an ethical stance informed by the best interest of the child and an appreciation of the impact of social injustice, inequalities, racism and cultural differences on relationships.

The concepts of "Structure" and "Communitas" used in the analysis captured succinctly an important aspect of the dichotomy between court and clinic - structure and experience - and the dual functions of social work. They provided a useful research tool that I would like to develop further. Chapter 3 described my attempts to identify a methodology that would capture the complexity and multi-layered nature of knowledge and experience. I was keen to move away from the binary analyses prevalent in the justice system but after prolonged exploration of alternative analytical tools, I found myself yearning for a simpler way of organising my data. I returned (somewhat ironically) to a binary description using Turner's concepts of structure and communitas. This process has strong similarities with the concept of liminality used by anthropologists to describe the middle phase of rituals. The different phases of the analysis that were written up as case studies but were not included in this thesis (see appendices A.1 to A.4) constitute what Davies called "liminal texts" "in the sense that they are themselves undetermined but in the process of becoming something else, a complete analysis or ethnography" (2008 p 256). I would argue that experience of the researcher during this process has many similarities to the task of the "expert" in care proceedings. From a critical-realist perspective, the researcher is a "means of coming to know, however imperfectly, other aspects of social reality" (Davies 2008 p 254). We get to know reality by becoming part of it while reflecting on the impact of our interventions and structures on the families we strive to understand. This involves the creation of a containing space to engage, experiment, check and reflect. This means being "expert" in not knowing (Anderson 2005), in recognising the potentials for change and in tolerating conflicting possibilities and the prospect of being wrong.

From this research, a number of recommendations can be proposed to improve policy, practice and research:

Policy

- This research highlighted some of the benefits of multidisciplinary time limited assessments. The six families involved in this research had been involved in the court process for longer than is recommended by the LSE while the CAMHS's assessment was completed on time.
- Positioning the assessment as a liminal space between the case management conference and the final hearing allows the creation of a thinking space to consider the system's capacity to change. This is likely to foster a more genuine engagement than the single "expert" assessment.
- Multidisciplinary assessment are likely to be more expensive than single "expert" assessments and further research will need to be undertaken to identify early the type of cases that are more likely to require this level of input. Evidence from this small sample suggests a number of possible characteristics such as:

    - Cultural differences that impact on families' understanding of the role of professionals and the intervention of the state in family life.
    - Contested assessments of emotional harm, neglect or attachment difficulties that require detailed observations of interactions
    - Disputed assessments of families' capacity to change when the relationship between family and professionals has broken down

- This research highlights the benefit of having a protected space to think within the parameters and time frame of the court but without too much day-to-day interference from the court (similar to the format of FDAC where the judge keeps an oversight of the proceedings without getting involved in the day-to-day management of the assessment).

Practice

- The practice of the Network Meeting as a three-step ritual-like practice bringing stakeholders together at the start of parenting assessments could be manualised and evaluated in different settings.
- Current practice could be enhanced by providing information for parents, professionals and lawyers about the aims and purposes of the Network Meeting and its place within court processes.
- Consistency could be improved by providing training for chairs to include:

    - Understanding the strengths and constraints of structure and communitas
    - Developing interviewing skills that combine engagement and forensic exploration
    - Reflective practice skills that can help notice the pushes and pulls from one domain or the other (structure & communitas) in order to gain further insight into the qualities of the system and into practitioners' own practice (by recognising which domain they might be most comfortable with or adverse to in different contexts).
    - Managing the three stages of meetings in order to preserve a discursive space in the middle stage while preserving more time for planning at the end
- Consider how children/young people may be involved in Network Meetings
- Consider the application of a three-step ritual-like practice to social worker's initial interviews and other meetings within the child protection process such as "team around the child", child protection and family group conferences.

Research

- Further research into the use of structure and communitas as a research tool
- Further research into the meaning and different types of communitas and into the way the concept can fit with other theoretical models (psychoanalysis, systems theory, mentalisation etc…)
- Further research into the applications of the concept of structure and communitas in social work

This work has taken place in London during a period of intense scrutiny of the family justice and child protection systems. This time appears analogous to the concept of liminality that proved so congruent with all aspects of this research. It has been a phase of uncertainty and conflict as competing agendas and interests are played out in parliament, public debates and budget negotiations. It is also a creative period with renewed interest in international comparisons, evidence-based research and practice development. The current debate in England and Wales has so far been dominated by a drive to reduce costs and delay. Some of the above recommendations, particularly the creation of a liminal space to facilitate assessments of family system's capacity to change, are unlikely to be welcomed by policy makers at this time of financial scrutiny and restraint.

Further research will be needed to identify, at an early stage in the care proceedings, the cases that are more likely to reach impasse in the court domain and would benefit from this kind of time-limited multi-disciplinary approach.

For the families involved in this project, the evidence that I have presented suggests that the quality of assessments and therefore the value of “expert” recommendations offered to the court is likely to be enhanced by the creation of a thinking space within the structured domain of the court. The research highlighted the complexities involved in moving from court to clinic and the courage required of stakeholders in departing temporarily from the formality, safety and security of the structured world of the court to engage with the more ephemeral domain of emotions, experiences and relationships. The practice of the Network Meeting can provide a containing framework to facilitate this transition and maximise the engagement of stakeholders in the forthcoming assessment of their capacity to change.

Appendices

Appendix A1.1 Step 1 Transcripts with comments: NM1
Appendix A1.2 Step 1 Coding of three levels of observations and descriptors
Appendix A1.3 Step 1 Three column analysis – extract from NM1
Appendix A1.4 Step 2 Synchronic analysis with comments
Appendix A3.1 Step 3 Initial thematic analysis of NM1.
Appendix A3.2 Step 3 Review and description of themes in NW1
Appendix A3.3 Step 3 Overview of themes in six meetings

Appendix B: information sheets
Appendix C: consent sheets

Appendix A1.1:
Step 1: Transcripts with comments - NW1

0.00 Observer setting up tape in the room
Chair and 2 FT in the room: I remind them of research and tape recording.
Chair: Let me check if the Guardian is here yet. I assume the manager is not here yet.
OBS: I've introduced myself to the family and they are OK about the tape
CHAIR: I've got to get the letter of instruction
People leave the room
Long silence.
3.14 Whispering as people walk in the room (inaudible)
Chair: would you prefer to sit over there?
Mum: yes
Interpreter: thank you
Chair (to no one on particular): right, there is room over here (.) E can go over here (.)
Chair (louder): We need more chairs
Family Therapist1: Shall I move over?
Chair: That's fine...
FT2 and Observer go out of the room to get chairs

4.20 Whispering inaudible and chaffling noises, zips;
Chair: Right shall we start with introductions, (.)We've got one of our team is missing but hopefully she's gonna (.) a (.) be with us
SW: I think we still need another chair
Chair: Oh we do yes (.) we do need another chair
SW: Talking over the chair to Gal: one for ( ) and possibly ( ) I think ( )
Int: We can use this here, we can use this chair
FT2 (Whispering. Inaudible)
4.45 Door opening and closing
(Noise of paper but no talking for 30 seconds).
Then chairs being brought in. (Some inaudible whispering)
6.00
Chair: Thanks for coming every body. We'll start with (ah) introduction, I'm CHAIR one of the managers here (.1) at the M
INT: (=)
FT1: my name is FT1. I'm a family therapist at the MCTC and I speak Bengali and will be involved in this (hmm) family case
Int. (=)
FT2: : My name is FT2 I'm also a family therapist. (eh.)I also work at the Marlborough Cultural Centre and (eh..) I speak Benagali silhetti and also will be working with you
Int: (=) ...Marlborough cultural centre...

SWTM: My name is SWTM and I'm one of the team managers in social services.

INT: [=] ...Social Services...

FCW: I'm FCW I I'm a social worker at (the eher) X Family Centre.

INT: [-] ...social services...

INT: And my name is INT I'm an interpreter (eh) I am bilingual assistant for the City of Westminster and also I speak Sylheti.

MUM: My name is Alia. (I'm baby's mother).

DAD: I'm Jamal, the baby's father.

GUARDIAN: I'm GUARDIAN the children's Guardian.

Comment [MSOffice1]: OE: Chair seems anxious. May need space alone to compose himself.

Comment [MSOffice2]: RC: The Instruction Letter may have taken a central role in those meetings because of the law but also maybe as container bringing structure to the meeting and to some participants.

Comment [MSOffice3]: OI: The SW was chatting to the Guardian about contact. He stood near the entrance of the room and took the lead in guiding people in the room.

Comment [MSOffice4]: OI: Engagement. This seemed an attempt to show empathy for the parents and recognise their need to support each other

Comment [MSOffice5]: OI: While professionals were busy sorting out their papers Father tended to stare down into in space while mum looked up with a blank expression
OE: Intimidation for parents

Comment [MSOffice6]: OE: Intimidation for parents ... [1]

Comment [MSOffice7]: OP:As the social worker took the lead, I won ... [2]

Comment [MSOffice8]: OE: This felt like a very long time in silence with parents staring, professionals ch ... [3]

Comment [MSOffice9]: OT: Black Caribbean man, early forties. Very fast, confident but engaging voice

Comment [MSOffice10]: RC: The Chair started the meeting in a rather formal way, asking for introductio ... [4]

Comment [MSOffice11]: OTSouth Asian women, mid forties wearing Sari without head dress. Speaks main ... [5]

Comment [MSOffice12]: OI: Mum smiled when the two MCTC therapists introduced themselves. ... [6]

Comment [MSOffice13]: OT: South Asian women, early 30's, British ... [7]

Comment [MSOffice14]: OT: White Irish women late thirties. Confident but quiet voice

Comment [MSOffice15]: OP: The social worker sat at the opposite ... [8]

Comment [MSOffice16]: OT: South Asian woman, late forties, wearing Sari and head dress. Emphasises tha ... [9]

Comment [MSOffice17]: OT: South Asian woman, slender, early twenties, wearing a dark long dress and h ... [10]

Comment [MSOffice18]: OT: South Asian man, small built mid twen ... [11]

Comment [MSOffice19]: OT: white English woman in her 40s wear ... [12]

SW: Paul , social worker.

INT: [=]

PSY: I'm PSY. I'm a psychologist here at the Marlborough.

INT: [=]

OBS: I'm P M. I'm here to do a piece of research (eh.) which I'd like to thank you all for agreeing to do .

INT: [+]

CHAIR: And Paul, who did you say we're still waiting ...

SW: We're missing the um the approved social worker from the mental health team. I haven't (eh.) I did speak to her last week and I understand she is coming (..) But I haven't managed to speak to her today.

CHAIR: (ehm)
INT: [=]

CHAIR: Is there anyone else?

Guardian: Whispers to SW, (inaudible

SW: (eher) Yes, possibly (.2) Oh sorry yes (.) a (.) the link worker from the fostering agency who is actually on her way () I know she is looking for somewhere to park but...

8.20
CHAIR: Right. Well I'm going to Chair this meeting (.2)

INT: [=]

CHAIR: And () the purpose of this meeting is to discuss the referral of your family to the Marlborough.

INT: [+] ...Marlborough...

CHAIR: And in particular the concerns that have been highlighted in the letter of instruction from C and P dated the 3rd of March.

INT: Crisis what?

CHAIR: C and P solicitors, the local authority solicitors.

INT: [+] ...solicitors... C&P

CHAIR: Yes, we're here to discuss the letter of instruction dated the 3rd of March.

INT: [+]

MUM & INT converse ...Instruction...

CHAIR: I'll explain in more detail. Let me just double check (.1) has everybody seen the document here () that has been drafted (.1), 3rd of March. (.2 INT) I've got some copies.

INT: [=]

Comment [MSOffice20]: OT: white man in his 40s, bid built, wearing smart, dark clothes and an earring. Confident, clear loud voice

Comment [MSOffice21]: OT: White women, small built, early thirties, smiling, confident and engaging voice

Comment [MSOffice22]: OP: Evidence of close working relationship between Guardian and SW

Comment [MSOffice23]: OP: chair asserts position and takes on leading role

Comment [MSOffice24]: LM: Start of monologue. Short sentences which he expects to be translated verbatim

Comment [MSOffice25]: LVF: Communication directed at parents

Comment [MSOffice26]: LVL: Chair uses formal tone

Comment [MSOffice27]: LJ: Language difficult to understand for family but the Interpreter is able to ask for clarification.

Comment [MSOffice28]: LJ: interpreter uses English word to describe solicitor

Comment [MSOffice29]: LVL: Interpreter struggles to translate LoI

Comment [MSOffice30]: SM: Mum's question is not translated

Comment [MSOffice31]: OI: When copies of the letter were circulated, mum handed a copy to dad who kept it

CHAIR: you, you (.) Their solicitor should have seen this and agreed the questions?

INT: [+]

CHAIR: Yeh? Is that a yes or a no?

INT: [+]

CHAIR: Okay so I've got some copies here. I don't know whether you've brought your own and I haven't done enough for everybody.

[several people talk at once for 10 seconds starting with SW then Mum, INT and others.
Guardian: I don't know which draft version...
Unclear what is being said as papers are moved around]

CHAIR: (cough) It might be that other people have got one dated beforehand.

SW: Yeah, I think () yeah.

Guardian: There is about three different [unclear]

CHAIR: well I think I've got the final one which is the 3rd of March. Is this something that they've seen?

INT: [=]
Dad: Nah
Mum: Nah

CHAIR: You've not seen this?

MUM: No.

CHAIR: Did you see the one previous to this?

INT: [=]

Dad: ehm No (.1) No we haven't.

CHAIR: You've not seen any of these things, you've not discussed any of these with your solicitor.

Dad: eh () well eh () we (.1) not really, no.
CHAIR: Ah (.1) okay
SW Cough

CHAIR. Well, we'll need to spend some time today talking about this instruction because this should be agreed by social services, the Guardian, and the family should have seen this with their solicitor.

INT: [+] ...social services... local authority... the Guardian

CHAIR: Can I just also check out with you two what conversations you've had about coming here with your solicitor, what your understanding is of your coming here today.

INT: [=]

DAD: (Unclear - in Bengali to his wife]
MUM: hum

Comment [MSOffice32]: OP: Blaming solicitors?

Comment [MSOffice33]: SM: OE: Mother's comments are not translated but body language suggests she does not know what this is about (or is too worried to say)

Comment [MSOffice34]: RC: This nearly always happens in Network meeting and may be an example of the dichotomy between legal and Social Care world.

Comment [MSOffice35]: OP: Chair's attempt to bring order when letter of Instruction no longer provide containment.

Comment [MSOffice36]: OP: The Guardian seem to act as bridge between legal and social care world as she knows both.

Comment [P37]:
OP: Chair as adjudicator
OE: Chair tries to engage parents through interpreter but sounds fed up

Comment [P38]: Page: 4
LVF: Chair addressing parents directly

Comment [P39]: Page: 4
OT: Dad speaks sparingly but with confident tone of voice
OE: This feels like a surprising but pleasant relief

Comment [P40]: Page: 4
OI: Dad speaks on behalf of mum

Comment [P41]: Page: 4 OP: Chair places responsibility for problem on solicitor (scapegoat? Projection?)
OE: Blame

Comment [P42]: Page: 4
OP: What prevents the father from completing sentence? Fear of incriminating himself or saying something his solicitor would not approve of?

Comment [P43]: Page: 4
LD: Still good focus on engaging parent but language sounds patronising

Comment [P44]: Page: 4
OC: This is a standard systemic question to understand family's view

Appendix A1.2:

Coding of Three levels of observation & List of possible Descriptors

a. Interaction: observations of

OI: interaction,
OV: tone of voice,
OP. positioning
OE: Emotions

b. Language:

LD: Quality of dialogue (indicative, reflective, cooperative, competitive);
LV: type of discourse or "voice" (family centred, legal, social care, therapy, social justice)

c. Reflections:

RE: Emotions noted by the observer during the meeting
RS: Observers reflections and interpretations after the meeting
RC: Information about context

1. RELATIONAL

• Close	Distant
• Co-operative	Competitive
• Allied	Adversarial
• Friendly	Hostile
• Informal	Formal
• Complementary	Symmetrical
• Direct	Avoidant
• Engaging	Assessing
• Trusting	Defensive
• Honest	Dishonest
• Power explicit	Power denial
• Strong	Fragile
• Flat	Hierarchical
• Alliances	Splits

2. DIALOGICAL:

• Dialogue	Monologue
• You	s/he - They
• Open	Closed
• Genuine	Calculated
• Open	Binary
• Affirming	blaming
• Explanatory	Dictatorial
• Exploratory	Persuasive
• Transparent	Strategic / Hidden agendas
• Cathartic	Dry
• Honest	Calculated
• Curiosity	Certainty
• Clear	Confused
• Jargon free	Jargon laden

3. EMOTIONAL

• Trust	Suspicion
• Hope	Despair
• Safety	Fear
• Friendly	Hostile
• Like	Disgust
• Humour	Serious
• Relaxed	Anxiety
• Protective	Aggressive
• Creative	Dogmatic
• Depressive position	Defensive
• Happy	Sad
• Elated	Depressed

4. PROCESSES

- Finding a way round binary processes
- Naming and Facing up to Pain / Conflict / Impasses
- Creating space to think

Appendix A1.3

Step 1: Three column scene breakdown Analysis

Time	Main topic / contributor	Quality of interactions (What happened)	Theme/language (What, why and how was it said)	Reflections (What do I make of it)
00 – 3.14	Preparation Chair + 2 members of the team	. Parents very quiet . Professionals Looking at files. SW reading novel . Staff busy meeting with each other then getting room ready	. Weight of officialdom (staff whispering, nervous jokes about observation, . different ways of managing anxieties before meeting (reading, looking at file, holding LoI,)	. Staff seem anxious . Staff use Letter of I as container.
3.14 – 6.00	Entrance 12 participants	. Much noise . Parents come last . Chair and SW invite parents in and organise chairs .Mother seems shy and anxious but smiles. Dad looks down and sleepy. .Staff welcoming, . . paper shuffling and awkward silence	. Fairness . Engaging parents .Weight of officialdom	. I felt some competition between SW and Chair about who is going to be most helpful to parents *(what informed this observation?)*
6.00 -	Introductions Led by chair	. Brief formal intro . Mum smiles at same culture FT who look at her but speak English .Chair ask SW for attendance and apologies . Guardian assist SW	. formal intro with little preamble . all mirror chair's introduction	. Holding cards to chest? . Triangle Chair-SW-Guardian seem to dominates meeting . I thought mum was looking for an ally in same culture professionals
8.20	Assessing parent's understanding of the meeting	.Chair takes charge of meeting using official language which Int finds hard to translate .Chair does his own assessment of family's	. Interview parents in the presence of network . Letter of I is placed centre stage but is seen to be flawed	.Cruel to be kind .Clash between legal and social care processes, with Guardian as potential bridge in negotiating LoI

		understanding of process. .Direct question to parents (you two) . Father helps mum answer. Cautious response (er no we haven't)	. Father has some understanding but mum's seems to be limited .Legal vs Social Care processes?	.Chair as "adjudicator " or "minder", independent (above the fray) by checking that parents are aware of LoI
14.00	Inviting the Social worker to explain (Justify ?) involvement	.Chair asks SW to clarify what he had told the family about the LoI .All agree need to explain LoI to parents . SW give a succinct list of the "main issues" in a slow monologue to be translated verbatim. .Parents look passive but mum is able to ask question about LoI . Int struggles to translate information about care and separation from baby	. Chair positions SW as commissioner of service .Evidence of open group thinking when decision is made to explaining Letter of I .The explanation is clear and careful with literal translation with some hesitation in explaining the possibility of permanent removal of the child and using the words mental health and DV.	. SW takes some of the blame then scapegoat solicitors. .All professionals seemed to share a sense of guilt or shame that the parents did not seem to have been sufficiently informed about the LoI .They also seemed aware of the complexity and absurdity of some of the language But SW continues to use official language and sound authoritative . This felt like a good but difficult attempt to bridge gaps between legal, SC and family scripts, between clarity and sensitivity .Sw seemed to ask for reassurance or support from professionals about his explanation
19.30	. Chair explains aims of meeting . CPN checks that parents understand	. Chair Check whether this was explained to them before .Mum says no . CPN suggests checking what mum understands	. Chairs stays above the fray and continues to check that good practice have been followed with parents or who's to blame (parent, SW or solicitor .Chair invites dialogue: taken up by CPN who makes use of her	. Engaging parents but Is this also a covert criticism of chair on SW and scoring points? . Mum's response sets up interesting dilemma: who do we believe and blame: SW, Parent or solicitor, system?

		. Chair says he agrees with CPN but postpone question until he's addressed procedure	observation skills and knowledge of mum to check her understanding . Clash between conflicting aims of meeting: procedures (explaining) or engagement (making use of observations and emotions in situ.	.CPN able to think using her observation and emotions . Competition between professionals: who's in charge of meeting and who is best placed to explain this to parents . gender and power difference as CPN is silenced and focus remains with 2 men
22.00	What sort of Psychological assessment	. Chair asks about a topic which SW and the team previously disputed . SW answers with authority . Psychologist intervenes . Conversation continues above noise of late person entering room. . Int does not translate	. Sign of strong pre existing disagreement between professionals is alluded to but not addressed and not translated. . Conflict avoidance, postponement or position taking	. *what was that about? The SW did not answer her question yet she says OK. This felt inappropriate to discuss this here and potentially dangerous. maybe conflict was avoided by placing the issues with solicitors but it comes back to it later though* .Feels crazy and uncontained. . scapegoat solicitors . Chair seems keen to move on and avoid conflict in front of parents
23.20	Chair checks Parent's ("you two") understanding	.Chair returns to earlier question from CPN . Father and mother check with each other .Mother use of humour . .Chair ask question again . Father rescues mum and demonstrate good understanding of court process. . Psy checks that mum understands	.Good collaborative practice but question asked abruptly as if chair is exasperated or wants to move on from possible conflict between professionals . Father sounds more fluent, clear and confident than expected .Psy wants to help mum or maybe is	. Example of good practice which still feels awkward. . how to encourage mum to talk in this difficult context . tendency of parent to give shortest least committal answer . This might be influenced by British systems' "right to silence" or just the

			starting her assessment of learning difficulties	stressful setting . relief that mum seems to understand allows chair to continue without giving mum sufficient time
26.40	SW's summary of concerns	. Chair invites SW to briefly explain background and reasons for care application . Short sentences , . Some jargon (issues , contact … not translated) . description remains vague (ill health instead of mental health) . the interpreter mirrored the SW's tone of voice	. Problem focussed description based on legal statement . With eyes on legal status of evidence ("allegations of DV")	. This is an important part of network meetings which allows close scrutiny of specific events and give a flavour of relationships. . The official tone of voice made it hard to sustain interest . Official tone of voice help distance from painful issues
30.05	SW invites CPN to contribute	.Chair asks SW to clarify MH issues .SW redirects question to CPN	. separation of roles and interagency practice . CPN addresses her feedback at the parents, looking at them and invites them to contribute to her description of her team's assessment and involvement. Addresses parents directly, inviting them to contribute and share her description. . Some jargon but more conversational and cooperative style.	. This felt like a more normal conversation and highlights benefits of multi-disciplinary presence in meeting. . Seems like a balanced feedback
32.00	Question to dad about diagnosis and	. chair tracking significant facts with professionals and parents . Dad answers but remains vague.	. . Addressing suspicion .potential Good news story	. I was not sure whether the Chair's attempt to ask direct questions to dad was an attempt to let him speak for

	drugs		(abstinence) is not picked up by dad	himself or an attempt to trip him up.
33	Psychologist checks parents' understanding of words like contact, care order…	. INT translate question to mum who gives a brief answer . Mum answers question about contact correctly .SW probably felt criticised by question	. Attempt to open dialogue and check parents understanding .	. Psy's tentative intervention seems in touch with my feelings that mum got lost but the question is taken literally by mum and its meaning not addressed by the professionals

Appendix 1.4

Step 1: Synchronic Analysis NM1 w*ith comments from the researcher in italics*

The meeting takes place in the morning. SW, Guardian arrive early followed by Parents sit who quietly in the waiting room. Professionals talk to each other files in hand for a little while then SW reads novel. The Interpreter sits with professionals not the family. Parents say they had been told of the observation and agree to it. The entrance into the room is noisy with Chair and SW taking lead in making sure there are enough chairs and the parents are given a choice of chair. The CPN and FC arrive late (10 and 20 minutes respectively).

8.00 Introductions are brief. The chair takes the lead focussing on assessing whether the parents have seen and understood the letter on instruction and why they are here. When he realises the parents seem to have limited understanding, he places the onus on the social worker to explain. The social worker takes some responsibility for this but says it was the solicitor's job to explain. Mum is able to ask what the LoI is. The SW then suggests explaining it to the parents in the meeting *(evidence of increased group thinking).* The explanation is careful with literal translation and some hesitation from the interpreter in explaining the possibility of permanent removal of the child and using the words mental health and later DV. The interpreter does not translate jargon and emotionally painful words such permanent placement.
The letter of Instruction appears to the observer to act as a helpful container (supposedly agreed by everyone, focus of meeting, brings authority of the court) but often as an insecure container (e.g which version is the right one? Have the parents seen it?). It can also be seen as a tool to engage and assess but also for participants to score points or blame each other.

20.00 The chair explains the structure of the meeting which will start with the social worker explaining why SS have decided to initiate proceedings and go to court, followed by other professionals. He explains to the parents that they will be asked to comment afterwards. The CPN notices that the parents probably have not understood the discussion and ask the chair to check. He agrees but first moves on to ask the social worker about previous discussions they have had about what sort of psychological assessment is required. This leads to a muted but angry exchange between the social worker and the psychologist which seems to predate this meeting. Escalation is avoided when both agree to wait for solicitors to agree a wording on the psychological assessment. This is not translated ("psychological assessment" C70). The chair then returns abruptly to checking the parent understanding of the reason for their assessment. Father answers for her. He comes across as more fluent and confident than expected. He demonstrates some understanding but remains vague (or guarded). The psychologist then checks whether mum also understands. She answers "you are trying to understand that am I able to look () after my own baby (.1) properly".

26.00 The Chair invites the SW to briefly explain the background and reasons for care application. He does this in short sentences to be translated literally. Language is official and carefully phrased. Some jargon (issues , contact, DV …) are not translated. The interpreter tries to mirror the SW's tone of voice. *This is usually an important part of network meetings which allows close scrutiny of specific events and gives a flavour of relationships. But in this case the official tone of voice (and the need to slow down for the interpreter) made it hard to sustain interest. I also wondered whether the official tone of voice helped create distance from painful issues.*
30.00 The Chair asks the SW to clarify MH issues. The SW redirects question to CPN who addresses her feedback to the parents, looking at them and inviting them to contribute to her description of her team's assessment and involvement. She uses some jargon but a more conversational and co-operative style. *This felt like a more normal conversation and highlighted some benefits of a multi-disciplinary presence in meeting*.

33.00 The chair asks for clarification about drug tests. SW confirmed that they have proved negative. SW tries to engage dad in confirming this good news story but only gets a nod back.

The chair invites the SW to continue with his summary. The Psychologist intervenes to check the parents' understanding of words like contact, care order… *Her tentative intervention seems in touch with my feelings that mum may have got lost in this professional discussion* but the question is taken literally by mum who answers that contact means seeing the baby and the meeting moves on without addressing or naming the underlying issue (*does mum understand or has she got learning difficulties?).* The SW continues with the history and the reason for proceedings. He explains "parallel planning". He does this thoughtfully but this level of state intervention is likely to have been very alien to the parents and the interpreter who struggles to translate. *The proposal for FGC feels very bureaucratic and top heavy and it must be so confusing for family to have so many things going on at the same time and feels to them (and me) like a waste of money*. The Interpreter mirrors SW tone of voice maybe to emphasise seriousness of talk or to distance herself from difficult subject.

36.00 When mum manages to ask a question (whether her aunt and uncle will be assessed) *I felt reassured but quickly disheartened when mum's question was pushed back for the second time. I also understood the chair's wish to understand what the parents want from this assessment and their hopes for the future before giving an answer. This is often an important part of Network Meetings when new information sometimes come to light if people have not been asked this question directly before*. There followed a dialogue (Q & A) between chair and mother about where she would like to live, with whom and with what support). On the recording, Mum's voice sounds clearer and more confident that I remembered it on the day.
The psychologist checks mum understanding again, addressing her directly. *This repeated intervention felt confusing. On one hand it seemed compassionate (making sure mum understand); it was also part of the assessment (do I need to do psychometric assessment on this woman?) and may have sounded patronising to her. It also seemed to be part of the latent conflict with the SW over whether such assessment was required. I started to think about the two-faceness of professionals (engaging and assessing at the same time) and how one can compete with kindness or put somebody down with a smile*.

38.40 The CPN intervenes to highlight a discrepancy in the mother's account. The CPN seems hurt that in spite of her commitment and hard work for the couple, they have not told her about significant people in their family. *I thought that she showed some courage in challenging dad and explaining her views especially as dad's response came across as dismissive and slightly challenging. This felt like a "real" exchange within a real relationship. Her intervention also reminded me of the seriousness of the context and the need to check and get facts right. I don't think that dad's challenge was picked up at the time, maybe because we were still feeling sorry for these vulnerable parents*. The chair moves the discussion on.

44.00 The CPN gives a summary of her team's involvement. She addresses the family directly using "you" *It felt like a good example of clear balanced feedback to family in front of the Network. This was professionally done but I saw no response from either parents. I found myself wondering about the amount of people involved with this family and thought about doing a network map later*. The chair appears to pick up on the number of people involved and reinforce the needs for clear interagency coordination. *I wondered what sense the parents made of all the different professionals and whether they would think this was an appropriate use of resources*. Both parents looked quite comfortable at that time but I was not sure how much they were focussing on what was being said. *(My attention was at time wavering as I wandered of in my own thoughts).* The chair asks if it is the right time for this assessment

48.00 SW remembers that independent psychiatric reports have been requested by their solicitors. Chair checks that the parents understand and seems aware that it probably goes "above their heads". There seems to be an element of competition between psy, sw, guardian and chair as to who is the most knowledgeable and family aware (user friendly). *I think again how one can compete with kindness.*

Appendix A3.1
Step 3: Initial Thematic Analysis NM1.

Significant moments in NM1

1. Entrance and Introduction
    a. Gage mood of participants and group dynamics: Anxiety, Officialdom, intimidated, anger, secrecy, engagement, competition with kindness…
2. Chair assesses parent's understanding of the meeting (Mn8.20)
    a. Important aim of the meeting & task for the chair. Systemic interviewing in front of others
3. Argument about what sort of psychological assessment (Mn22)
    a. Latent conflict/competition between professionals
    b. Can solicitors tell Psychologists how to do their work?
4. Psychologist's interventions to check mum's understanding (Mn37)
    a. Is she concerned about Mum or starting her assessment of Learning difficulties (C117)
    b. Competing with kindness
5. CPN' s intervention and feedback (Mn 38.40)
    a. Good example of positive client centred feedback in front of group
6. Discussion of independent psychiatric reports (Mn48)
    a. Is this discussion "going over their heads" even though it is their solicitors who are requesting it?
    b. Cultural competence being used in competitive manner
7. Chair interviews FCW (Mn 53)
    a. Start of reflective dialogue with several participants which feels more real, genuine and thoughtful
8. Guardian's position within the network (Mn1.03.00)
    a. Having an overview of all parts of the systems
9. Cultural interpretation (1.13.10)
10. Questions in Letter of instruction bring court into the room (Mn1.30.00)
    a.
11. Who decides what, when (Mn 1.40.00

12. Can assessors have autonomy within agreed time table or do lawyers decide what how assessors assess C324

13. What type of psychological assessment (Mn 1.50)

    a. Clash of two or more worlds not on the same wave length: Guardian: … can I just suggest, I can, I can write to all parties, which I'm going to do about a couple of other things, and say that this is what the Marlborough are saying they will and won't do regarding a psychological assessment … Chair: We can't be, we can't be any clearer on that [unclear] Guardian: No, and I'll describe what you're going to do. It would help to know what they're going to do in that first meeting
    b. Technical discussion takes meeting over
    c. Level of evidence thought to be required in court clashes with professional practice and ethics (e.g Psychometric tests vs relationship based-practice; Precision of language for court vs negotiation of meaning in therapy)

Themes in NM1

- Weight of officialdom
    - Silence at the start of the meeting
    - Waiting for chair to start
    - Referring to letter of instruction, court, solicitors…
    - Very different from CPCC which are more structured
- Letter of instruction as container (flawed container)
    - Everyone holding a copy
    - Provides structure to meeting
    - Negotiated by all solicitors
    - Bring power of the court into the meeting
    - Language very difficult to understand and translate
- Clash between legal, social care and family language
    - Procedures difficult to explain (FGC, parallel planning)
    - Psychological assessment
    - Scapegoat solicitors for choice of language and for requesting independent assessments
- Level of evidence thought to be required in court clashes with professional practice and ethics
    - Psychometric tests vs relationship based-practice
    - Precision of language for court vs negotiation of meaning
- Clash between different aims of the meeting (Balancing forensic task with need to engage and explain)
    - Engaging parents and encourage them to contribute
    - Assessing relationships and clarify concerns
    - Explaining and planning assessment
- Different professional styles:
    - SW: short clear sentences, sounds official and expects literal translation. Sometimes precise but other times vague and jargon laden.
    - CPN: inclusive, conversational but alert and able to question discrepancies
    - FCW: sympathetic, tentative and sensitive back lack cultural awareness
    - Guardian: Seems to have overview of the process and various positions taken by parties in proceedings which she is able to share in a low key way. She seems cautious in the ways she presents her opinion but intervenes to clarify and to offer to mediate with solicitors
    - Chair as minder of good practice, or parents rights as well as inquisitor
    - Psychologist asserting professional autonomy
- Different communication styles in different parts of the meeting (which topic engender which style. are there patterns?):
    - Dialogical
    - Reflective
    - Cooperative
    - Explaining/clarifying
    - inquisitive
    - conflictual
    - positioning
    - defensive
- Positions taken by different professionals at different time

    - Chair as adjudicator of good practice or minder or the parents' rights; keeping independent position and manoeuvrability .
    - SW's anxiety to get it right may reflect paranoid position of SW in court, trapped between judge, parents and experts; SW as commissioner of services.
    - Guardian as mediator between professionals, parents, child and solicitors; as overseer of parties position; as guardian for the child
    - Scapegoating solicitors
- Parent's position:
    - Shy, passive
    - Cautious
    - Dad defensive
    - Mum keen to answer questions in the moment
    - Mum looks for support from professionals
- Professional discourse and official tone of voice help distance from painful issues
- Competing with kindness
- Managing suspicions
- Where is the child?
- How are difficult questions addressed
    - DV, drugs, discrepancies
    - Some are addressed directly, others avoided or postponed?
- Complexity of court process and social care procedures
- Formal / informal presentation
    - MFS staff walking past family in waiting room without acknowledgement
    - Greetings
    - Introduction, reading letter, SW feedback
    - "You two", CPN
- Clash between different aims of the meeting (Balancing forensic task with need to engage and explain)
    - Engaging parents and encourage them to contribute
    - Assessing relationships and clarify concerns
    - Explaining and planning assessment
- Professional discourse and official tone of voice help distance from painful issues
- Managing suspicions
- Where is the child?
- How are difficult questions addressed
    - DV, drugs, discrepancies
    - Some are addressed directly, others avoided or postponed?
- Complexity of court process and social care procedures
- Time pressures:
    - CHAIR: I'm very mindful of time so I'm just wondering whether we should just continue going around the room,() thank you David (42.50)
- Evidence of contradiction between professionals
    - CPN: You work well as a couple (46)

Appendix A3.2

Step 3: review and description of themes NM1

a. Advocacy for versus understanding with parents

The meeting starts with the chair assessing the parents' understanding of the process. The guardian's comments about mum's solicitor suggest that s/he is a formidable court advocate in asserting her rights in court. However Mrs Begum's limited understanding suggests that no one has found a way of helping her make sense of this complex system. Professionals appear to blame each other for this state of affair instead of cooperating to understand it. Chair blames social worker who blames solicitors who look for a psychological test as a solution which the psychologist asserts needs someone to engage mum in a meaningful relationship.

Mr Miah seems to have a better understanding than his wife but it is unclear how much he is willing and able to help her.

b. Creating a reflective space

Much of the psychologist and the chair's arguments with the social worker (who in this case seems to bring the legal voice into the room) can be seen as an attempt to create a safe space to think away from the court process. They seem to be arguing for time to build a relationship with the parents (before doing psychological tests) and are reluctant to write a preliminary report after 6 weeks before they have had time to do the work required and give the parents a chance to address the concerns of professionals.

c. The tyranny of time

The assessors' request for time to complete a good assessment clashes with the baby's attachment needs. This is not named in the meeting but similar sentiments are expressed though the focus on mother's legal right for early consideration to be with her child. I.e. The strong pull (emotional and evidence-based) for mother and baby to be reunited impels professionals towards an early decision while professional experience, theory of change and good assessment practices recommend the need for a reflective space.

d. Competing with kindness

All the professionals involved appear to have the genuine best interest of the parents at heart. The solicitor is reported to search for a culturally competent psychologist and to push the local authority to place mother and child together during the assessment. In the meeting participants seem alert to the parents' demeanour and intervene when body language suggests that they may not understand. Yet this comes across as competitive as each takes position from their own professional perspective. The solicitor defends mum's legal rights; the psychologist monitors her level of understanding, the social worker pays attention to due process and interagency cooperation, and the CPN to the parents' mental health and traumatic experiences

e. Professional identities

Their heightened sensitivity of professionals suggests that professional identities may be at stake in an adversarial process that searches for expertise and certainty. The social

worker has been “going round the houses” in court to assert his position and appears to have been “given a hard time” by mum’s solicitor. He in turn is giving the psychologist a hard time by telling her how to do her job. She asserts her position as an “expert”, leaving the social worker in limbo between court and clinic.

f. Social Work between the Clinical and legal expertise

The social worker appears stuck between the psychologist and the expert. He seems to side with the structural power of the law more than the soft (communitas) power of the expert. His position makes it difficult for the meeting to create the liminal space that the chair appears to be looking for. The conversation remains stuck at or returns to the level of process and structure instead of exploring meaning, narratives and emotions. The guardian’s intervention at the end of the meeting helps restore some hope of creating a space when she backs the proposed assessment.

g. Emotional involvement

The CPN appears to have worked hard to engage with the parents and advocates for them at key points in the meeting. However the emotions that she seems to have invested in the relationship appear to get her into conflict with dad when she misunderstands aspects of their family relationships and suspect foul play.

The psychologist’s emphasis on the therapeutic relationships and the need to engage with mum before deciding on psychometric tests also highlights the difference between emotional and intellectual involvement in the work. Her interventions and persistence illustrates the former while the social worker seems more organized by proceedures.

h. Cross-cultural misunderstandings

The interpreter’s occasional of English words suggests that she is attempting literal translation of content. Professionals stop for her to translate parts of sentences during their summary, less often during conversations which must be impossible to interprete unless one understands the process. The family therapist who speaks the parent’s language intervenes in the second part of the meeting as she notes that the interpreter’s literal translation is not accurately convening of the process. Out of context, some of mum’s comments appear naïve, indicating possible learning difficulties, and the interpreter laughs on three occasions as she translates it. Once she is able to converse with the family therapist, her position appears clearer. I.e. she wants her some to return to her or her auntie as soon as possible and understands that she is going to be asked a lot of questions. But she struggles to grasp why this cannot happen today and has to engage in a long process of assessment, until she knows who she will be meeting when and what for.

There is some confusion over the family composition which appears to stem from professionals’ lack of understanding of Kinship patterns in the country of origin.

i. Engagement versus Forensic exploration

The opportunities for engagement and forensic exploration in this meeting appear to be both restricted by the domination of the court processes and professionals

disagreements. The intervention of the family therapist in the second half appears to make a positive difference for Mrs Begum, noticeable though her demeamour.

The CPN and family center worker demonstrate a level of engagement and understanding of the family which did not seem to be always reciprocated by the parents.

j. Letter of instruction

The letter of Instruction appears at times to act as a helpful container (supposedly agreed by everyone, focus of meeting, brings authority of the court etc…) but often as an insecure container (e.g which version is the right one? Have the parents seen it?). In this case it also attempts to influence the assessment process (early report and type of psychometric tests) and brings the polarized positions of the court into the network meeting.

k. State intervention into family life/ procedures

The social worker explains “parallel planning”. He does this thoughtfully but this level of state intervention is likely to have been very alien to the parents and the interpreter who struggles to translate. (The proposal for FGC feels very bureaucratic and must be confusing for family). The Interpreter mirrors SW tone of voice maybe to emphasise seriousness of talk or to distance herself from difficult subject.

l. Court and clinic

There seems to be a real conflict between legal and therapeutic practice with solicitors wanting to know what will be assessed and how and therapists wanting to meet the family and make their own mind up.
This is a very significant argument highlighting the contradictory position of the Legal, Social Care and therapeutic/psychological fields: The former emphasises a level clarity and evidence that can be agreed and scrutinised in advance; the latter emphasise the need to establish a relationship to enable an in-depth understanding of complex issues which will require a degree of flexibility and trust to ascertain; the social worker and guardian are stuck in between with the SW worrying that solicitors will blame him if the Letter of Instruction is changed while the Guardian uses her authority and confidence to mediate between the two systems

m. Outcome

This was a difficult meeting dominated by procedural and technical issues which could not be explained to the parents. The parents only had a very basic grasp of what the assessment was about and were not really interested in the technical debate. But Mum did manage to express her wishes for her son to return to her extended family and engage with the family therapist.

Appendix A3.3
Step 3 – Thematic Analysis:

Themes in individual meetings:

1. Network Meeting 1: Parental Mental health and Learning difficulties across cultures: Competing Competences
    a. Advocacy for versus understanding with parents
    b. Creating a reflective space
    c. The tyranny of time
    d. Competing with kindness
    e. Professional identities
    f. Social Work between the clinical and legal expertise
    g. Emotional involvement
    h. Cross-cultural misunderstandings
    i. Engagement versus Forensic exploration
    j. Letter of instruction
    k. State intervention into family life/ procedures

2. Network 2: Teenage mother and baby: Is mum a child or a parent? In needs guidance or assessment? In the clinic or the court?
    a. Surface and depth
    b. Engagement versus Forensic exploration
    c. The court and the clinic
    d. Child versus Parent's needs
    e. Assessment and therapy
    f. Informed consent
    g. Letter of instruction
    h. Gender and race

3. Network 3: High risk father: Rubber stamp & Battle of titans
    a. Rubber –stamp
    b. Symmetrical/polarized positions (Bateson)
    c. Child protection versus justice
    d. Liminal space
    e. Time and change
    f. Power imbalance &Two-faceness
    g. The judge-in-the-mind
    h. Cross-cultural misunderstandings
    i. Engagement versus Forensic exploration
    j. Letter of Instruction
4. Network 4: NAI across culture: "If I say I did it, can I have my baby back?"
    a. The judge-in-the-mind

b. Cross-cultural misunderstandings
c. Engagement versus Forensic exploration
d. State intervention into family life
e. Intrusion of Criminal Proceedings in Child Care
f. Additional factors:

5. Network 5: Substance Misuse: Trust, vulnerability and the tyranny of time
   a. High stakes of court proceedings/ tyranny of time
   b. Moving beyond binary oppositions
   c. Competing needs of adult and child:
   d. Competing needs of parents
   e. Honesty & Trust:
   f. Law versus Therapy
   g. Engagement versus forensic exploration
   h. Letter of instruction as third position/other
   i. The judge-in-the-mind

Step 3 – Thematic Analysis:

Different ways of organizing themes

Structural concerns (attention to procedures, rules etc…)	Space in Between	Experience (engaging, checking people's understanding etc…).
• Complexity • The tyranny of time • Professional identities Social Work between the clinical and legal expertise: • Forensic exploration • Contested facts • Binary opposition • Polarised systems/relationships • Cross cultural misunderstandings • Procedure dominated • State intervention into family life/ procedures • The court and the clinic • Children vs adults needs • The letter of instruction as constraint • Surface and depth • Symmetrical/polarized relationships (Bateson) : • Child protection vs justice • Intrusion of Criminal Proceedings in Child Care	• Creating a reflective space • engagement • Informed consent • Liminal • Time and change • space • Moving beyond binary oppositions • The letter of instruction as container • Discrepancy between aspirations of the system and reality of individual needs and frailties. • Parent's engagement in the process • Impasse – resolution • Containing, questioning at the extreme • Care- control	• Advocacy for versus understanding with parents • Suspicion • Competing with kindness • Emotional involvement • Asserting independence • Cooperation • Assessment and therapy • Rubber stamp • Power imbalance &Two-faceness • The judge in the mind • High stakes of court proceedings • Honesty & Trust • Competing needs of parents • Staying with the mess • Shift between emotions, language and relationships • Attention to cultural differences, Gender and ethnicity

Appendix B

Information sheet for professionals
About a small research project taking place

Where: At the Marlborough Family Service

Who: Philippe Mandin is employed by the Marlborough Family service as a Family Therapist. He is doing this research as part of his doctorate studies with University of East London

Why: To get his doctorate qualification and to help us understand what happens in Network meetings so that we can improve our practice and make the meeting more useful for families and for professionals.

How: The researcher will sit quietly in the meeting and use a tape recorder to record conversations so that he can remember what everybody said. He will not contribute to the discussions and there will be no change to the way that the meeting is conducted.

What will happen next: After the meeting the researcher will write down what was said in the meeting, taking out all the names and any information which could identify participants. Tapes will be stored with medical records and will be treated with the same level of confidentiality as other patient's notes under the Data Protection Act.

What will you have to do: The research need not affect the meeting in anyway. We do not anticipate any risk for you or the family from this research.

Will the research have any impact on the court proceedings: The advice from solicitors is that the research will not have any impact on the court case. Legal representatives can ask for the recording of the network meeting to be made available to the court like any other record on file but the researcher will not be invited or requested to attend court or to comment on the meetings. He will be present as an observer only, for the purpose of research.

Do you have to take part in the research? The family has been asked for their consent to take part in the research via their solicitor. You will also be asked at the beginning of the meeting whether you agree to participate in the research. The researcher will only stay in the meeting if all the participants consent. The service that you and the family receive will be exactly the same whether you decide to take part or not.

Did anyone else check the study is OK to do? Before any research is allowed to happen, it has to be checked by a group of people called a Research Ethics Committee. They make sure that the research is fair. This project has been checked by the Camden and Islington Research Ethics Committee.

What will happen to the result of the research? The researcher will write a thesis which will be marked by the University of East London. It will be kept in the university library and may be published in a professional journal. A summary of findings will be presented to the staff team of the Marlborough Family Service and to other

professionals to consider how to improve practice. It may include some quotes of what people said in your meeting but all names will be carefully removed.

Will taking part help? We cannot promise the study will help you but the information we get might help improve the way we work with families and professionals during care proceedings.

What to do if you do not want to take part:

- Tell the family's social worker or legal representative
- Tell the researcher at the start of the meeting or ring Philippe Mandin before hand at the Marlborough Family Service on 0207 624 8605

Thank you,

Philippe Mandin
Marlborough Family Service
38, Marlborough Place
London NW8 0PJ
0207 624 8605
philippe.mandin@nhs.net

19th December 2007

Information sheet for parents
About a small research project taking place

Where: At the Marlborough Family Service

Who: Philippe Mandin is employed by the Marlborough Family service as a Family Therapist. He is doing this research as part of his doctorate studies with University of East London

Why: To get his doctorate qualification and to help us understand what happens in Network meetings so that we can improve our practice and make the meeting more useful for families and for professionals.

How: The researcher will sit quietly in your meeting and use a tape recorder to record conversations so that he can remember what everybody said. He will not contribute to the discussions and there will be no change to the way that the meeting is conducted.

Do you have to take part in this research? It is up to you to decide whether you want to take part. This information sheet has been sent to your solicitor and it is recommended that you discuss this with him or her before you sign the consent form. The service that you receive will be exactly the same whether you decide to take part or not.

Did anyone else check the study is OK to do? Before any research is allowed to happen, it has to be checked by a group of people called a Research Ethics Committee. They make sure that the research is fair. This project has been checked by the Camden and Islington Research Ethics Committee.

What will happen next: After the meeting the researcher will write up what was said, taking out all the names and any information which could identify participants. Tapes will be stored with your medical records and will be treated with the same level of confidentiality as the rest of your notes under the Data Protection Act.

What will you have to do: The research will not change the way that the meeting is conducted in anyway. We do not anticipate any risk for you or your family from this research but recognise that parents often find these meetings stressful.

Will the research have any impact on the court proceedings: The advice from solicitors is that the research will not have any impact on the court case. Your solicitor could ask for the recording of the network meeting to be made available to the court like any other record on your file but the researcher will not be invited or requested to attend court or to comment on the meetings. He will be present as an observer only, for the purpose of research.

What will happen to the result of the research? The researcher will write a thesis which will be marked by the University of East London. It will be kept in the university library and may be published in a professional journal. A summary of findings will be

presented to the staff team of the Marlborough Family Service and to other professionals to consider how to improve practice. It may include some quotes of what people said in your meeting but all names will be carefully removed.

Will taking part help? We cannot promise the study will help you but the information we get might help improve the way we work with families and professionals during care proceedings.

If you decide to take part you can either:

- Tell your solicitor or your social worker
- Sign and return the consent form or bring it with you for the meeting
- Ring Philippe Mandin at the Marlborough Family Service on 0207 624 8605

Thank you,

Philippe Mandin
Marlborough Family Service
38, Marlborough Place
London NW8 0PJ
0207 624 8605
philippe.mandin@nhs.net

19th December 2007

Appendix C

CONSENT FORM

Title of Project: **An exploration of complex relationships and processes at play during Network Meetings in childcare proceedings.**

Name of Researcher: **Philippe Mandin**

1. I confirm that I have read and understand the information sheet dated..... for the above study. I have had the opportunity to consider the information, ask questions and have had these answered satisfactorily.

2. I understand that my participation is voluntary and that I am free to withdraw at any time without giving any reason, without my medical care or legal rights being affected.

3. I understand that relevant sections of the referral information and chronology may be looked at by the researcher. I give permission for the researcher to have access to this information on condition that any names and sensitive information will be amended to ensure anonymity.

4. I agree that the audio recording of the network meeting will be part of the case notes and as such can be made available to all parties if requested. I agree that Mr Mandin will be present at the Network meeting as an observer only, for the purpose of research, and will not be invited or requested to comment on the meetings observed by any of the parties attending.

5. I agree to take part in the above study.

_____	_____	_____
Name of Participant	Date	Signature

_____	_____	_____
Name of Person taking consent	Date	Signature

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