

# CYC-Online

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

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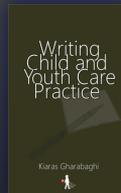
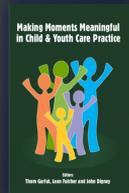
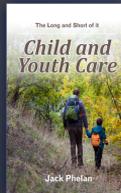
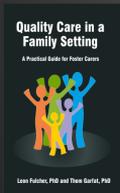
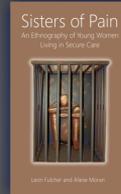
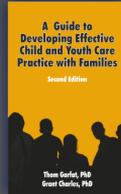
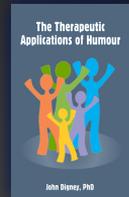
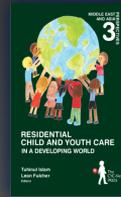
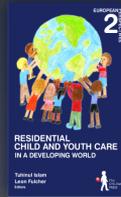
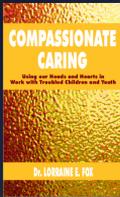
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# Covid-19: A Relational Crisis?

Lee Loynes

*It always seems impossible, until it is done.*

**Nelson Mandela**

**H**ad anyone offered any of the Girls and Boys Town South Africa team any platitude of “crisis is opportunity”, as our very restrictive national Alert Level 5 lockdown regulations were introduced in March 2020, the response would have been one of icy contemplation. Our deepest concerns centred around all of the non-relational consequences of the required Covid-19 practices and their impact on the child care life-space, our children, their families and our staff – and the risk of infection running rampant through our national residential campuses. Those ‘non-relational’ Covid-19 safety precautions of “remain masked; sanitise consistently; social distance of 2m or more; no group gatherings; if a face-to-face presence is required then masked 2m contact for no more than 15-minutes per 24-hour period in as well a ventilated environment, preferably outdoors, as possible; no exercise outside of your own home environment; curfews”; etc.



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*There cannot be a crisis next week. My schedule is already full.*

**Henry Kissinger**

The negative Covid-19 impact for childcare environments was probably one of universal experience within South Africa. The despressed pre-Covid economy had made fundraising very challenging for Girls and Boys Town South Africa, but with the onset of Covid-19 the identification of new and different fundraising strategies became critical. In turn, and in ensuring sustainability into the future, we had to anticipate the impact of the crisis and strategically and responsibly plan to manage our costs differently throughout the organisation. Responsive policy and procedure had to be developed and put in place, with reviews to existing policy to address the legislated safety restrictions. The Girls and Boys Town South Africa childcare team were faced with the challenge of ensuring relational practices within a 'non-relational' Covid-19 environment, while ensuring that the growth and development of children was not hampered. Covid-19 travel restrictions resulted in most of our youth having no direct contact with their families for 7-months, and how we engaged in youth-family work thus had to be reviewed and reengineered. Lockdown and the closure of schools for months on end had also meant that youth remained on our therapeutic residential campuses 24/7, with no outings, excursions or the like and so different and new stimulation programmes had to be planned, implemented and funded – and staff were beginning to experience fatigue. Management support, activities and communication strategies to all staff and children, along with families of children, had to be reconsidered and intensified to ensure effectiveness and ongoing forward movement and development.



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*Never let a good crisis go to waste.*

**Winston Churchill**

Had it been suggested at the time, we would have had difficulty fathoming that there might be positive outcomes from the Covid-19 State of Disaster (as declared by the South African Government in March 2020, and still in place today). With the intensified national weekly virtual management debriefing and planning team meetings and weekly sector virtual training and programme review meetings, along with the revised organisational and structural policy adaptations already in place, positive 'relationally enhanced' outcomes began to unfold:

- Previously high-risk seeking youth were demonstrating increasingly mature responses to keeping the self and others safe.
- Staff were reporting deeper, more meaningful relational connections with and from youth because of the intensified quality time spent together, as well as from their shared efforts to manage and combat the commonly shared 'Covid-19 enemy'.
- Youth were making significant advancements against their educational, behavioural and emotional treatment goals.
- We began to reach more geographically remote families via the virtual Family Strengthening and support interventions – these also included weekly face-time opportunities between youth and families and daily opportunities for telephonic contact.



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*A time of crisis is not just a time of anxiety and worry.  
It gives a chance, an opportunity, to choose well or to choose badly*

**Archbishop Mpilo Desmond Tutu**

An organisation is only as good as each team member and, indeed, team. Girls and Boys Town South Africa was, and has been blessed with both. The national staff fundraising, management, childcare and support teams demonstrated the highest levels of commitment, professionalism and grit – and no matter what adaptations were required, no matter the challenge – it was done. The young people in our care demonstrated admirable cooperation and restraint, even when frustrated with long family separations and severe State confinement requirements. The national and regional Girls and Boys Town South Africa’s board and volunteers were embracing of all in their support – and we were blessed by the ongoing support of our loyal and committed donors.

We therefore continue to proceed with caution and remind one another constantly that Covid-19 remains as virulent as ever despite whatever signs to the contrary. Many of the ‘crisis forced’ learnings will influence practice positively going forward and we will continue to truly respect and revere the strengths and resilience of our staff and volunteer teams – and of our youth in care.

**LEE LOYNES** is CEO of Girls and Boys Town, South Africa, as well as a member of the CYC-Net Board of Governors.



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# Fighting for Care, Fighting for our Elders

Kiaras Gharabaghi

It hasn't been a good year; surely that's the understatement of our time. Quite aside from the hardships, inequities and fragilities that have emerged during this year across so many different contexts once again, the young people we often find ourselves with as child and youth care practitioners have had a particularly difficult ride through this pandemic. It's hard to be homeless, unemployed, out of school, challenged by addictions and mental health issues, all the while wondering where one belongs, who one can trust, and whether or not there will be a tomorrow. For young people facing all that and racism on top of that, this year featured few good news items. Gender identities, sexual identities, disability and various combinations of all of these things really find no meaningful response during times when much of the world is worried about '*The Economy*', as if it were a close friend, a real person, someone to protect ahead of the expendable lives of many of our youth.

And still, as we approach the holiday season and the end of the calendar year in many cultural and spiritual contexts, I find myself searching for the good, just to maintain a reason to believe that things can be better. And there is plenty of good to be found, almost all of it the work and contribution of people like you – youth workers, community workers and activists, child and youth care practitioners, outreach workers, artists, performers and musicians engaged with young people by whatever



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means. I can't believe the work that is being done by individuals and by groups of people – they just don't give up, their own fragilities notwithstanding.

In my geography, which like everyone else's has re-localized so to speak given the absence of travel these days, I marvel at the work being done in institutional settings like group homes and live-in treatment centres, in schools, and in non-institutional community settings. I also marvel at the capacity building that continues through grassroots organizations engaging communities of practitioners on issues ranging from anti-Black racism, anti-Indigenous racism, gender rights, ableism, and responding to the opiate crisis especially in the big city. Not being able to do some things in person hasn't stopped our field (broadly speaking) to remain engaged, to work hard, and to seek change for the better, sometimes one young person at a time, and sometimes systemically and structurally.

These days, while I am tired like everyone else, and while I hope for a better 2021, even if we have to wait for a few more months before it might feel a little better, I still feel good knowing what people I care about, respect and look up to are doing. This pandemic has shaken all of us, but child and youth care, youth work, and community work are far from dead.

And yet, I am bothered by something that seems so obvious and yet feels very distant in our field(s). I generally center concepts rather than people when I think about what child and youth care practice means to me. The kinds of concepts that usually figure high on my list include first and foremost the concept of care, whereby I want to be clear that I reject the professionalized version of care and instead aim for a much more authentic, less system-driven version of the practice of care. I center concepts such as connection, mattering, and representation. And perhaps most importantly, I center concepts of autonomy within community(ies),



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within spiritual spaces and within imaginary places. I center value-ing humanity *as an action*, an intentional way of being in the world that transcends binaries of individualism and collectivity.

Because I center concepts more so than particular people, I don't see myself as youth-centered. I see myself instead as care-centered. And when I reflect on this year, I see some urgency for our field(s), our people, to re-mobilize and be ready for another battle. Forgive the military terminology – I am simply reclaiming the language of revolutionary struggle, which does not require violence or physical assault of any kind.

This year, our collective complacency toward the humanity of the Elders has been brutally exposed – our Elders – our roots, our wisdom, our histories. It was somewhat of a story early into the pandemic, largely because the virus spread rapidly and with devastating consequence in nursing homes and group homes for the elderly. At the time, we heard every day of the abuse, the abject conditions of life, the neglect, the throw-away culture that has settled within the 'care system' for elderly people. And as always, it impacted most severely and in the most deadly fashion on Elders with fewer resources, less socio-economic capital, and limited social connections. Indeed, we (once again) were given an enormous amount of information about what happens to the Elders in institutional settings. In Canada, after multiple waves of mass deaths in such institutions, the federal government sent in the army! And the soldiers talked about their experiences after a few weeks on the job. In brief, they more or less described the conditions they encountered in these institutions as war zones, as worse than what they encountered on their tours of duty in Afghanistan and elsewhere.

The story has quieted down in recent months, save for the occasional outbreak and consequent multiple deaths of *non-descript and anonymous*



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*old people*. Hardly much of a story when our friend, our lover, or intimate partner – *The Economy* – is struggling and in pain.

In reality, in Canada and in many other countries around the world, we have abandoned our Elders – someone’s fathers, someone’s mothers. We knowingly and with intention throw them into the heap of garbage we know is waiting for them in some of the worst instances of institutional neglect and abuse. We let them die, without dignity, without care, without love. They are The Economy’s excrement.

We should have known this all along. But 2020 is the year when we have run out of excuses. It is the year when all of us have become complicit. Because we know what we know. The evidence is overwhelming, it is accessible to everyone, and it has been verified by workers, families, communities, the army, the government and everybody else. I would love to say it has been verified by the Elders – but they have no voice; they are silenced upon admission.

As child and youth care practitioners, youth workers, and community workers, we must mobilize in defense of our Elders. The Elders are the mirror image of our young people. They are embodied in every child and in every youth. They are embodied in us. *They are Us*.

If child and youth care, however defined, centers the concept of care, then we cannot go on living in a world in which we allow for the neglect, abuse and discarding of our Elders. What is the value of centering youth in our practice while complacently accepting their abuse at another stage of life? Are we honest with our youth? Do we tell them that we are here for them now, but we will look the other way when they are the next generation of Elders left to sit, and sometimes die, in their feces?

In the medical world, dementia has been labelled as a neurological problem. I am convinced that in the spirit world, dementia is an expression



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of disbelief. When an Elder is looking beyond us, seemingly at nothing, they are seeing what we appear to be blind to; they are seeing the absence of care, the self-indulgence of people ignorant of their own fate.

2020 is the year that has exposed this horrifying truth such that no one can pretend to not know. We are the warriors of care. We must take on this fight. We must demand dignity for the Elders. We must insist on an honouring of the Elders that in some cultures and communities has maintained the spirit world for thousands of years, even in the face of genocides and horrific violence. Because if not us, then who?

Hanukkah, Christmas, Kwanzaa, Omisoka – this month, we will perform care in the name of our various cultural traditions. Notwithstanding the limitations we face this year in celebrating together as families and as communities, let us enjoy these moments of care for one another. We can be vulnerable, weak, sensitive and charming this month. *And then bring back the warriors!* We have a battle to wage. Our Elders deserve to see something again.

Happy Holidays!

Kiaras

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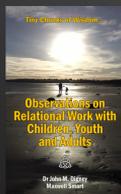
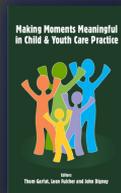
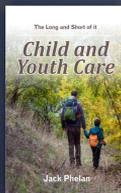
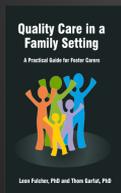
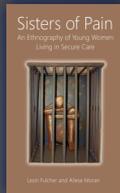
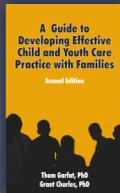
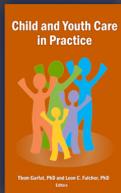
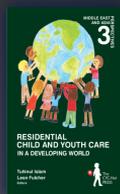
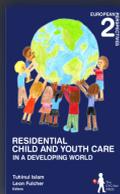
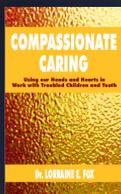


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# Influencing People to Change

Jack Phelan

Professional CYC practice is more complex than most non-professionals understand. It can appear very straightforward from the outside, just get those young people or families to behave better, show them the correct way to live and train them to act according to the “rules”.

Professional colleagues who contribute to treatment plans at meetings are very adept at prescribing the theories and remedies which will create successful outcomes. So what is the problem? Fritz Redl described the paradox of being a doctor with a bag full of useful medicine that never gets taken because the patient refuses to accept it or kicks the bag over before you can deliver it.

The task of the CYC practitioner is to build a connection with the young person or family that creates a willingness to allow these treatment attempts to influence them. Skillful CYC practitioners know all about treatment ideas, but this is irrelevant if we lack the relational ability to build cooperation and openness to our influence. Simply stated, we must develop strategies that support people to willingly accept the medicine that is being offered.

Hopefully, these ideas are not surprising to the reader, since it is the basis of a relational CYC approach, but I will try to challenge the reader to think deeply about the complexity involved here.



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Initially, we need to move beyond the behavioral focus of too many programs, which force the “medicine” down peoples’ throats through external control because this approach creates little long-term impact. Unfortunately, we also still believe that cognitive behavioral attempts have more influence than pure technical learning without any commitment to changing beliefs about lifelong values.

Relationships are used by experienced practitioners to support their efforts to build influence with young people and families, which is a major shift away from the behavioral simplicity of more basic programs. Generally, the practitioner creates an attractive persona to connect and build closeness with the young person, by being interested and informed about the other person’s interests and concerns. Gradually the young person or family feels safe and accepted by the worker and looks forward to being with the worker. CYC workers often become role models for the young person or parental models for families, and their presence creates influence and cooperation. This is a desirable situation because it builds the experience of being in a relationship that matters and a sense of being cared about by another without being victimized.

This type of connection is described as a relationship, but it is not fully relational. Relational CYC practice does involve this step but goes beyond this to build a more powerful influence.

How are the concepts of relationship and relational different?

Relationship building is a process that all of us are doing with many of the people in our lives. We attract and are attracted to people and try to maintain this attraction by being interesting to and interested in the other person. We generally evaluate our relationship quality by how happy we are to be with each other. Not surprisingly, this is not a very complex idea to grasp.



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CYC practitioners develop relational ability over several years of skilled practice, and relationship building is an important learning experience on that journey. The limitations of relationship connections, particularly in our work, are important to acknowledge though. Most CYC professionals realize after a few years that they cannot maintain connections with people after program discharge and feel very upset about the inevitable “break up”. This is a result of building a relationship that relies on the ongoing presence of the practitioner and both sides of the relationship feel cheated and resentful about the disruption. This can result in an emotional bruising that creates a reluctance to engage in new connections for both parties. CYC practitioners who engage in relationship work evaluate effective practice by how well they are liked and missed by the other person and have a goal of mutual satisfaction. There are many benefits to relationship-based practice, but some major down sides also, which are understood and mitigated as practitioners become more skilled in relational approaches and less relationship focused.



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Relationship work is built with an emphasis on the practitioner, who unwittingly becomes too important in the connecting process. The initial emphasis of trying to be interested in what the other person enjoys shifts into a focus on one's personal attractiveness to the other. Our goal becomes trying to get the other person to like us, which results in trying to become important to the other person and hoping that our absence will build anticipation of connection. The extent of being valued by the other person becomes the measure of the quality of our relationship. The issue here is that our focus in building relationships with young people and families should be to get them to like and value themselves more, not to like and value us.

Relationship is an important way for humans to connect, and most early career practitioners struggle with these complex constructions about relational work. We all want to be valued by the young people and families in our care, so it is only natural that we focus on being attractive to them. The message we deliver though is that we are particularly wonderful folks who like them in spite of their faults and problems, when what they really need is to feel capable and loveable as they are, while trying to improve some parts of their lives.

Relational practice has this focus, which is significantly more complex than relationship building as described.



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# Love in social care: Necessary pre-requisite or blurring of boundaries

John Byrne

## *Abstract*

This article is a practice reflection on the theme of love in social care. It explores the personal qualities required for social care practice and the role of a social care worker in residential child care . A definition of love is provided, and comparisons are made between the concepts of love and compassion. Questions are raised about the the issue of boundaries in the professional helping relationship and the impact of defensive practice on children's emotional development. The article concludes that love and compassion are essentially the same thing, and that since compassion is a necessary pre-requisite for the work, love is, and always will be a the core of everything we do.

## *Keywords*

Love, compassion, defensive practice, risk

Is there any place for 'love' in the professional helping relationship? Or have we sanitised care to the point where there can no longer be an emotional component to our relationships with our clients?

I recently spoke to Fr Peter McVerry (Irish social justice campaigner) and asked him what skills and qualities a social care graduate should have. He

said 'they should be angry, because anyone who cares about people should feel angry at how vulnerable people are treated in Irish society'. I took Fr. Mc Verry's comments to mean that graduates should have passion and compassion.

A child in care of the state is totally dependent on the staff. The relationship is intimate. Care staff will often know more about the child in their care than he knows about himself. When I work with children in care, I see myself as having two primary duties. The first is to help the children to become responsible independent adults. This is essentially a form of surrogate/foster parenting and just like ordinary parenting it doesn't require a degree in anything. It requires a strong commitment to meeting the children's needs (Smith, 2015). In a landmark text for anyone working with children, Kellmer Pringle (1996) identified the needs of children as being: Love and Security, Praise and Recognition, New Experiences and Responsibility. According to Kellmer Pringle, these needs are the cornerstones of any young person's emotional development.

The second duty is a bit more complex and it involves helping children to identify, understand and come to terms with the reasons why they are in care in the first place. This is a sort of quasi-counselling therapeutic care-worker role (Byrne, 2013) that does require training and education. Children come into care for a variety of reasons (Smith, 2015), but in many cases they have experienced some form of abuse, neglect or maltreatment. My job as a social care worker is to help those children to make sense of and learn to live with their experience (in so far as possible).

In the last 35 years in Ireland, there have been countless investigations into historical institutional abuse of children in care (Fergusson & O'Reilly, 2001). Almost without exception, findings have recommended training of



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staff. The assumption being that qualified staff will improve care practice and reduce or eliminate the likelihood of child abuse.

There is no doubt that historically, the standard of residential child care practice in Ireland was inadequate, and it needed reform. The problem is that in our relentless pursuit of improvement and 'professional' child protection standards, we have arguably created a new form of abuse. We have forgotten that we are not just professional therapeutic social care workers with the rigid boundaries of a counsellor/psychotherapist. We are also surrogate parents, raising children who have the same emotional needs for love and intimacy as any other child.

I recently provided training to a group of foster carers. One of them told me that she was advised by a social worker not to bring her three-year-old foster child into her bed for 'child protection' reasons. Every Saturday morning the foster mother had breakfast in bed with her own small child and she now faced a dilemma. Was she to exclude the foster child and risk alienating him in the family? Or was she to cease the practice and accept that her own child would lose out on the love, nurturance and affection inherent in the Saturday morning ritual?

In my view, the social worker's advice is an example of the type of defensive practice that has become the dominant philosophy in Irish 'professional' social care, where physical contact between staff and children is frowned upon and where a child cannot snuggle into a staff member on the couch watching TV without there being a cushion between them. In Irish residential child care in 2016, a staff member can never be alone in the bedroom with a child unless the door is open, (as if child sexual abuse only happens in a bedroom) and care staff record endless reams of information about the children in their 'care', as if they were laboratory creatures under some kind of constant investigation.



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I understand this type of defensive practice. It is a perfectly logical, thought process-oriented response to the problem of child abuse. The logic is that if we never touch a child we can never physically or sexually abuse her or him. The question often asked about this type of care though, is whose needs does it meet? Is it the system protecting the children from abuse? Or is it the system protecting itself from the litigious consequences of abuse? (Fergusson & O'Reilly, 2001). Either way, the lack of emotional availability of the staff and consequent withdrawal of physical affection is arguably an abuse in itself. According to the Irish Department of Health and Children, neglect is defined as;

*an omission, where the child suffers significant harm or impairment of development by being deprived of food, clothing, warmth, hygiene, intellectual stimulation, supervision and safety, attachment to and affection from adults, and/or medical care. (DOHC, 2011, p.8).*

How can children have attachment to, or receive affection from their carers if they are not allowed to touch them? Similarly, how can children learn to trust others if they are taught that the potential for abuse must be at the forefront of their mind in every human encounter?

Professional social care practice (and child rearing generally) is about risk assessment and management. A child's independence can never be achieved without risk. It is true to say that if a person never crossed a road he would never be knocked down, but his experience would be so life limiting that it would be inconceivable. When children's only experience of emotional and physical intimacy has been abusive, the temptation is to protect them from all risk. The consequence, however, is that they never



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learn intimacy or physical contact without abuse, and are less likely to be able to function in normal adult relationships. The challenge then for professionals in child protection, is to calculate and work with risk, not to try to eliminate it.

In Irish 'professional' social care, to feel love for a client is considered inappropriate. It is a blurring of an unwritten professional boundary that terrifies the conservative establishment. There is no doubt that any (particularly male) staff member claiming to feel love for a child in his care would send alarm bells ringing throughout their organisation. Such a claim would probably conjure up images of some kind of sordid or possibly even sexual dynamic in the relationship. The bizarre irony is that as Fr. Mc Verry explained, if you want to get a job in Irish social care, the one thing that you have to show is a sense of compassion for vulnerable people. The question then is; what is the difference between love and compassion?

Carl Rogers (1951, p.159) describes love in the therapeutic relationship as being '[d]eeply understood and deeply accepted'. He says that effective therapy is an emotional rather than an intellectual process and that in order for the client to learn to love himself he must first experience the love of another.

In a letter to his Bishops in 2005, Pope Benedict XVI states that in Greek philosophy there are three words to describe love. Eros reflects the sexual love between a man and woman (or presumably any intimate couple), Philia reflects the love of friendship and Agape is the spiritual love that is grounded and shaped by faith. Agape, or Christian charity is the principle that forms the foundation of almost every aspect of Catholic faith.

Benedict (2005, Section 31) also makes reference to love in the professional helping relationship when he states that for those working in Catholic charities:



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*in addition to their necessary professional training, these charity workers need a 'formation of the heart': they need to be led to that encounter with God in Christ which awakens their love and opens their spirits to others. As a result, love of neighbour will no longer be for them a commandment imposed, so to speak, from without, but a consequence deriving from their faith, a faith which becomes active through love.*

It seems then, that there are different kinds and depths of love that are appropriate in different relationships. Love exists on a continuum from passionate affection (Eros) to faith based love/compassion and care for others (Agape). In that context it seems strange to me that to have compassion for a client in a professional helping relationship is a necessary pre-requisite for the work, but to feel love for a client is somehow a blurring of professional boundaries.

I do not differentiate between love and compassion. I regularly feel love for the children that I work with. It is not the same type of love that I feel for my own children, but it is similar. I would never accept a standard of care for a young person in my care that I would not accept for my own child. I am under no illusion that the children that I work with are not mine, but they are no less deserving of a safe loving relationship in which they can grow and learn how to become functioning adults.

I once managed a residential children's home which was taking a referral from a secure facility. The child in question had broken €30,000 worth of windows in her previous placement. The staff did not stop her because she had a weapon in her hand and the consequence was that she



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received a conviction for criminal damage. I told her we had three rules, everything else was negotiable. They were:

1. No alcohol or drugs on site
2. No sex on site
3. Treat everybody and the property with respect

When she agreed to come and live with us, I said to her: 'there is just one more thing. You won't be breaking our windows. Not because I care about the windows, they can be replaced, but because I care about you, and I am not going to allow you to do things that are going to cause any more problems for you'. She came to live with us for seven months and never broke as much as a tea cup.

The first children's home I ever worked in used to teach the children to drive at the earliest opportunity. The thinking was that children in care are generally disadvantaged in life and driving is a skill that addresses that, by creating life opportunity. I remember teaching a twelve-year-old boy to drive in a field, and in an empty supermarket car park. By the time he was 14, he could drive more competently than some of the staff. I remember simulating power cuts so that we could make toast on an open fire and find our way around the house by candlelight. I have brought children hunting for rabbits in the middle of the night with sling shots (not guns). We climbed trees and mountains, swam in rivers and camped in fields.

I did not do any of those things because I have some kind of sinister motivation.

I did them because the children had very hard lives, which were far more complicated than any child's life should be. I tried to create a window



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so that the children could look back as adults and have some memories from childhood that did not involve abuse, neglect, or maltreatment.

You could call that love or compassion, but to call it a blurring of professional boundaries is simply wrong. It is quite the opposite. It is holding the boundary in a complex relationship that is based on emotion, not intellect, and which cannot be clinically sanitised by rules, boundaries or regulations without losing the love and security that Kellmer Pringle states is essential for normal childhood development.

In summary, passion and compassion are essential qualities for a social care worker. Our work with children in care is complex and it requires us to provide love and security to very troubled (and sometimes troublesome) children in the context of a safe 'professional' helping relationship.

It probably does not matter hugely whether we use the term love or compassion to describe what motivates us in our work. They are essentially the same thing anyway, and since you cannot have care without compassion, love and care are, and always will be, inextricably linked.

Wherever there are vulnerable people, there will be people who are willing to take advantage of them. That is a very sad and unfortunate reality of life. The job of a social care worker is to identify those people and protect clients/service users from them. However, when we practice defensively by focussing only on negativity and harm, we miss the opportunity for positivity and growth. Child protection is an absolutely essential component of professional social care, but there is no growth without risk. If child protection policy and practice is to be anything other than counterproductive, it must complement and support, rather than inhibit the relationships that are at the core of everything that we do.



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# Follow the Money

Hans Skott-Myhre

I am often struck that when I watch international thrillers about terrorism or certain detective shows, somewhere along the line one of the protagonists always seems to suggest that they follow the money. The idea is that everything in the world of global capitalism requires money, including all forms of dastardly deeds. To blow something up, poison a population, commit an assassination, and so forth, you need to buy the people and materials necessary for the job. To mount an insurrection or elect a politician, you also need quite a lot of money to pay people to carry out your project. The amounts of money spent on any kind of grab for power or influence (both fictional and actual) are really quite stunning.

Elections here in the United States, for example, run into the millions of dollars for individual candidates and more if we take into account the costs for all campaigns. [The overall cost of the federal 2020 election was nearly 14 billion dollars](#), which is twice as much as the previous election cycle of 2016. Here too, in actual elections, we have analysts who advise that we follow the money if we want to have any idea about who has the ear of the candidate ostensibly elected to represent us.

Of course, as in the fictional world of Jack Ryan, the actual trails of money can be labyrinthian and made of wheels within wheels of corporate and personal accounts that make it pretty difficult to figure out where the money came from and whose money it was after all. In a global capitalist economy, in which the very wealthy always seem to be accruing increasing



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levels of wealth even when millions are losing their jobs, one has to wonder—how does that work exactly? How is the flow of money organized so that there always seems to be more and more available to fewer and fewer of us?

There are answers and modes of analysis that follow the money as it flows steadily upward. We now know of the absolute corruption and dirty deals between contemporary politicians of all stripes and their corporate benefactors. It is no mistake that the U.S. government is chock full of millionaires and not a few billionaires. The revolving door between corporate boards and political appointments is highly operational. We also know that [global corporate empire](#) is an interlocking web of financially incestuous companies which are all really the same system of economic global rule under an ever shifting array of names and infighting over the spoils. Nation states fight over turf within the empire in the same way that monarchs did in Feudal Europe.

And it is all played out in a realm of virtual capital, in which [super computers do nanosecond calculations](#) in what is called high frequency trading that smooths the volatility of investment for those who can afford it. In a very real sense, we have organized the global economy like a giant casino in which the great majority of us are either staff or suckers and the house always wins. [Hardt and Negri](#) refer to contemporary capitalism as a system of absolute corruption in which everything is for sale and it is a seller's market for those who own it all.

It goes without saying that this is not good news for most of the young people, families and communities we work with in CYC. Their world of opportunity is extremely limited although it might improve a bit here and there, only to fail a bit sometime later. We can say that global capitalism has improved life for some of those left at the very bottom of the vestiges



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of colonial rule. The floor has been raised in terms of overall economic improvement, access to health care, child rights, and so on. But there is a ceiling to all of this and it is collapsing. Upward mobility and trickledown economics are both fairy tales with dark endings.

Like the witch in Hansel and Gretel, capitalism lures us into the house of cards with enticements of an endless supply of sweets, all the while fattening us up for the slaughter. And like the addicts we have become, we grab every scrap offered, often pushing each other aside to get a bigger bite. But the meal at the capitalist table always leaves us hungry and anxious. While Hansel and Gretel caught on to the witch's end game, it seems that many of us do not. We take all we can, often giving all we have, in order to buy more time in the gingerbread house of capitalist fantasy.

There are now clear indications that the young people we serve may do marginally better than absolute poverty, but will likely struggle for the rest of their lives against the constant pull of a riptide that is inexorably threatening to drag them out to deep financial distress and drown them in a whirlpool of misery and suffering both physical psychological.

We know the statistics on those young people leaving foster care and they are not encouraging. Care leavers are swelling the ranks of the homeless or eking out a living at the kind of wages that leave them and their children in unsustainable living conditions. Even those who do well in care, often fare poorly under the real time brutal conditions of life in their home communities. [Zip code in the U.S. is the greatest determinate of future earnings](#). The chances of breaking out of the economic legacy of your birth are infinitesimal.

[Isabel Wilkerson](#) has written powerfully about the caste system in the U.S. with its rigid hierarchies and immutable systems of exclusion and marginalization. And where do we think the young people we work with fit



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into the caste system of the center of capitalism? When we account for the ways in which the caste is deeply intertwined with the white supremacy and racism, the impacts on the young people in CYC become quite disturbing. They are set within a social structure of caste driven hierarchies of identification and geography that are simply unlikely to be remediated by psychological attempts to account for and overcome adverse childhood experiences.

The barriers are structural. It may be possible while in care to appear to therapeutically remediate the traumatic effects of living under conditions of deteriorating communities and families, the indelible imprint of racism, or the impacts of radical caste exclusion. However, that would require that our programs and initiatives didn't replicate these factors implicitly or explicitly and that the experience can transfer successfully to the outside world.

There are a series of complex factors that make this kind of transference unlikely and we can see this in what happens to the a significant number of care leavers. Some of these factors are internal to our programs. The most obvious are the major and minor expressions of racism. This is an ongoing and pernicious problem in all our programs. It is notable that we now have a dialogue about race and racism in our field, but dialogue is not nearly enough. We seemed to have taken the bait and come to believe that if we talk about it enough, we will somehow overcome hundreds of years of social conditioning and simply move beyond our white supremacist indoctrination. Regrettably, we fail to account for how deep the social induction runs and how subtle some of its most damaging practices and beliefs are.

So we revert to training it away. We offer endless workshops and trainings aimed at opening our minds and shifting our perspectives so that



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we can become some of “good” white people who can help the IPOC young people in our care to overcome their histories and enter the legions of the healed and resilient. But you can’t train away four hundred years of induction.

In a recent piece in the *New York Times*, studies of anti-racism trainings were cited that seemed to indicate that trainings have limited effects at best. In one study that covered attempts to combat bias in over 800 U.S. companies, Frank Dobbins and Alexandra Kolev concluded that

research shows that the numbers of women or people of color in management do not increase with most anti-bias education. “There just isn’t much evidence that you can do anything to change either explicit or implicit bias in a half-day session . . . Stereotypes are too ingrained.”

In another study Donald Green and Betsy Levy Paluck analyzed 1000 studies of anti-prejudice trainings (racism to homophobia) and concluded they could not determine any effect, “We currently do not know whether a wide range of programs and policies tend to work on average.” Robin Diangelo, among others cited in the *New York Times* article, correlated the difficulties undoing racism with capitalism,

Capitalism is so bound up with racism. I avoid critiquing capitalism — I don’t need to give people reasons to dismiss me. But capitalism is dependent on inequality, on an underclass. If the model is profit over everything else, you’re not going to look at your policies to see what is most racially equitable.



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If race and caste play a role in the factors that hinder effective transfer of therapeutic intervention and skills training in our work, then the economic realities of our pay structures for CYC staff is another. The fact that CYC workers often times face ongoing financial challenges of their own based on the devaluation of the work we do with young people cannot help but reinforce the perception that these kids are not really worth serious investment. Of course, many CYC workers have some degree of upward mobility available to them, but many do not. In fact, a certain number of the workers in our field share almost all of the barriers we have just delineated for young people in terms of geography, caste, and racism. Even those workers born into white privilege may well face barriers of geography and class.

This is often a hidden discourse in our institutions. We don't talk about the money. We may complain to each other over coffee or beers, but institutional information about salaries and funding sources is generally a highly confidential manner. In spite of the fact that much the field is "non-profit," the structure of our organizations tends heavily towards a corporate mode of governance. In fact, many funders would be highly uncomfortable if it were otherwise. We have very few agencies indeed with a democratic and open style of governance, in which decisions about the money are made collaboratively (and even fewer in which young people have any say). This implicit induction into the power relations of capitalist logic is not lost on young people in our care. They know full well that decisions about resources lie outside their world. They understand that they are beholden to the decisions made by others about their lives. Workers similarly understand the hierarchies of power and discipline embedded in the workplace.



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Gayatri Spivak referred to groups who must go through other groups in order to obtain the resources they need to survive, “subaltern.” She suggested that hierarchies (she was thinking of colonial structures) which demand supplication by the subaltern in order to survive, warp and distort the ability to articulate one’s experience to such a degree as to fully fail to speak in any meaningful way.

I think about this in terms of how we induct young people and staff into the language of the latest therapeutic fad. I wonder how much is lost in training our young people how to speak about their lives in a vernacular acceptable to us. I also wonder about what is lost when we also train staff in ways of speaking that may well obscure their own interactional wisdom with the young people and each other. Of course, if young people or staff want access to the money and resources of the agencies and institutions in which they are imbedded, they will learn to leave their native tongue behind and learn to speak in the current vernacular of the dominant system.



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The final factor that I want to address here, is the ways in which we engage denial of everything I have just written. I would suggest that we do this through the mechanism of exceptionalism. Like much of capitalist society, we highlight the exceptions to the actual material reality of capitalist relations. We profile the millionaire athlete of color, the rare female black corporate executive, IPOC elected officials, and so on. We perpetuate the false narrative that these exceptional achievements are accessible to anyone who works hard enough and has enough determination.

And we do it in promoting our programs. We show off our “success” stories to the media, the funders, the politicians and so on. Perhaps most importantly we show them off covertly or overtly to the young people in our programs. Like a casino that has buzzers and bells that go off when someone hits a jackpot, we give the young people the impression that they too can win the big one. They too could be the trailblazer, the exception, the hero.

I don’t mean to take anything away from these achievements. Each of them represents a history of laudable struggle and personal sacrifice. And it is a good thing that these examples give the hope of the possibility that the world could be a more just and equitable place. But hope is not sufficient. To be hopeful in the casino that is global capitalism can lead to a devastating sense of abject failure if your best is just not good enough to overcome centuries of a caste based racist system of exploitation and brutal suppression. Exceptionalism on its own is a trap.

There are things we can do. We can reorganize our institutions so as to recognize and respond to the material realities of the young people we serve. While opportunity and social mobility remain elusive and sometime phantasmagorical for care leavers, the factors that perpetuate this system



are not. The remedy is within our grasp if we choose to address what is really holding our young people back. It isn't that they are psychiatrically impaired, traumatized, or emotionally shattered; those are the effects not the causes. The remedies lie in equitable schooling, eliminating poverty, open access to medical care, decent and available housing, equitable redistribution of resources, fair and safe working conditions, a functioning justice system. To change these things in the zip codes surrounding our programs might actually change the lived reality of care leavers and the world of CYC workers as well. The question is are we as a field so embedded and invested in the current system that we can't or won't do anything real to change the structural causes of the suffering we encounter every day.

Here at the end of this devastating year 2020, I hope those administrators running programs across the world make a new year's resolution to change the world and that they do it hand in hand with the workers and young people they have pledged to serve.

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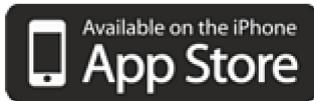
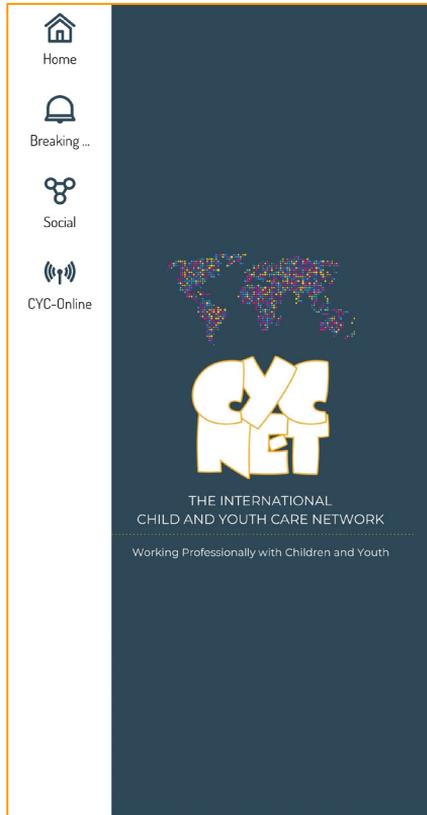


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# Compelling Disclosure: Expectation, Risk, and Benefits of Disclosures by Children and Youth

Shannon Cherry and Wolfgang Vachon

*This is the last in a five-part series of articles which explores what disclosure of child welfare lived experience does to and for Child and Youth Care (CYC). Using the two author's personal experiences with disclosure and discourses of disclosure in allied fields, this series examines the broader contexts of "disclosure" in CYC; the politics and use of disclosure; disclosure in the workplace, particularly with young people; the recent embracing of "lived experience" which we see at times slipping into pushing for people to disclose; and then ending with an article exploring ideas of power and privilege as they relate to disclosing.*

## Introduction

This is the fifth and final piece to our series on child welfare lived experience disclosure in Child and Youth Care (CYC). Our previous articles explored, analyzed, and contextualized self-disclosure, the politics of disclosure, workplace disclosure, and discourses around child welfare lived experience "privilege". Throughout the series, we draw on our personal experiences with disclosure alongside ideas developed by authors in CYC and allied fields, and original research from *Tuning into Child and Youth*



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*Care: An Arts-Based Audio-Drama Inquiry with Child and Youth Care Practitioners who have lived in Residential Care.* In this final article, we look at young people disclosing, boundaries, some of the risks attached to disclosure (for the young person and CYCPs from care) and conclude with reflections on the series.

As we engage with the existing literature about disclosure, we find an informative body related to young people and their disclosure to adults. This is not surprising as much of what CYCPs do is a result of some sort of disclosure from a young person or family to a person or agency.

## **The Young Person's Disclosure**

As CYCPs, we are trained on how to react and what to do when a child discloses to us. In CYC, we anticipate that throughout our career young people will disclose to us frequently. We expect it, and sometimes we demand it, pulling "the story" from young people. Looking back, we can both think of times we have done this, occasionally using relational skills to convince reluctant participants. "We can't help unless we know" is a refrain many of us carry, consciously or not. We sympathize, we empathize and take detailed notes. We are angered, saddened, and sometimes intrigued by what is revealed. When we are done hearing the disclosure, we then share it with our colleagues, supervisors, and at times child protection agencies when required by our duty to report. We document the disclosure and then file it away in a semi-confidential folder accessible to people the young person has not disclosed to, or in some cases, even met. CYCPs are generally encouraged to read files of the young people we are about to work with in order to gain insight into who they are before beginning any services. Because of these protocols, we often engage in work knowing a disclosure without having been disclosed to.



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We may re-engage the stories told in disclosure as we try to help young people who seek meaning and understand why they do things. We build programming, set out goals, engage in therapeutic rapport, and counselling bearing in mind what the young person has disclosed. We may bring young people with similar histories together because of their disclosures. Disclosures, or sharing experiences, are a foundational aspect of CYC. We build our work on what people tell us, be that one-on-one-self-disclosure, case notes, or information shared with us by others.

We strongly encourage, some might say pressure, young people to trust us with their disclosure. We emphasize that everything said will be confidential (with an asterisk on what we mean by confidentiality, which may or may not be apparent to everyone involved). We repeat encouraging words, creating what we hope are "safe spaces" for the young person to share parts of themselves that may put them at risk. Sometimes, the risks to the young person are astronomical. Risks can include punishment, ostracisation, discontinuation from our support or agency support, criminal charges, the inclusion of a child welfare agency, removal from family, community, and culture, among other consequences. The young person primed to disclose can be at great risk of losing a lot. It is not surprising that for some, the benefits of non-disclosure, of remaining closed, outweigh the risks of revealing.

When things are not disclosed, we sometimes make assumptions. "This young child must be going through a lot to have such behaviour, I wonder what's happening with them?" We hypothesize, and then we ask, hoping for answers to their behaviour. We ask them to disclose to us so that we can help them. If they cannot or will not disclose, we ask their family and friends to disclose on their behalf. We may coerce, manipulate, draw upon various relational practices, use our own experiences, threaten, and try any



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number of approaches to have the person "open up". When we meet a young person for the first time, we ask questions that are leading in nature. Intake forms ask for personal histories that can be hard to hear (as we imagine, or remember, how hard they are to say). In group settings, we ask young people to share what brought them to the group.

As youth engagement becomes more prominent young people are asked to share more and more as a route to leadership. For example, we recruit advisory groups based on shared identities or experiences (such as child welfare histories). We increasingly ask young people to be guest presenters, publicly self-disclosing at conferences, workshops, and in classrooms. This path of experience to expert to career is one that some are becoming increasingly uncomfortable with, as was evidenced by several CYCPs from care participants involved in the inquiry *Tuning into CYC*. This can be heard from "Charlotte", who responded with the following statement when I asked if there was anything else she would like to say before ending the conversation:

*I hope that this is a field [CYC] that former youth in care aren't kind of forced into. Yeah, I just really want to make sure that I said that, um. There's so many talented, brilliant humans, in the youth in care former youth in care community who don't need to force themselves into the helping profession, because this kind of idea from the child welfare system has told them to. Why go fix the people who couldn't raise you [laughter]? You know, like why why be exploited in the care system only to be exploited again, for the honor of having to be in front of a couple executives,*



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*who aren't going to reward you or honor your time in an appropriate fashion. I just yeah. I just don't think it's fair.*

Charlotte spoke about receiving Tim Horton's (a Candian coffee store chain) gift cards worth \$5 after speaking about her (not so great) experiences in the child welfare system. The potential for exploitation of young people from (or still currently inside) youth services and systems (such as child welfare and mental health) is an area of disclosure that has been under-discussed in CYC and would benefit from more conversations (Graham et al., 2018).

In CYC qualitative research, we ask others for their stories, cataloging, coding cross-referencing, and then disseminating the results. In CYC colleges and universities, assignments are created, asking students to reflect on and then analyze themselves. It is encouraged that students "dig deep" and look for inner meaning. We are taught to explore ourselves and then share/disclose what has been explored on paper for grades. Simultaneously, students are told to maintain a sense of professionalism or boundaries and be selective in what they disclose. These competing narratives may result in one professor eliciting and rewarding, with high grades, "profound", "deep", "traumatic", "intense," or otherwise significant disclosures in their assignment, while another professor may penalize through low grades similar or even the same disclosure. The student is left to try and navigate the, at times, confusing and contradictory messages. In *Tuning into CYC*, we met a student involved in the inquiry who was told to disclose, through an in-class PowerPoint presentation, "their traumas" (for grades) to their fellow students and professor.

What becomes apparent in the above is that disclosure is foundational to CYC practice. It runs throughout all that we do, and one could argue that



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without disclosure, we would not be able to work effectively. Disclosure is everywhere in CYC, and yet as practitioners, many of us refrain from self-disclosure, struggle with what to disclose, and may perceive a lack of guidance or support around disclosure, as we discussed previously (Cherry & Vachon, 2020d).

## **Disclosing to connect**

Invisible boundaries around disclosure exist everywhere, from the young people who share their stories with us to the adults supporting them. We have worked with young people who readily share their stories or mental health diagnosis to new people within their first exchanges. In such cases, goals are frequently developed to encourage the young person to censor their disclosure for the sake of social skills development. On one side, we ask, we demand, we take disclosures, and on the other side, we silence, censor, and close. As practitioners, we make our own decisions regarding disclosure, but seldom extend the same privileges to young people (Gharabaghi, 2008). The paths laid down for disclosure are wrought with opinion and confusion that start early and lead us into adulthood when we choose how and when we might disclose. It is important to consider these elements when we discuss disclosure regarding CYCPs from care, and indeed all practitioners who come with “lived experience” of contact with social service systems.

In our third article of this series (Cherry & Vachon, 2020c), we discussed some of the literature around disclosure as a path to the connection between the person disclosing and those they work with. We would like to return to the fraught territory of connection through disclosure. This particular use of disclosure is something that may be present at any point in one's career. Still, we think it is particularly relevant when one is starting



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out, close in age, or share particular contexts to those one works with. We suspect some practitioners may perceive disclosure as a route towards "connecting" with the young person, and that this connection is seen as a way towards establishing trust. The CYCP may think, "if I share experiences similar to this young person, they will see us as similar and thus trust me." There is an assumption that a shared past or identity builds trust. While this may be true, it is not necessarily so.

Just because two people were involved in the child welfare system does not automatically mean that they will trust each other, or indeed that they will have much in common. While the practitioner may have firsthand experience parallel to the young person, that does not mean they have the same experience as the young person, nor that either of them make sense of the experiences in the same way. There are multiple factors related to child welfare involvement that may distance the CYCP and the young person: group home or foster care, cultural dislocation while in care, quality of placement experience, province or country person was system involved, siblings, education, discharge/emancipation process, physical and cognitive abilities, race, use of restraints, age of admission, among many others. Equivalency theses quickly collapse under the reality of individual uniqueness.

We agree that trust is a necessary element of effective CYC. We also think that the desire for connection presents an opportunity to stop and explore why one is considering disclosing as a route towards connection. Several years ago, a CYC student doing their first placement, in a school setting, reached out to Wolfgang. They wanted to talk about a young person they were working with who was cutting themselves. This behaviour was known by the school and by the young person's parents. The CYC student shared with me that they had a long history cutting



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themselves, from when they were younger (and they no longer did that behaviour). They had tried to talk with this young person about their self-injurious behaviour, but the young person was not engaging in this conversation. The CYCP student asked if they should disclose their own history of cutting as a way to open up the conversation. We had a meaningful conversation, starting with their role in the school as a student doing their 1st placement and their skill level (at the time, I was teaching them in a 2nd semester introductory Interviewing and Counselling course). We then moved on to talking about the purpose of disclosure generally and their situation specifically. We talked about why they wanted to disclose, their desire to connect about this topic, in particular the possible repercussions of disclosing, where they were in their own healing, how comfortable they were with other people knowing about this history (for example, why they did not want to bring it to the seminar group of other students in placement guided by a different faculty member), what was going on with them regarding their feelings about their competency as a CYCP (in their first placement), their relationship with the younger person, and their own schooling journey (including grades). It was a robust and revealing conversation for this student, and they ultimately decided not to talk about their own self-injurious history.

Many things became apparent in this conversation, including that the impulse to disclose ultimately had far more to do with the student's own needs than the young person's needs. The question is then raised, who is the disclosure for? A 2013- 2014 working group on self-disclosure of the Lived Experience Research Network (LERN), "an organization developed to promote service user leadership and inclusion in the behavioral health and disabilities fields" (Marino et al., 2014, p.1)" explored and did research on self-disclosures of people with a history of experiences in the mental health



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system. While they discuss the benefits, risks, recommendations, and processes of such disclosures, they write, "effective self-disclosure involves communication that change is possible and maintains a focus on the person being supported. The purpose of self-disclosing is to benefit others. Self-disclosure should be recovery-focused and should be mindful of trauma histories and interpersonal boundaries" (Marino et al., 2014, p.11). In this claim that self-disclosing is to benefit others, one is directed to prioritize benefits to others, while maintaining safety for self. We interpret this to mean the decision to disclose is for the benefit of the receiver, the decision to remain closed is for the benefit of self.

Understanding why we are motivated to disclose to a young person need always be at the forefront of our considerations about disclosure. We (Shannon and Wolfgang) are less rigid than some in CYC regarding the lines between practitioner and friend. We think the main place CYCP and friend diverge is in the back and forth nature of sharing personal aspects of oneself. There are many things we will tell our friends that we won't tell a person we're working with. Of course, this is true across all sorts of relationships. Different relationships receive different information about us. Our doctor may know things about us that nobody else does, and there are many things our doctors don't know that others do, which seems appropriate. There have been points in my (Wolfgang) career when I did sexual health education, and I would share with young people aspects about my sexuality that I wouldn't share with family members or indeed, some of my friends. I had a colleague, also doing sexual health education, that would never ask a question of young people she worked with, that she was unwilling to answer herself. While my colleagues' decision is more extreme than either of us (Shannon and Wolfgang) are comfortable with,



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we believe it raises provocative and important questions regarding limits to sharing.

We both think there are valid reasons to share aspects of one's past, including self-injurious behavior, child welfare experience, mental illness, sexuality, drug use, abuse history, etc. Indeed, as we think through these topics, we don't see a particular experience that we would definitively say should never be disclosed within the professional CYCP/young person or family context. There may be elements of one's life that the CYCP chooses never to share (like each of us has chosen), but that is different from a topic prohibition. We accept that there may be things that ought never to be shared; however, in each example we come up with, we can imagine a context-specific exception.

## Conclusion

We started this five-article project by asking, "what does disclosure do in CYC?" We would like to end by reconsidering that question. When looking at the word "does", we see meanings related to fixing, performing, and solving. One *fixes* through preparing, repairing, organizing, ensuring, and looking after. One *performs* by accomplishing, acting, completing, executing. And one *solves* by working, figuring, and puzzling something out. It is instructive then to ask, how might the "discourse of does" influence the conversation about disclosure in Child and Youth Care. Is disclosure of particular lived experience (for example, child welfare) fixing, performing, or solving?

To disclose, as discussed in our first article, "is to open up what was previously closed, to reveal what was not previously known" (Cherry & Vachon, 2020a, p. 39). Disclosure is performing an action that is being done for a purpose. We speak about "doing to, doing for, and doing with"



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frequently with the intention that young people and families will no longer require us and thus are able to "do without" (Liang et al., 2016). Often, perhaps usually, when we disclose, we are doing it to fix or solve something. While some in CYC may be reluctant to call what we do fixing, a compelling argument can be made that in both responding to disclosure and through self-disclosure, we seek to fix or solve some sort of problem. We respond to disclosures by young people to "look after" someone or something that is requiring care. As we discussed above in this article, sadly, our efforts do not always solve. Indeed, disclosure may result in things becoming materially worse for young people and their families, and thus they may be motivated to stay closed.

CYCPs self-disclose to benefit the young person, at least that seems to be the most developed argument for self-disclosure. The benefits we seek may include attempts to fix a fractured or less than effective relationship; to "connect"; our perception that it will lead to increased empathy, role-modeling, understanding, or other relational elements (Oats et al., 2017; Walker et al., 2014). We "use" our self-disclosure towards a purpose; we discussed this in our third article, framing it as an instrumental application of lived experience (Cherry & Vachon, 2020c). An instrument used to fix something that needed mending, or an instrument used to perform an action towards creating something new.

We wrote that "disclosing isn't being open, it is becoming open" (Cherry & Vachon, 2020a, p. 39-40). One is acting, moving towards something, performing a conscious becoming. The idea of becoming is an attempt at solving. Solving who we are in relationship to the young person, the family, the community. Solving is different from resolving. Solving is a process of coming to an answer; it is an attempt to figure out, to sort through; in solving, we try to find a solution. This is an active process that has the



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possibility to continue, an answer isn't an end, it is an opportunity to explore what comes next. In solving, we are becoming. We might ask, what do we do with this answer? In contrast, to resolve is to complete, to finish, to close, we might think of it as a resolution. Disclosure rarely, if ever, results in resolution, rather in our experience, it provides an answer that can then be applied to the next step, the next question, the next interaction. When the young person or the CYCP shares, discloses, or declares, they are performing a process of becoming something new.

Disclosure in CYC has consequences individually (for both practitioner and young person), relationally (CYCP and young person/family, as well as CYCP and colleagues, and in supervision or with employers), therapeutically, and, as we argued in article 2 (Cherry & Vachon, 2020b) politically. We think it is beneficial to consider the larger implications for the Child and Youth Care field regarding disclosure: what does it do? Or we might ask, what do we become as a field? Disclosing, for example child welfare lived experience, requires considerations beyond individual interactions. A thorough and considered "becoming" will result in conversations about schooling, recruiting, working, supervising, and interacting with people with such experiences. Disclosure goes beyond the individual. We discussed how employment has changed in the social services with more agencies actively seeking out and hiring people with lived experience, programs developed to support those employees, and research being done to examine the benefits to organizations and those who access services. While every CYCP from care needs to make their own decision about sharing child welfare lived experience, it is worth recognizing that the decision has waves beyond the individual actors.

With the above said, we have also noted that "little empirical research has been done on the long term impacts that self-disclosure may have in



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workplaces (Marino et al., 2014), and certainly none that we know of has been done in CYC or related to CYCPfC" (Cherry & Vachon, 2020c, p66).

While we have each shared personal choices and decisions regarding what we do and don't disclose, guidelines that we have developed through our years of service, and discussed other writing and research regarding disclosure, we have actively resisted laying out prescriptions for disclosure. We do this in recognition that each CYCP will have their own comfort levels and natural (or learned) tendencies. Further, each interaction is unique, and the intentions of sharing, declaring, or disclosing will benefit from thoughtful consideration. Considerations that include what disclosing does for you, for whom you're working with, your workplace, and the larger CYC field are all aspects that may inform your choices. A question to consider might be, what do you want to become?

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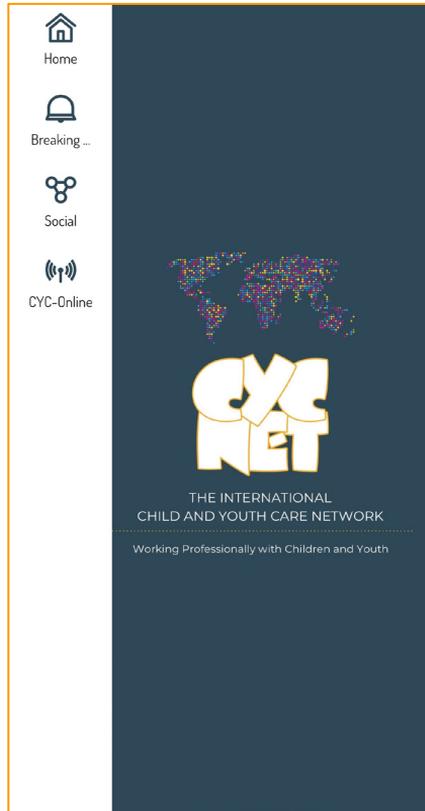
**WOLFGANG VACHON** has been working with children and youth for close to three decades including those who are street involved, LGBTQ+, survivors of trauma, minoritized, living in detention, and other forms of state care. A significant part of his practice focuses on using arts which has led to developing dozens of plays, and other arts-based projects. Wolfgang teaches Child and Youth Care at Humber College, and is currently completing his PhD in CYC at the University of Victoria. Wolfgang is a host of CYC Podcast: Discussions on Child and Youth Care ([www.cycpodcast.org](http://www.cycpodcast.org)).



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# The Embodiment of Self

**Emmie Henderson-Dekort**

## *Abstract*

The use of self is a concept discussed frequently within child and youth care practices. In this piece, it is countered that perhaps, rather than 'using' or consciously 'applying' self to practice, bringing and using your true and unconscious self is more genuine practice. Making meaningful connections when the self is unconsciously altered and then effortlessly embodied and shared is the position of this piece. The premise involves being self in order to make meaningful moments and true connections with young people.

## *Keywords*

being self, sixth sense, embodiment, meaningful moments, connections, relationship

In child and youth care practice, the notion of self is often discussed as being a pivotal and innovative 'tool' practitioners can implement and use when interacting with young people in practice. The idea of self has been discussed in great detail and complexity in past works and the intricacy is apparent and appreciated throughout the field. Ward (2010) and many other practitioners present the idea of self as a 'tool' within the toolbox of practice that can develop over time. They furthermore suggest that self is not solely an internal quality but that it has various ecological forces that may drive its alterations and malleability. While it is quite possible the self can be altered by external forces, the position throughout



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this piece is to place emphasis on the efficiency of self exclusively as an internal and unconscious quality.

Referring to self as a 'tool' gives the appearance and operation of self as an objective, tangible strategy, despite self being present and embodied within individuals, and thus considered subjective throughout this paper. The idea here is: rather than *using* self, just *being* self can allow practitioners to achieve genuine, effective and somewhat transcendent relational connections. This piece will aim to reconsider the use of self as a 'tool' and rather consider how it manifests as a part of who we are subconsciously. Through acknowledging the natural subconscious self, relational practice will be more effective than through the intentional application of a modified and influenced 'tool' of self. Moreover, this piece will aim to explore the contradiction of discussing self in such complexity and will aim to acknowledge that, in child and youth care practice, working to become aware of self, 'bettering' your self, and ultimately altering your self is somewhat conflicting. The intention is not to disparage the complex nature of an individual's self, but rather explore the potential hindrance of complicating and restructuring self in an attempt to *use* self rather than *be* self in child and youth care. Thus, the notion of self as a 'sixth sense' will be outlined, theoretical elements of self will be noted, and the embodiment of self will be uniquely and abstractly explored.

The main inquiries throughout this piece will examine the need to truly understand and be aware of self when interacting with children and youth. Is there a way to be subconsciously altered by ecological features and let those alterations manifest as they may within your own self? Do practitioners need to recognize the alterations to their self or can they simply embody and project them? Can individuals potentially just accept the changes reflexively and yet irrevocably still be themselves? Can we as



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individuals disregard intentional attempts to alter self in a way to make this self a more effective tool and, alternatively, just let self organically change us and the way we *are*, not the way we *use* who we are? Moreover, if we can view self through this lens, what would it mean for the relational practice of child and youth care?

## **Self as a Sixth Sense**

A theoretical view that can be ascribed to the ideology behind *being* self rather than *using* self is the contemplation of self as a sixth sense. This notion has been explored in Buddhist beliefs as a higher power of action driven by your subconscious (Waldron, 2010). With specific attention involving the difference between being aware of self rather than using self as a tool, the awareness is subconscious and therefore a means already present within us; we embody it. Although this piece will recognize the preexistence of this idea, it will also attempt to build upon it and apply it to a child and youth centered milieu.

As mentioned, an idea that is to some extent parallel to self as a sixth sense is self-awareness, which seems like a rather simple and relational notion. However, although this practice may be 'easier' to that of intentionally using, altering, and somewhat obfuscating your own self as a tool of practice and relationship building, it is much more operative. The analysis of self within a relational context should be as simple as seeing and talking to the young individual while being self-aware that you are talking to the young person. This is the difference between using self and being aware of ourselves and, although being aware of our use of self is conscious, it is the depth to which exploration and formation of the self should go. If you become as familiar and aware of the self as you are with



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the world you and young people are involved in, then the sixth sense that is you will make deeper connections possible.

Although Buddhist principles mention a 'higher-self', even this inner knowing of purpose or intent is often difficult to describe with words and rather, is more efficiently executed through *being* and perhaps could be exhibited through meaningful child and youth care practice (Waldron, 2010). The premise of this being that you are aware of your higher self, but do not need to consider it since it is simply there and so powerful that over thinking or attempting to *use* your higher self simply isn't possible. Another questionable part of *using* self as a tool is the determination of what is real and what is not and attempting to find, change, and label compartmental aspects of your own self. Thus, if you determine what is real only by your conscious senses (in this case *trying to apply* your own self to practice) consequently, the automatic conscious senses, (simply *being* yourself) can become uncertain as to what is 'real'. The idea here being that, if you become too engrossed with the idea of *using* yourself when it is considered to be a 'sixth sense' than you will be too preoccupied to realize, consider or subconsciously process what information or connection the young individual might be trying to forge with you (Waldron, 2010). Moreover, the body's perception of self-indication, acknowledgement of self and orientation of self is constantly yet subconsciously being processed by our minds and therefore is most effective when managed in this way. This could be referred to as intuition, which is a tool that cannot be reached when *using* your self because anything that is carefully considered is truly the opposite of intuition. When forming a genuine therapeutic relationship or relationship to foster healing, growth or positive change within a young individual, intuition is the key to genuine connection. Their personality, development, and individuality are the elements that should be carefully



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considered and put into your toolbox for later sessions or communications, rather than into your constructed self. Although you are a pivotal part of the relationship, the emphasis should be placed on them and getting to know their true selves. This is when a radically deep connection rather than an operational connection of true and meaningful child and youth care practice can occur.

## **Embodiment of Self**

The embodiment of self should be made apparent within child and youth care practice through quality and sincerity rather than development and effort. If you have to *make* connections meaningful, then it is conflictingly meaningless. These connections should be fostered through genuine connection and effortless use of self. It is crucial to risk making honest errors through being your true self; these errors are genuine and learning moments which should be embraced, rather than studied and applied as tools. If you react to these errors in a meaningful way – through embodiment of your *true* self – the reactions and feelings shining through will illuminate your true self and can attract a similar genuine connection with a young person. Although it is often suggested that without careful consideration and reflection about our use of self, hindrances can occur with relationship building, if ever there was a population to emulate and embody genuine, unapologetic, honest *being*, that population would be children and youth. It is important to trust one's own self and jump in to engage with a young individual rather than lose momentum by stopping to consider how you will 'use' self as a tool – as this can be limiting – and, rather, *be* self through the previously mentioned concept of the sixth sense.



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Self as effortless, unconscious and authentic results in what some would call a true empathetic and spiritual connection. This power and divinity can only be achieved through an honest and genuine connection, which can be thwarted when attempting to apply strategy or tools to a deeply relational practice. A simple yet comprehensive example could be the use of humour. If as an individual you are not humorous and you take life quite seriously, then you cannot use yourself in that way because it is not your true self and thus, evidently an attempt to *use* rather than *be*. Considering this example, a young person will likely be able to sense your attempt at altering your true self as they are rather instinctual and hyper vigilant, especially in the early stages of a therapeutic relationship or relationships that are formed when young people are in care. Thus, if the young person can pick up on this forged, staged interaction there is likely to be a limitation in true, meaningful connection. Alternatively, owning up to a lack of humour or a botched attempt to use humour is more likely to forge a connection than continuing to perpetuate or attempt to *use* humour as a tool. This exhibits the sincerity and authenticity of your true self as a child and youth care practitioner and ultimately will be better received by a young person. Fundamentally you can indeed take in your surroundings, explore literature, and consider your communication and relationships with others, but if it is not a true part of yourself, you cannot simply *become* it. Thus *this* embodiment of self should not be exhibited and cannot be effectively used in the development of a true relationship with a child or youth, as it would be *in use* rather than simply *being*.

## Conclusion

The aforementioned aimed to dive deeply into an exploration of self and examine how simply *being* self rather than attempting to *use* self makes



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connection more transparent, genuine and ultimately effective within the practice of child and youth care. Ward (2010) makes a valid point about self being difficult to find in a postmodern world because there are few fixed entities and there is no absolute truth. However, if we are not trying to 'find' self, then it will not be difficult to locate if we alternatively let ourselves embody self and let it work freely, so that there is no need to reach an absolute certainty. Perhaps this is why we should consider the relational work of child and youth care as 'being in' rather than employing the use of ourselves as 'tools'. Although there is no tangible way of seeing, managing or analyzing your own self, this could be considered as the true divinity and ultimately theoretical framework behind the position of self, as there is no need to be malleable with your own self or alter it to get through to a child or youth; rather, it can be hindering to do so. This is a unique yet applicable take on the topic of self that aims to credit young people with being conceptually innocent, pure, and transparent and therefore, that being genuine and correspondingly transparent is truly the best way to embody your own self without consciously applying self as a tool.

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# Postcard from Leon Fulcher

## *Te Kura o Waikaremoana on New Zealand's North Island*

**K**ia Ora Kotou Katoa and Warm Greetings to everyone, wherever you are in this world! December is when schools in the Southern Hemisphere close for the Summer Holidays. You know, things like Christmas BBQs on the Beach or tramping one of New Zealand's Great Walks over the Summer Break. I know, it is a different world for those of you in the Northern Hemisphere.

One end of year school event that happens where we live is the annual Wairoa District Regional Primary Schools Kapa Haka Festival. Last year I reported on the event hosted by Wairoa School and the handing



**Manuhiri arriving for the Wairoa District Primary Schools Kapa Haka Event**

over of the *mauri* or mantle to *Te Kura o Waikaremoana* to host in 2020.

**Kapa haka** is the term for [Māori](#) performing arts and literally means 'group' (*kapa*) and 'dance' (*haka*). *Kapa haka* provides an avenue for Māori



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and others to express and showcase their heritage and cultural Polynesian identity through song and dance.

This year's event started early, with visitors or *manuhiri* arriving from 7:30

am onwards. *Kura* staff and community volunteers had been working tirelessly to prepare for the hosting of visitors. Volunteer stewards and helpers showed those arriving where to park and get themselves ready for the opening or *powhiri* welcome from the roughly 30 pupils at Waikaremoana School.



**The 2020 Regional Kapa Haka Festival hosted by Te Kura o Waikaremoana**



**The Student Warriors from Waikaremoana formally received the visitors**



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Primary School students from around the Wairoa District had been working out their performances and practising their musical items for weeks. On the day, faces were painted in traditional *moko kauae* styles and traditional attire was distinctive for each school. Larger schools had created *teina* or junior school members and *tuakana*, older students in those schools.

It was pleasing to see how groups we had watched performing last year were continuing to develop Maori cultural knowledge and performance skills. Girls demonstrated their skills with the *poi* - a style of performing art that involves



**Nuhaka School and other Schools brought Junior and Senior Primary Students**

swinging tethered weights through a variety of rhythmical and geometric patterns. Boys used *patu* or carved hand weapons to demonstrate rhythm and wrist dexterity during choreographed dance and music routines in *te reo Maori*! We smiled listening to a *te reo Maori* version of Leonard Cohen's *Halleluiah* and other contemporary songs.

I kept thinking of how events such as these have been happening in my local community primary schools for the past twenty years. This left me

wondering what comparisons might be found that involve commitments to indigenous language and cultural restoration elsewhere in the world?

The Maori notion of *Tuakana-Teina* relationships is also worth noting when one stops to think about sibling relationships, or about senior-junior relations that exist in group care living groups. Generally speaking, first-born children are the *Tuakana* and larger families might have both male and female *Tuakana*.

*Teina* are the younger ones who learn from the older ones but commonly go off in their own direction. This *Kapa Haka* Festival gave special acknowledgement to siblings.



***Nuhaka Teina or Junior School Team commonly found amongst larger schools***



***Nuhaka Tuakana or Senior Team have been with Kapa Haka since starting school***

Travelling 45 minutes into town after the Kapa Haka Festival, I came across members of a Sports Car Club who were touring the East Coast of New Zealand's North Island. They had parked up in front of the Frasertown Pub which is presently closed. They sought ice cream cones instead.

Finally, this week we learned the results of *The New Zealand Bird of the Year* competition, an annual event that has operated for the past decade. Last year, we selected a penguin. The 2020 Bird of the Year is the Kakapo, the owl parrot, is a large, flightless, nocturnal, ground-dwelling and seriously threatened flightless parrot. See

<https://en.wikipedia.org/wiki/Kakapo>. Go Kakapo!



***A touring sports car club on a road trip parked up locally for ice creams school***



***The Kakapo - New Zealand's Bird of the Year is an endangered flightless parrot***

A handwritten signature in black ink that reads "Ilon".



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*Prices in US\$ per monthly issue, per insertion. Full amount payable at first insertion. Deadline: 7 days before month-end*

### Material specifications

All artwork to be sent to [admin@cyc-net.org](mailto:admin@cyc-net.org)

*Files:* Only TIF, PDF and JPG files will be accepted. All images should RGB at 300dpi resolution.

*Fonts:* All fonts should be embedded. We accept no responsibility for incorrect font rendering.

### Sizing information

Finished Size	Layout	Width	Height
Full page	Portrait (5mm bleed)	150mm	200mm
½ page	Portrait	70mm	200mm
	Landscape	150mm	90mm
¼ page	Portrait	70mm	90mm



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