Defining children's needs in out-of-home care

Methods and challenges of a collaborative research project

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The 'future' orientation of the out-of-home care research literature which has focused on outcomes of care has risked ignoring children's experiences of care in their 'present(s)'. In this paper we describe a project, the design of which reflects an alternative to the traditional way of looking at childhood, of which this 'future' (adult constructed) orientation is part. We discuss the use of qualitative research methods to identify children's needs in care. The project has attempted to involve children as co-constructors of knowledge around their needs through participatory research methods. These methods have required us to recognise that children and their needs exist within a context of relational structures; to address the power imbalances between adult researchers and child participants; and to be flexible in responding to the consequences of a participative process. Challenges which have surfaced in the implementation of this research and our responses to them are described.

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This paper discusses the research methods and strategies developed in a collaborative research project involving Uniting*Care* Burnside (Burnside) and researchers at the University of Western Sydney. This three year project, commenced in late 2000, uses participative research methods to define children's needs in out-of-home care. The project goal, as defined collaboratively by the agency and university researchers, has been to inform the agency, and child welfare more generally, on a model of care most congruent with meeting the needs of individual children. While the project has involved one agency, Burnside, the issues discussed and the challenges posed by the research are relevant to out-of-home care of children more generally.

RESPONDING TO THE NEEDS OF INDIVIDUAL CHILDREN

In 1999, when the goals and strategies for the project were developed, we recognised the dearth of research results informing policy makers attempting to make decisions about the needs of individual children and their placements in out-of-home care. In a review of research in 1988, Colton commented that there was a lack of studies that would enable comparisons to be made about the appropriateness of different forms of care for meeting the needs of individual children. Similarly Goddard and Carew argued in 1993 that 'there has not been enough research on what kind of care is suitable for different children' (1993: 174). Our more recent review of the literature indicated that there has been no significant change in this regard and that there continues to be a lack of research which can guide decision-making about the most appropriate form of care for individual children.

In the absence of specific guidance from research on ways in which service provision can meet the needs of individual children in care, decisions about their care, and in particular their placements, tend to be made according to generalisations or assumptions about children's needs. These assumptions are framed within the dominant and traditional construction of childhood – as a period of preparation for adulthood, with children being valued as 'future adults' – and interventions are focused on producing 'good' citizens with the qualities of normative (ie, white, middle class) adults. Within this construction, concepts of a universal childhood and universal needs postulated by developmental theorists typically ignore the body of knowledge which shows the extent to which there are individual differences between children and between groups of children in terms of their needs (Hill et al., 1996; Kagan, 1980; Woodhead, 1990). Consequently, as Woodhead noted, while

> ... [c]hildren's psychological 'needs' are at the heart of contemporary public concern ... it is possible to view the concept of 'need' merely as shorthand ... serving as a very credible veil for uncertainty and even disagreement about what is 'in the best interests of children' (p. 60).

The types of research most congruent with the assumptions of this construction of childhood, and the source which Hill et al. (1996) describe as most available to policy makers, has been that of quantitative and quasi-experimental studies. These studies, in attempting to measure the effects of child welfare interventions, have tended to do so 'in terms of service outcomes rather than in terms of the effect on any given child' (Kufeldt & Thériault, 1995: 364).

An alternative to the construction of childhood dominant in developmental psychology and mainstream sociology is the construction of childhood which sees children as competent. This construction allows for recognition that children's and adults' understandings of children's interests may differ. It allows that children will have differing, rather than universal, needs and that their 'presents' as they experience them are as important as their 'futures' as adults. This alternative paradigm also recognises that children are not passive, but are actors who have understandings of their own lives which may differ from adult interpretations of children's lived experiences. The argument of researchers within the 'new sociology of childhood' paradigm, who apply 'standpoint' theory to childhood, is that:

> ... people's experiences vary according to their position in the socioeconomic hierarchy; there is no disinterested, impartial value-free perspective (Mayall, 2002).

This highlights the importance of research on how children themselves understand their needs 'in care'.

Research that seeks to understand children's standpoint(s) typically employs qualitative methods (eg, Mayall, 2002; Mason & Falloon, 2001). Our project, informed by this alternative construction of childhood, uses qualitative methods to identify children's needs in care, and to acknowledge and respect children's own knowledge, based on their experiences.

QUALITATIVE METHODOLOGY TO EXPLORE CHILDREN'S SUBJECTIVITIES

Qualitative research has a history of being used to facilitate the voices of the marginalised and the silenced, such as women, by attending to their subjective experiences. The application of this methodology to research with children is more recent. Its increasing use within child welfare is part of a broader trend that emphasises the importance of children's participation in policy and legislation. As codified in the UN Convention on the Rights of the Child (1989), this trend is based on an argument that children have the right to contribute in decision making forums concerned with their interests. Gilbertson and Barber (2002), referring to the importance of consumer feedback on the care system, argue the value of including the perspectives of children, the primary client group of the care system, in attempting to strengthen the empirical basis for alternative care practice.

Our research approach in using qualitative research methods to seek children's standpoint(s) on their needs in care, attempts to take account of the significance of structural inequalities in adult-child relations, as they affect the research process. Here we have been influenced by ethnographic and participatory appraisal research (PAR) studies. These studies acknowledge that participation:

> ... does not simply imply the mechanical application of a 'technique' or method, but is instead part of a process of dialogue, action, analysis and change (Pretty et al., 1995, cited in O'Kane, 2000: 138).

Central to this dialogue is an emphasis on strategies which facilitate research participants to have some control in the research process, and to be active contributors to the research, particularly in relation to data collection.

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In attempting to involve children as co-constructors of knowledge, we confronted several issues. In particular, we recognised the importance of acknowledging both the context in which children are situated and the power imbalances inherent in adults researching 'with' children. Acknowledging these factors posed challenges for us in developing research in which children and young people could truly engage with the research process. This meant finding ways they could share power with the interviewer, so that there was reciprocity in interviewer-child interactions.

CONTEXTUALISING CHILDREN'S EXPERIENCES OF THEIR NEEDS

Research on children's perspectives has typically ignored not only that children are socially positioned as having less power than adults, but also that they exist within relational structures. The importance of taking into consideration the contexts in which children live their lives has been argued by Hutchby and Moran-Ellis (1998). They have noted, and research by Mayall (1994) demonstrates, that generally children and their competencies are situated in a context, so that these competencies are 'bounded by structural features of the milieux in which children live their lives'. These milieux include 'the priorities of politics and policy-making themselves, which structure the institutionalized worlds of childhood' and 'the nature of children's relations with each other and with adults' (Hutchby & Moran-Ellis, 1998:14). In this context, adult-defined discourses function to both construct and constrain children, while at the same time children deploy autonomy and resistance within these discourses (Hutchby & Moran-Ellis, 1998: 20). We have structured our research process to facilitate input, not just from children 'in care' of the agency, but also from those groups of adults in this system who have care responsibilities for and relationships with the children – foster carers, birth parents, workers and senior managers. In this way the research process acknowledges the dominance and pervasiveness of adult interpretations of children's needs within out-of-home care.

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The method we identified as most appropriate for helping us to make meaning out of multiple perspectives was that developed by Guba and Lincoln, termed 'Fourth Generation Evaluation'. This approach seeks to engage all stakeholders in the research process (Guba & Lincoln, 1989).

In brief, the Guba and Lincoln (1989) methodology is designed to enable all stakeholders in a given context to be identified and invited to participate in the research. Through a staged process, information is gathered from all stakeholders and there is continuing explorative dialogue within and between groups. The aim of this process is ultimately to produce a *'joint, collaborative*, or *shared'* construction of the situation being researched, which:

> ... solicits and honours the inputs from the many stakeholders and affords them a measure of control over the nature of the evaluation activity (Guba & Lincoln, 1989:184).

We have been informed by Guba and Lincoln's approach in a general way, modifying it in response to our reflections on, and contributions from participants. In our research processes, we are seeking to identify the host organisation's construction(s) of children's needs in care through texts such as official reports and interviews with senior managers. Additionally, we have sought through interviews the input of children, foster parents, birth parents and carers, on what they consider are children's needs. We have derived constructions of needs for each group of stakeholders from an analysis of the themes emerging from the data of each group. Members of each group of stakeholders have been invited to meet in groups to comment, elaborate on and/or reinterpret the construction of data of the stakeholder group of which they have been members. As part of the dialectic process, it had been intended that the construction from each group would be shared through joint meetings of all stakeholder groups to negotiate consensus and gain understanding of differences. It was hoped that such a process would construct collaboratively the basic elements of a model responsive to children's varied needs. However, children's expressed wishes to avoid the powerless position they would occupy within such a process have led us to rethink our approach. As a result, the latter stage of this project is currently being rethought in the way discussed later in this paper.

POWER IMBALANCES INHERENT IN ADULT RESEARCH WITH CHILDREN

As adult researchers from a university, our position *vis-à-vis* those children with whom we are researching reflects structural inequalities between children and adults in a quite extreme way. Academics and children traditionally function in western societies at opposing ends of a knowledge hierarchy. In a related situation of men's research of women's issues, feminists have argued that men cannot contribute to knowledge on women's standpoint. However, as Levinson (1998) contends (as a pro-feminist male researching feminist issues), all minority group knowledges are mediated by discourses of more dominant groups. This point has been recognised in our project through the inclusion of various mediating stakeholder groups as participants contributing from their knowledge to understanding of children's needs in care. We agree with Levinson's argument that it is possible to research with subordinate groups, providing the researchers have a commitment to reflexivity and to sharing power with those they are researching. An undertaking to share power with children has been an important element of this research project. Reflexivity (thinking through our own attitudes and the ways they influence how we hear what children are saying) has been a powerful tool for helping the research team recognise and confront inequality, as experienced by the children with whom we are researching.

Callaway defines reflexivity as opening 'the way to a more radical consciousness of self' and a 'mode of self-analysis and political awareness' (Davis et al., 2000:2, citing Callaway, 1992). Reflexivity has been evidenced in our project in ongoing discussions within our research team and with others, as we have struggled to hear what children are saying outside our own individual and adult-centric biases, by acknowledging and putting aside the biases that come from being adults and that influence our understandings of what children say. In order to do this, we have tried to maintain openness in constantly thinking through our relations with child participants and critiquing the positions of each other and ourselves. This reflexive process has contributed to the action research aspects of our project and resulted in modifications at various stages, as discussed in the following section.

THE PARTICIPATIVE RESEARCH PROCESS

At our first research team meeting, we confronted the fact that we had outlined the research agenda for the project in writing the funding application without consulting children, who we were about to invite to be active participants in the research. In consultation with advocates for children's participation, we decided that while the parameters for the research had been set, we should take the risk of revisiting these parameters through asking the children concerned whether they considered the defined research goals appropriate, whether they would like to be involved and, if so, how. The children consulted were generally positive about the research and the majority indicated they would be willing to participate in it. Some children chose not to participate. The interviewers found that, particularly with older children, the fact that the interviewers took time to engage and establish some connection with them meant that, when it came to the interviews, the children were willing, even enthusiastic, to contribute, some taking a considerable amount of initiative, eg, managing the tape recorder, deciding when they wanted to replay what they had said, taking control of the interview guide, and determining when and what they responded to in terms of this guide.

In providing further opportunity for children to share power around the research process, children were given a range of ways in which they could contribute to the research. The majority of young participants chose interviews. All were given their own copy of the interview guide – a colourful, simple and easy to read document. The guide was accompanied by a 'tool box' of pens, pencils, stickers and paper to assist those who wanted to make comments graphically. All the questions for children and young people were framed in a very open-ended way, to facilitate children choosing how they wished to respond. The final question designed to maximize their control of the content of their response was: 'If you were interviewing someone who was in care or had been in care, is there a question you would like to ask them?' Participants responded to this opportunity to frame their own question with enthusiasm.

Those children and young people who participated in the research generally welcomed the opportunities provided for control over the presentation of their narratives, taking the initiative to use the tape-recorder during the interview to check back on what they had said, and following through on the opportunity, given to all participants, to read the transcripts of their interviews. In a number of instances, children requested that specific changes be made to their transcripts. One seven-year-old phoned her researcher to discuss details of the transcript provided to her. She was surprised she had said certain things, and wanted to make sure it was okay to say what she had. This gave the interviewer the opportunity to reassure her of the value of her input, to remove from the transcript anything she no longer wished to say and to add other things, so enabling the child to continue thinking through issues.

> *Whereas protection practice is premised on a construction of the child as passive, vulnerable and requiring the interventions of adults who will act in their best interests, participation practice is premised on a construction of the child which recognises the child as actor, competent and able to participate in decision making affecting his or her interests.*

Reflexivity is also incorporated in our process for analysing the data. The reflexive analytic process incorporated into the data analysis has meant ongoing sharing and interrogation by the members of the research team of our individual and collective understandings of the data. The resultant constructions of the data for each group have then been shared with the respective stakeholder groups, exposing the constructions to further interrogation and elaboration. The forums in which this has occurred have also been the forums in which the process for the final stage of the research has been discussed. On the basis of the feedback we have received from stakeholders and in particular children, we are redesigning the final stage of the project, which required all groups of stakeholders to meet to negotiate consensus and to focus on differences in the various constructions of the issues. Following concerns voiced by children alluding to problems they could face as a result of the power imbalance which characterizes adult-child relations, we recognised the inappropriateness of such a forum for this project. An alternative, emerging from discussion with another stakeholder group, may be to design a meeting of policy makers where they, through scripts derived from the various group constructions, are able to, as Guba and Lincoln (1989:223) phrase it, 'walk in the shoes' of the other groups, particularly those of the children, the *raison d'être* for this project. In this process, negotiations could occur around a construction of children's needs in care, highlighting what is common in the constructions of all stakeholder groups, while at the same time increasing understanding of significant differences between constructions.

CHALLENGES POSED BY ALTERNATIVE RESEARCH METHODS

Using a research methodology that confronts existing social relations between adults and children has created specific challenges for the implementation of the project, to which we have attempted to respond.

The use of reflexivity to understand the dynamics and products of the research has been a challenge for each of us personally within data analysis meetings, as we exposed and then discussed our own individual biases and thereby increased our understanding of what the children were telling us. For example, in analysing children's responses around siblings, one researcher heard very clearly the voices of those children who talked about the importance of sibling groups being placed together, and another researcher heard most clearly the voices of children who did not want to be placed with their siblings. Examining what at first appeared to be a conflict between researchers' understandings of what children were telling us about sibling relationships really challenged the assumptions/biases that we as researchers brought to the research. Once our biases were exposed, we were able to more constructively explore the complexity of what the data was telling us. This way of dealing with our biases has also enhanced the credibility and quality of our findings.

The emphasis on progressing the project reflexively has also placed considerable demands on the agency, as it has contributed to the slow rate of visible progress on the project. For example, the extra stage of consultation with all children willing to be involved at the beginning of the research delayed the commencement of interviews. Further, our awareness of the hierarchical ordering of knowledge, which means that children's knowledges are often discounted or amended by adults, has meant that we have been attempting at all stages to hear the voices of children and limit the privileging of adult contributions over those of children. This has required ongoing negotiation.

The second challenge for the implementation of the research has been around negotiations with adult gate-keepers. Hood et al. (1996) have referred to 'a hierarchy of gate-keeping running from the organizational level to the parents and finally to the child' informed by assumptions about roles and responsibilities for protecting children. Masson (2000) has ascribed a positive function to gate-keepers in protecting children from research that could be potentially damaging (cited in Cree, Kay & Tisdall, 2002). However, writers such as Gilbertson and Barber (2002), in discussing foster care research, have pointed to the way in which gate-keepers may have the effect of excluding children's voices and thereby limiting the possibilities for using research to strengthen practice.

The tensions around gate-keeping typically surface in research which seeks to engage children as participants contributing from their experiences (eg, Cree et al., 2002; Gilbertson & Barber, 2002; Hood et al., 1996). As experienced in our project, these tensions reflect a broader area of tension around the assumptions underlying children's rights to participation on the one hand, and their rights to protection on the other. Whereas protection practice is premised on a construction of the child as passive, vulnerable and requiring the interventions of adults who will act in their best interests, participation practice is premised on a construction of the child which recognises the child as actor, competent and able to participate in decision making affecting his or her interests.

> *For individual children in out-of-home care, engagement within our research process has provided opportunities for them to experience power through their being able to decide if they would contribute to the research and, if so, how.*

The differences between the assumptions underlying the two constructions became evident in the process of engaging children in the research, particularly around issues of access and consent. While participatory research with children assumes the child is competent and places responsibility on adult researchers to communicate with children in a way which facilitates their contributions, child protection and child welfare practices have traditionally assumed children to be vulnerable and placed responsibility with adults to protect them. The dominance of this construction is symbolised by the significance of 'duty of care' responsibilities for adults (including researchers) in the care system. In our research, the hierarchy of gate-keepers with whom we had to negotiate can be traced from an apex of three research ethics approval processes – the university, the statutory child welfare agency, and the host agency research ethics committees – to a next level of agency management, and then to individual carers and foster parents.

In our project we hoped to enable the child to be, in reality, the final gate-keeper, making informed choice about participation. Recognising the significance of research indicating that prior parental consent may constrain the child's ability to make a voluntary decision to participate in, or terminate, involvement in research (Abramovitz, 1991), we went to considerable lengths to facilitate voluntary, informed consent. We sought to interest children in participating in the research, while at the same time making it possible for them to feel it was a real option to say 'no'. Our reflections on the research process indicate that children place particular importance on a process in which they are involved in decision making. For individual children in out-of-home care, engagement within our research process has provided opportunities for them to experience power through their being able to decide if they would contribute to the research and, if so, how.

Finally, acknowledging children as co-constructors of knowledge in this project has challenged how we as researchers represent children in reporting on the project. For example, it has meant that we have resisted employing isolated quotes from children (or from any other groups of stakeholders) in this discussion. For us, as (adult) researchers, selecting children's words to fit our text, at this stage of the process, would mean simplifying and therefore devaluing the children's and other respondents' contributions. Instead, in our final documentation, children will be placed centrally by a construction of the data which attempts to respect the complexity that underlies their understanding of their needs as it emerges from our analysis of the data. Additionally, in the final document, children's construction of their needs will be placed alongside the adult constructions of children's needs in out-of-home care as they have emerged from the data contributed by other stakeholder groups. Our discussion will then fit round and seek to understand the commonalities and differences between the groups. □

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