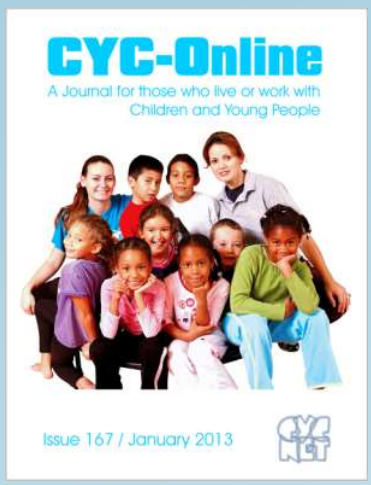
CYC-Online

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



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How things have changed!

I was walking along with a couple of professional friends and we got to talking about how the field is the same or different than it was 'all those years ago' – longer for one of us than for the other two, I might add ☺

A lot of time when I hear people talk about the 'evolution' or 'progress' of our field, I hear comments about how things have not changed or how so little has changed.

Yet, maybe it is the perspective of many years; it seems to me that much has changed. Like, for example:

The Educational Context: I can remember the day the first CYC student came to our program. It was quite revolutionary to think one could actually 'get and education' in this work. This was the only program I knew of at the time. Now we have certificates, diplomas, and degrees – in Child and Youth Care, Psycho-education, Youth Work, Social Care and others. I know it is not everywhere or available for everyone but what a difference.

The Networking Context: I remember going to my first ever CYC conference – it was in British Columbia and a number of us carried sleeping bags to an isolated, and somewhat deserted, inexpensive set of sharedcabins on a lake where we met together from around the province. Next year in June, many of us will be going to the CYC World Conference in St. John's (www.cycworld2013.net) gathering together in a nice location with colleagues and friends from 20 or more different countries. CYC-Net receives over a million distinct visits a year, over 3500 people are members of the CYC-Net discussion group, websites abound, specialized groups meet to discuss their area of the field, and many of us have on-going relationships with people in different countries. The networking (and learning) opportunities are amazing now.

The Theoretical Context: When I first started we all simply followed our instincts and the theoretical orientations of others, like psychology or the behaviourists, etc. Now people talk about a Child and Youth Care, or Social-Pedagogue, or Youth Work approach. Radical Child and Youth Care has entered the mainstream, voices of young people and families are considered important, self has become central, relational practice defines our work and today's orientations build on the work of our ancestors.

The Literary Context: Well, to bring up the well-worn analogy, when I first started my bookshelf of CYC book about 5 books long – now the shelves bend in the middle and we almost have to be selective about what we buy or read. We have a number of well-established journals – in Europe, the UK, Australia, Canada, South Africa and the USA to name but some. And much of the information is im-

mediately available through sources such as CYC-Net which has over 40,000 pages of information available at a mouse click.

The Practice Context: When I first started in this work, there was only one place where CYCs worked and that was in residential care. Now we find CYCs in residential care, schools, communities, hospitals, family homes – well, almost anywhere where young people and families are in need. When you go to a gathering (http://www.garthgoodwin.info/Stand_By_Me2.html for an example) one encounters people from around the World who work in multiple settings.

The Leadership Context: When I first started in this field, there really were no 'leaders' that I could see. Oh, I know there were some (Beedel, Redl, Guindon, for example, come to mind) but I did not know of them. Now we can identify worldwide leaders in our field – past, present and future). There is a sense that this field can go somewhere and there are people actively working to move the field forward! On the research, academic, practice and theoretical fronts, we are moving towards a different future.

Well, maybe that is enough to make my point. I could go on with others like: the Research Context, the Relational Context, etc. But, what I want to say is that, in my experience, the 'field' has evolved incredibly – and maybe we fail to pause and notice it. I know that on the 'professional recognition' front we may not be making the progress some people would prefer – but even there we see evolution. CYCs in the broadest definition now teach in, and lead, academic programs, the Psychoeducateurs of Quebec now have an 'Ordre de Psychoeducateurs', (See here: http://www.ordrepsed.qc.ca/), CYCs have been recognised in South Africa, various states and provinces are moving towards certification.

So here is my suggestion for this next year – how about if we drop the comments about how the field has not changed, and focus on how it has – we have an evolution of which we might be proud, so let's do it.

Or, maybe, I just see it because I am 'of the past'?

Thom



June 25-28, 2013
St. Johns, Newfoundland & Labrador – CANADA
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Connecting at the Crossroads
www.cycworld2013.net

Welcome to

Hans Skott-Myhre

This month we are pleased to welcome Hans Skott-Myhre as a regular columnist for CYC On-Line. You may already know Hans from some of his writings — like Youth Subculture as Creative Force: Creating Spaces for Radical Youth Work. The title itself tells you something about him. Or you may have read something like this when, in talking about the anti-psychiatry movement, Hans said:

". . . the back-ward has not disappeared. . . . It has simply metastasized across the social to the homeless on the streets, the dispossessed of the nation states, the radical excluded of the barrios and favelas, the youth and children disowned by their communities, and the elders left out to die or be forgotten." - from http://www.cyc-net.org/cyc-online/cycol-0507-skott-myhre.html

When I first got to know Hans and his writing, I was cautious of his radical, provocative approach which was sometimes written in the newer language of the field which I was busy resisting at the time :) Now, however, I look forward to all his writings. He often 'wakes me up' and forces me to concentrate and reflect. Like when he says things like:

The conversations I have had with these young men explode time as a continuum that must stretch either forward or back. For me, the conversations move through space and time, taking events from my past and hurling them into the center of my present knowing, like anarchist bombs in the Haymarket of my identity. They move my present into my past, my past into the future and my imagined future into an explosion of possibility. Each conversation challenges what I know, what I have known and what I imagine it is possible to know. - from: http://www.cyc-net.org/cyc-online/cycol-0201-skott-myhre.html)

Profound, personal, provocative, jazz loving, sax playing, author, poet, radical - Hans is all of those - but most important, he is a friend of Child & Youth Care and we are pleased he has decided to join us. You can read more of Hans on CYC-Net and read more about him here: http://www.cyc-net.org/People/people-skott-myhre.html

Thom

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The First Third: Overnights

Kiaras Gharabaghi

Overnight shifts in residential care are often underrated in terms of their substantive contribution to caring for young people. In fact, the hiring criteria for overnight workers typically are much more flexible than those for other positions. In many cases, the core re- quire- ment for this position is the willingness to work during overnights; all other qualifications are seen as a bonus. In many programs, the overnight worker position has its own job description, one that typically features an emphasis on adminis- trative tasks such as checking the client files for completeness, custodial tasks, such as cleaning behind the fridge and the stove and doing the laundry, as well as safety tasks, such as ensuring that the fire alarms are functional and checking on the kids during regular intervals.

The three thirds approach to residential care promotes a very different perspective on overnights, and sees this third of the three thirds as a very important opportunity for enriching the connections throughout the program. Although there is still plenty of time to ensure the house is clean, the files are complete and the fire alarms are functioning properly, the physical environment components of the position are much more focused on the individual and group needs of the young people. To this end, the specific cleaning and household tasks of the overnight worker are focused on mitigating the inconveniences of group living. For example, instead of cleaning behind the stove in the middle of the night, a chore that can be effectively done during the day with the young people assisting, the overnight workers will focus on the bathrooms of the young people, and ensure that any of the dried up toothpaste in the sink is removed so that the young people are not reminded of the less pleasant aspects of group living as soon as they get up. Toilet paper will be available and personal hygiene products are prepared for the morning. Young people who have special requests with respect to shampoo or other products can make those requests to the overnight worker, who will ensure that the requested product is available in the morning (sometimes young people may have to leave a note for

the overnight worker since this worker may come to work after the young people are already asleep).

The overnight worker can also go through any photographs taken recently as part of program activities and frame the particularly good ones either to give to a young person specifically or to mount on the wall if it is relevant to the whole group. Knowing that a particular young person has a job interview the following morning, the overnight worker may ensure that the young person's shirt is washed and ironed so that it is ready to be worn the next morning and the young person can feel confident at least about their attire. Knowing that another of the young people has a math test the following day, the overnight worker may prepare some new pencils, freshly sharpened for the young person to take to school that day. And knowing that it is one of the young people's siblings birthday the following week, the overnight worker may prepare a birthday card to be signed and mailed by the young person the following day. In homes that serve older youth, the overnight worker may prepare some coffee for the young person who needs to get up extra early to go to work the next morning.



An opportunity to care, even though they may be asleep.

All of these examples have in common the attention to what is going on in the lives of the young people at any given time, and taking actions that support the young people in engaging or responding to whatever challenges, opportunities or activities may affect them tomorrow or shortly thereafter. In addition to these person-focused activities, the overnight worker also prepares the home for a feel-good atmosphere in the morning, by for example preparing some fresh-baked goods as the morning approaches. This will ensure that the young people wake to a pleasant scent in the house and also can look forward to a tasty breakfast after they have completed whatever morning routines are required in the program. In order to further support the group of young people, the overnight worker might review the newspapers to make a list of things happening in the community the

coming weekend, and then leaving that list for the young people to use in determining their weekend plans.

With respect to the safety of the home, the overnight worker will contemplate not only the physical safety of the home but also the emotional safety of individual young people or the group as a whole as new dynamics are introduced. For example, if the residence admits a young person of a particular culture or ethnicity, ensuring that pictures or other items in the home provide familiarity and a sense of welcoming to this new resident is an important task. Making some recommendations about culturally appropriate food and other customs to his or her colleague, based on spending a little time researching online, can also contribute to the emotional safety of everyone. And finally, perhaps less focused on the young people and more on the team, the overnight worker might also print out particularly relevant articles (from CYC Net, for example) that speak to current issues or challenges experienced by the team during the other two thirds of the day. If the team is feeling the effects of burnout, there are some wonderful articles on self care right here on CYC Net; the team needs a different way of thinking about physical restraints? Laura Steckley has written extensively about this on CYC Net as well. Had a particularly intense debate about love in residential care at the last team meeting? Why not print out the always interesting observations of Mark Smith, who has written extensively on the role of love in CYC practice generally and in residential care in particular.

These kinds of activities are uniquely suited to the overnight position in residential care, because this position usually has more thinking room and can therefore act more strategically than the day or evening positions. This position is also one of very few professional contexts in which one can gain a perspective on young people that is not tainted by the moment-to-moment stressors of program-imposed interactions, behavioural interventions and 'crowd control' measures.

In addition to thoughtfulness about the environment, the overnight worker can also maintain excellent connections with the young people even if he or she rarely comes into face-to-face contact with them. For example, knowing once again about the young person who has a math test tomorrow, the overnight worker can leave a note saying "good luck on your test". Aware that a young person had a particularly difficult family therapy session the day before, a note saying "I know you had a difficult family session yesterday; hope you are feeling better today" might be helpful. If a young person is new to the program, putting some icing that spells "welcome" on a muffin that can be served for breakfast can go a long way to creating comfort for the new resident. Alternatively, leaving a note for the young person with the new job to go to in the morning that asks "what do you take in your coffee? It will be waiting for you when you wake up" may build confidence and something to look forward to for the young person. These kinds of relatively simple acts are all representative of building connections that don't require much conver-

sation or face-to-face interaction, but that nevertheless speak to the relative isolation experienced by young people in residential group care. Fundamentally, the message to the young people is that no matter what might be happening during the other two thirds of the day, during the overnight third of the day someone is connected to them, is thinking about them, and is looking after their needs that easily are overlooked during the chaotic circumstances of the other two thirds of the day.



A similar connector role can be established in relation to the team. Here the overnight worker can maintain oversight over what is happening for individual team members and remind the rest of the team of opportunities for collegial nurture and caring. For example, the overnight worker can ensure an updated list of significant dates for each team member, such as birthdays, anniversaries, and perhaps even anniversaries of major personal losses. This way, a culture of caring for another can be maintained that transforms the whole environment into one where the specific circumstances of individuals, staff and young people are respected and acknowledged.

None of the suggestions made here are particularly revolutionary or creative; I am quite certain that many overnight workers throughout the world have done some or all of these things from time to time. The point, however, is not only to do these things, but to acknowledge the role of the overnight shift differently than it currently is. This represents fully one-third of the experience of young people living in residential group care, and it happens to be the third where young people have the least control over what happens (because they are asleep), and where for many young people, anxieties and worries are at their most acute. It is therefore crucial to recognize that what is required for the overnight shift is nothing less than excellence in child and youth care practice. This position requires not less but more engagement with the principles of child and youth care practice, and their translation into everyday moments; and in fact, the first third of the three thirds approach to residential care is fundamentally about becoming present, even when some of the obvious ways of being present are less available.

Residential child care: a view from inside the service

Evelyn Daniel *identifies some real differences between residential child care and foster care, making the case that there are important indications for both of these modes of care.*

I am often asked by adults new to our work and who may have just finished a particularly frustrating shift, "Which children can residential child care really help?" Let me make list of those children I think it can help best.

I think it can help young people for whom there has been very **little boundary setting** in terms of the way they have been parented. I am talking about families where there has not been a great deal of structure and these are often those where there has been drug and alcohol abuse.

I believe that young people who have **attachment issues** which have resulted in the making of relationships a painful business do better in the first resort in a residential setting.

Young people who are facing **family difficulties** butwho have strong ties to their biological family do well with us.

Young people with **addictive behaviours** are in my view those we can have the best chance of helping though don't think of the immediate "stereotype of an addictive person when I make this claim. Finally I feel we can help children and young people who have **suffered multiple emotional trauma**. This is the set of young people I think we can best help in residential child care.

There may be alternative forms of care for these young people — including adoption and fostering — for I would always make the proviso that every child's needs should be met after assessing their individual situations. However drawing from my own experience, the groups I have listed generally would need more than one or two carers at home at the same time. If this is not the case in such a young person's placement then I fear they will not be able to last the distance towards the goal of leading a reasonably tolerable adult life. I think the behaviours that the children I have described display their extreme coping mechanisms — mean that they need a group of adults who are there and trained specifically to hold them emotionally and very occasionally to hold them physically and in order to manage their extreme presenting behaviour. Of course for many children and young people foster care is the best of placement, but it is my experience in relation to the young people I have described that, in foster care, if a

carer's home is for instance trashed twice in a short period of time, it is natural that the carer will not be inclined to see it happen for a third time. In one way it is understandable that a foster carer, who finds that the personal items of their own children are stolen or destroyed, may not have the resilience to deal with this – occasionally some do, but my observations over many years suggest this is the exception rather than the rule.

Children with boundary setting difficulties

In terms of helping young people maintain boundaries, it is asking too much of one person — for instance a foster carer — to be consistently there for a child (who as a consequence of their earlier childhood experiences is struggling with boundaries) when the foster carer may well be working through boundary issues with his or her own children. It is a big call to make on a single foster carer or indeed a foster couple. For the foster carer it is a 24/7 job and there can be no doubt that foster parents, dealing with the kind of young persons I described earlier, become tired and exhausted. It's a very demanding job and even if you are a couple there will be times when you have to sleep only to find you will find that a young person who hasn't had regular boundaries doesn't differentiate between two or three o'clock in the night and two or three o'clock in the day.

So how do you cope when you are up with a troubled young person at two or three o'clock in the morning and yet you have to get up to cook the breakfast and get young people to school or out to work in the morning? Well for the children I am describing you need to have a team of people who together make up a sum of resilience which allows them to cope with these difficulties. This is a team of people in which there is always someone, equally capable of looking after the young person, always someone to continue almost seamlessly take up the young person's burden and to carry on afresh. If we cannot show a young person that we can contain them in their worst moments, then their problems will only get worse. If their acting out is managed then young people feel contained.

Children with attachment difficulties

For those young people I have described as having attachment problems there is a paradox in that those responsible for placing such a child in a foster family expect or almost insist that the young person will "attach" to their new carers. I believe this puts undue pressure on someone who has attachment difficulties, and what can be helpful for children in a residential child care environment is that you can can give them the opportunity to make choices about who they feel able to attach to at their own pace, and in the meantime you can give them tools and help them to use those tools which in turn will help them to find making relationships a less anxious and fearful notion. There's the difference. There is not a driving demand as there often is when children are placed in a foster family that because they are in a family they must be a part of that family. This sets up a very difficult emo-

tional situation for everyone to deal with. In residential child care, while the intention is that good attachments are made, the child is under no immediate pressure to attach to an adult.

Strangely enough when a young person attaches to a member of staff they seldom pick the most popular one. It's usually someone who has done something for them that they didn't expect. It is always some little gesture that tells the child this is someone who offers them a privacy which is theirs and theirs alone. It is seldom, if ever, the person that everyone runs to when he or she starts a shift.

Children with addictive problems

Children with addictive problems can be helped in residential child care. When I say addictive problems you may immediately think of drugs or alcohol. I *am* talking about those behaviours, but I am also talking about addictive behaviours in terms of risk-taking behaviours — like going out and stealing cars and other criminal activities. Sometimes I feel young people like this really need the children's home and the group — which is something I will talk about later. I think a children's home can help these young people to regulate their behaviour. They have lost the norms of their wider community and they have taken on the norms of the groups of people for whom these addictive behaviours are norms. They need help to be returned to the kind of helpful social norms which many of them will have known in their past. These norms are more related to a functioning (even if not a perfect) society.

It's difficult to do this in a "two parents, couple of children" type of foster family. Families find it very difficult to deal well with these behaviours. I think in a children's home there is the potential for using the group to regulate a young person's behaviour and I think that works really well.

Some people call the use of the group, "group therapy" but I don't call it that. I actually like to think of it in terms of the values of the group and of the group using their values and that is something that the adults in the residential setting can help to shape and form. The group is a strength of residential child care. The values of the group do influence a young person who has the kind of addictive behaviours I have mentioned. The group allows a young person to consider the way he is operating and to think about the consequences for him. How this works is that if a young person listens to what is going on in the group and accepts its decisions, this helps him, but it is also rewarding to the group and confirms its purpose. This happens during formal group meetings, but also very often during informal group discussions — which though they may not do it consciously —express what we would understand as positive societal values. In this way these values are imposed on the individual by the group. It focuses them on where certain behaviours will get them and makes them think about where they want to go as young adults. The individual begins to see how others in the group have gained their rewards, and not material rewards, but personal internal ones like respect from others that is not gained by threat. What the group does is that it

shows an individual how respect, because it is a healthy self-respect, is a positive thing and not a negative thing.

Children who have suffered emotional trauma

I'd also like to say something about helping young people who have suffered emotional trauma earlier in their childhood. And I'd like to do this by discussing a young person who came to us who had been in a number of foster families and children's homes. Every one of these placements had broken down. Here we had a young person who most recently had been in several children's homes and she had been moved on from them because she had been quite destructive in different ways including assaulting staff and destroying property. She was a really difficult girl for us to deal with. She was very traumatised. From about the age of three her childhood up to the age of 12 had been chaotic and she had been the victim of a multiplicity of abuses. She had been placed in care for a number of reasons, not least her behaviour, yet it seemed to us that time had not been taken to help her deal with the pain of her past. At the age of 12 she had witnessed the violent death of a close relative which was related to drug abuse and this had not in any way been dealt with by her or her previous carers. She had looked for friends but had built up a network of people who were really making matters worse for her. She came to us and in the first six months we tried to help her behave within acceptable norms, and by the time she had decided to try to do that she also expressed her intention not keep up with the group of friends she had made before. How did this happen? Well the adults and the young people who make up our group, our community, in our home, persuaded Lisa to stay in on some evenings and once she had tried this she began to rest. This was not as easy to achieve as it may seem on reading it on your computer screen. This development took place after the group had shown her that they could tolerate and then contain her acting out behaviour without rejecting her. She needed to rest emotionally. This wasn't a conscious thought on her part. The group showed her that people could get something from just being in the house and doing normal things. These were experiences she had never before had in her life: staying indoors, having dinner at the table, washing up the dishes, watching television and having conversations with people about ordinary things. Lisa, at the age of 16-and-a-half, left us about two months ago. Given her history it seemed amazing that she had been with us for 18 months, Moving on carries trepidation, but Lisa left us hopeful and confident about her placement at a project offering accommodation for young adults who are making preparation to set out on their adult lives. Lisa told us her 18 months with us had been the most peaceful months in her entire life her life. For me, resting from the trauma of early life is a big deal for young people of Lisa's age. So few get the chance to do this.

Residential care now: a risk averse project?

I think that in the current economic climate residential child care has a job on its hands to re-define its role. I think residential child care has got off too easily in the past by being quite wishy-washy about itself and making quite unjustifiable claims about being therapeutic this and therapeutic that. What we have to show is that we can plan an environment which is real for the children and young people. What I mean by that is it has to be an environment that helps young people manage setbacks. We work with young people whose childhood has not helped them to develop resilience to setbacks. and our task is not helped by the risk averse nature of so many of the regulations which bind residential care at the moment. We are required to protect children from just about every experience of risk. If we as adults go along with this then we cultivate children who will not be able to cope with the problems thrown up by everyday life.

All the policy and documentation about safeguarding the child is actually loaded towards preventing a child taking a risk because their experience brands them as vulnerable, but I think we've got the balance wrong here. Yes, we have to protect children, but we need to teach them to protect themselves, but you can't do that by taking away from them all the tools they'll need to help them learn to protect themselves. We need to trust and respect children's capabilities more. The adults can't do everything for them but having developed a good relationship with a young person we can begin to give them advice that they can use to protect themselves. I don't mean telling such urban myths such as there is potentially a paedophile lurking behind every garden hedge but simple information like what are the things people do to be aware of what is around them and the straightforward solid evidence-based precautions that everyone takes when they are out and about. One might say for instance, " If you get drunk and end up lying in a shop door there is a significant chance someone may do something that will seriously harm." The idea I'm trying to get over here is that rather than protecting young people from everything, it is more important to teach them to protect themselves. Where we can't teach then the safeguarding process can take over but we cannot protect young people from everything; they have to learn to protect themselves.

I think this kind of teaching is a big role — some might link it with social pedagogy — and it is one which residential child care should take on.

Foster care or residential child care?

The plain answer to this question is that both have their place. Nonetheless it concerns me that these days we are moving increasingly speedily towards the universal use of foster care to solve troubled children's problems without any thought of the consequences. I think this is wrong but I know why it is being done. It is being done for economic reasons. It won't work because human beings are not homogeneous. We should remember that some need this and some need that. For human beings there is no such thing as

one size fits all. The idea that foster care is right for all children in care is wrong. Some children fare better with multiple carers. I know this because I lived in a community of multiple carers when I was young. You can do very well in such a community. Yes your biological family has parental responsibility for you but the community also cares for you when your parents are absent. We need to move back to this kind of caring as a society, but I am talking here specifically of residential child care and it can only do what I am suggesting because, at its best, residential child care brings with it experienced and well-trained group workers who carry with them special knowledge and insight. A proviso here is that this can only be achieved by having properly trained workers and if only we could guarantee a properly trained work force throughout residential care, what energy for good this would achieve! If as a community we then valued the work that these people do then they in turn would do a fantastic job. If I had a family, a mother, a sister, a brother, perhaps even a father that cared for me and with whom I had bonded but with whom I could not for any reason currently live, why would I want another family? I am sure I wouldn't. I might value more someone who could begin to teach those things that my family had missed out, and that I, as a child, am supposed to learn as I grow up.

Parenting and training

Sometimes as adults I think we forget what we are supposed to be doing with parenting. We are supposed to be equipping children with the skills they need to be good adults. What we're doing is looking only at ways of making them happy, without thinking that our role too is to make them good adults. If young people don't get this from their parents then I believe residential child care can step in and do this well, but we need quality workers to achieve this. I'm asked often what I mean by "quality workers." The answer is those who have had a good training and I don't mean the kind of training that is about jumping through all the regulatory hoops; neither do I mean the kind of training that is about learning all the policy and procedures off by heart so that I can watch my back. Though the latter may have some peripheral significance, we need a kind of training which will identify those workers who have relationship-building skills and those with tenacity. Workers who do not have these skills tend not to last. Equally NVQ does not work. It does not train workers to deal with the situations they face in what is a highly skilled and complex job. If we want to appoint highly skilled workers we need to raise the bar not only in skill training but also in the remuneration of residential child care workers. We struggle to attract people who may have the potential and some desire to do this work. Its poor pay and modest training requirements make it difficult for an adult who, as well as wishing to do our work at a high level, also wants to be able to afford bringing up a family of his or her own.

What we end up with are poorly recompensed, poorly trained members of a workforce which is understandably failing

to deal with complex issues like loss, separation and troubled attachments. Social workers criticise residential workers when things go wrong but they have been required to understand these things at degree level while residential child care workers deal with them at NVQ level.

By educating them to a higher level I don't mean that residential child care workers should come out all the same from some higher educational sausage machine. If you like they can be quiet, they can be noisy, they can be bossy boots and they can be non-assertive.

Underestimating children

Children need to be able to deal with different kinds of adults. We do underestimate children's capacity to do this. In our desire to be uniformly regulatory we have tried to block these channels of experience and in doing so we have done children a disservice. The fact that we have more mental health issues with our young people who have been in care is not surprising. We have not taught them how to cope. When I was young and I cut or grazed my knee I could run home and someone in the family would dress my wound and comfort me. When this happens to children in care there will be a hospital visit and the child will be checked out to make sure that nobody has done something to him. So what would normally be seen as a normal childhood experience now becomes a reason for checking if the child has in some way been abused. How can a child feel secure in such circumstances? It is a travesty. For the child or young person in care it is as if we, as representatives of society, have the prerogative to tell you the child the value and the meaning of your experiences. It is as if we are saying we do not trust you to manage your life. We will dictate to you, which is the best way for you to develop. In effect we as workers are saying we do not trust you to lead your lives.

The defensive nature of residential child care

I believe this imperative not to trust children is related to how defensive we as residential child care workers have become in our work. We must not allow you the child choice because we are fearful for what it might mean for us. Equally we cannot express our healthy love towards you, or even give you a hug for fear that you or someone else will interpret it as a form of abuse. The irony is that we as adults have created a culture in which children are encouraged not to trust adults. Worst of all adults don't trust other adults to look after children even within families. When we can't even take a photograph of our own children while they are engaged in a school activity what does that says about us as a community?

Developments like this — not being able to sit around as a family to look at photographs of children playing or performing at school photographs — each in their small but invidious ways work against the family as a unit and indeed against the group in a children's home. Children who are admitted to children's homes so often have had no special family moments. They haven't eaten together in their families and they haven't even watched television to-

gether. When we try to create or re-create this experience it can be strange for them.

The future of residential childcare: does Ofsted* have a place in it?

These are developments that make me believe we will need more children's homes in the future but I fear that at the rate they are closing, certainly in the private sector as a consequence of the trend toward the fostering panacea, there may not be sufficient resources left on which to effectively blow our own trumpet.

Perhaps we could call for legislation to address this, not that I think there are any politicians who are interested in residential care just now, but I don't think legislation ever really helps. Legislation reacts to incidents. It is seldom shows foresight. For instance legislation following the baby P case was intent really on covering all the loopholes in previous legislation and this results in defensive practice in our field as well as in the social work and social care fields.

I think the former National Centre for Excellence in Residential Child Care offered a good counterpoint to the defensive trends in our work by providing evidence that looking after children in groups could be what it should be: at once an intimate and educative project. The Centre's closure was a real loss for residential child care because while it was there it gave us the sense of having our own professional body. When it closed it felt as if we were being de-valued as a profession. The Centre, it seemed to me, was a symbol of a national recognition of the positive nature of the residential child care sector.

Now what organizations do we have which could in any way be described as standing up for us? I suppose I should mention Ofsted*, our national inspection body. I'm afraid I have a problem with Ofsted. I think that Ofsted is not quite sure yet whether it is fish or fowl. It continually changes the criteria for the way it inspects.

Of course our problems are related to limited finances and in the current climate this is an understandable concern but care managers are finding that Ofsted become concerned only about the safeguarding issues rather than finding out about how well a child is doing and how happy he or she is in their residential child care placement or considering if the placement is meeting the needs of the child in terms of emotional development. An inspector should be looking at how comfortable the child feels in the placement and that the care of the child in the home is effective. I really do have a problem with the way we as residential workers are pulled up in a very pedantic way about not having recorded something and we are required to record some very esoteric things. There is so much written recording to be done that it does get in the way of the primary task. The galling thing for us as residential child care workers is that nobody actually reads many of these records. None of these records actually enhances the child's experience of care. I believe we need to record the things that matter. There's got to be a way of recording happiness. We have no way of knowing from the records we have to keep about how a child is pro-

gressing towards being a socially aware and reasonably content human being. Instead we do record Regulation 42 which asks us to record how many times a young person has met with his social worker and what meetings they've been to. There is a whole raft of detail to record that has to do with the role of the social worker that is really not ours.

Ofsted also places undue pressure on us in other ways. They want us to structure keywork meetings in a particular and formal way but I know as a keyworker that the best meetings are in less formal settings. For instance I have a young man who at the moment who can't sit still long enough to have a formal meeting. Instead we run together down to the park and we walk around and have very helpful — that is helpful for both of us — keywork meetings. I then have to go back and record it and that takes me a long time because he's been so relaxed and so he has had so much more to say. Now recording that kind of meeting is worth the effort. Now this boy would never sit down and have the kind of meeting Ofsted demand and when they see my record of the meeting I have described, Ofsted deny its significance. They say it doesn't count because it wasn't a "properly planned session."

These are issues that need to be addressed and I don't believe Ofsted have the commitment to do it; they spend their time constantly changing their *modus operandi*.

The private sector

I work and manage residential child care resources in the private sector and the latter has its disadvantages, particularly now that the whole country is in a difficult economic position. The problem for the private sector is that it is predicated upon the need to make a profit and when profits are threatened then the private sector has to squeeze its services. This may influence the type of food we buy or whether we have to alter some other way that we provide a service in order for it to cost less. Now what may be lost in this is a thing that a child particularly enjoys or it may even mean taking away things which hold good memories for the child. As private providers we have to squeeze services because otherwise they are not cost effective for us.

In addition to this, what we can provide can be influenced by local authorities making cuts that we hadn't planned for. So the holiday experience you were going to provide has to be adjusted to become a much less interesting experience than the one you had planned. When new staff are appointed they are less experienced and less well trained because the salary budget has to be cut.

I think some local authorities have become aware that they have gone too far in terms of placing a financial squeeze on private sector residential child care. So many homes have closed down but local authorities have not yet found a way to re-approach the residential sector. At the moment there are more referrals coming into the private sector but the financial situation strictly limits the amount local authorities are prepared to pay for residential child care.

What that means is that residential child care has become a place of last resort – really a last resort – to the extent that a request for funding of residential placement for a child has to go to director level in the local authority before a decision can be made.

The advantage of the private sector is that when the economy is going well it is able to provide services quickly without having huge bureaucratic services to slow down its capacity to plan and create new services quickly *and at the time they are needed*. Equally when the going was good children's homes could afford to seek out specialist personnel like child therapists to offer staff support in particular cases. This does not happen any more. No private children's home can afford that expenditure.

Staff training has suffered. Very little is now done and even the statutory training has suffered. Instead of happening once every three months it now occurs only every six months. There are quality training providers whose fees we can no longer afford. Training is no longer of the quality we would like. We are providing just enough training to allow us to tick the boxes we are required to tick.

Conclusion

Residential child care will survive because it is actually needed. They can't do without residential child care. I am sure it will be restructured and I think there will be changes in the kind of children and young people who will come into residential child care. I don't mean necessarily that there will be a move towards dealing with what is so often euphemistically called "the more difficult end." I think residential child care will be able to demonstrate that it has something to offer to less vulnerable children and young people. I don't think our sector of child care will sink but I think it will shrink and will become more specialized in nature. We will be able to offer certain young people a kind of care which is much more in line with what they need rather than what has become the panacea — foster care.

Residential child care has to become more professional and get itself more respected. It can do it through better training which can only lead to having more insightful and effective staff serving children and young people.

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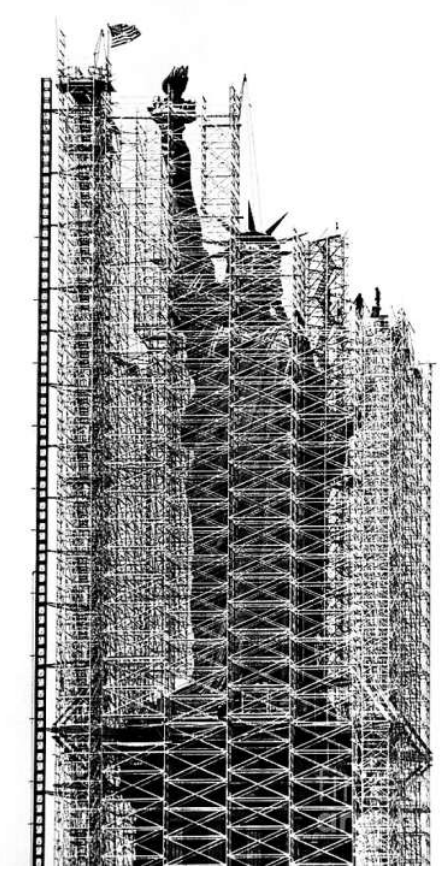
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Routines, Limits and Anchor Points

Laura Steckley

From the very start of my work in residential treatment, the importance of structure was emphasised. By 'structure' I mean the norms, expectations, routines and limits on behaviour that were in place in the treatment centre. Here in Scotland, it is sometimes referred to, loosely, as 'boundaries'. Getting this structure right has been a consistent preoccupation in all of the care or treatment environments I have worked, and at times has become a bit of a holy grail. In our quest to establish and maintain sometimes elaborate systems of rewards and consequences, we were susceptible to losing sight of the primary aim of providing developmentally enhancing environments and relationships.

It's tricky business. A lack of structure, or one that is unpredictable because it is used or discarded at the convenience of adults, will not promote the sense of safety that young people need. Conversely, structure that is rigidly implemented or held in higher priority than young people's needs will, at best, constrain development – of the young people and of the staff. Getting it right takes considerable attention and effort – not just on what to do and how to do it, but on developing a shared understanding of the role of structure in serving the overall aims in the work with the young people.



Support scaffolding needed for work on the Statue of Liberty

Considerable time and effort is also needed to manage individuals' (staff and young people's) own related baggage and how this plays out in wider group dynamics. Depending on formative experiences and current orientations, some will find the same structure too loose that others find too constricting. Maintaining a structure that

meets the needs of each individual young person while also facilitating group living is challenging enough. Teasing out and effectively addressing individual adults' interests and organisational interests while keeping the best interests of the young people paramount is even more so. It's no wonder it's so easy to get wrong.

So when I recently came across a book that addresses, in detail, elements of this structure in residential child care, I was particularly interested. It certainly isn't the first book to do so, and it draws from the work of many previous contributors in the field. The book is called *Therapeutic Residential Child Care for Children and Young People: An Attachment and Trauma-Informed Model for Practice* and is written by Susan Barton, Rudy Gonzalez and Patrick Tomlinson (2012). It describes the work of the Lighthouse Foundation, an organisation in Victoria, Australia which provides therapeutic residential care to homeless young people aged fifteen to twenty two years old. The book addresses much more than structure, and I would recommend it on all counts. However, I thought I would dedicate the rest of this month's column to its content on routines, limits and anchor points which is based on the seminal work of John Brown, the founder of the Brownsdale Community in Canada. I think it may be helpful in thinking about how we attempt to provide structure in the residential environment.

Daily routines create a sense of rhythm and predictability. All children and young people need them, but they are especially important for children and young people from chaotic backgrounds. These routines must be needs-meeting rather than just for their own sake. I think Henry Maier makes the most compelling argument in this regard:

> The capacity to predict is a measure of knowing and an essential ingredient of effective learning. In other words, to know which things will happen in the immediate future lends a sense of order and power. It becomes a major breakthrough for a youngster to discover that she/he can predict the outcome of her/his action… Child care activities must therefore offer continuous work with children in such a way that they truly experience and cherish the meaning of their own activities (Maier, 1979, p. 167).

In addition, Barton, Gonzalez and Tomlinson rightly highlight the importance of routine and predictability in reducing anxiety, thus making room for the development of attachments.

Limits are described as the non-negotiable rules of the home or unit, normally related to safety. The authors stress that limits must be consistent and easy to understand. Perhaps more importantly, they offer some useful content on empathic limit setting. Most of us don't really relish having a limit set on our behaviour, but for those who have experienced severe disapproval, punishment or abuse, often in an unpredictable manner, it can be extremely threatening. Practitioners are encouraged to "convey an understanding

of the child's feelings to show you are on his side" (p. 151).

I think this point extremely important and I want to expand on it a little bit. In order to convey this understanding of the child's feelings, the practitioner must be well attuned to the child and genuinely on his side. This requires skill when things are going well. It is extremely difficult when setting a limit and dealing with the frequent fallout that can sometimes be nuclear. Managing our own counter- aggression and other triggered feelings, as well as the absorbed, uncontainable feelings of the child, so that we can stay attuned, on side, but also still clear and firm in the setting of the limit is a very tall order indeed. Yet, it is one we must rise to from early on in our development as CYC practitioners and often on a daily basis. I wonder what might happen if we spent as much effort creating routines aimed at helping adults address this challenge as we do on the systems of rewards and consequence designed to support the limits we set on kids' behaviour.



Anchor points refer to the often mundane expectations in the home. The authors offer things like hand washing before meals or not tipping back on the chairs during meals as examples. This reminded me of frequently appearing CYC Net discussion thread that debates whether hats should be allowed at the meal table. Reconsidering these seemingly trivial but nonetheless energy consuming expectations as anchor points shifts the discussion back to the needs of the child:

> The precise nature of these [expectations] is not especially important. The important thing is that each home has some anchor points that are understood by everyone. The benefits of anchor points are that they provide a regular opportunity to remind everyone in the home of expectations. They also provide an effective way of gauging children's moods. Certainly in work with children who can be challenging, the first thing to be tested is often the anchor point. So, a little battle takes place about whether the child is going to wash her hands. If this becomes difficult then it is often an indication that there is an underlying problem for the child that needs addressing. The effective use of anchor points allows difficult feelings to be picked

> up and worked with before they escalate to a child breaking a limit. Sometimes children need their feelings to be noticed and can only do this by being a little challenging. Without everyday anchor points, they are more likely to become extreme in their behaviour as a way of seeking attention (p. 151).

Thinking about expectations in terms of anchor points, as opposed to rules that must consistently be adhered to – or conversely, as unnecessary, banal constraints that are more about our need to control – offers a more sophisticated way to approach the development of structure. Being clear within ourselves, with each other and with the young people about what is negotiable, what is non-negotiable and why, is a key component in getting the balance right between too loose and too rigid. Distinguishing between anchor points and limits can aid this clarity. Considering anchor points as a sort of litmus test can also help to keep the needs of the young person (and all of the underlying meanings, feelings, issues for everyone involved) in focus.

Finally, I think it's interesting to note that consequences do not appear in this discussion of routines, limits and anchor points. The whole chapter, entitled *The Holding Environment and Daily Routines*, has little, if anything, to say about them. I have come across some staff who cannot envisage maintaining an anchor point, let alone setting a limit, without recourse to inflicting a consequence or at least the threat of one. Punishment was already a bad word when I first entered practice, yet there were times when 'consequence' was merely a politically correct term for what was essentially a punishment. I suspect the elaborate systems of rewards and consequences were really our clumsy efforts to avoid this – though it was probably not particularly successful. Looking back, I think we sometimes just created punitive systems in an effort not to personally punish.

So does this mean that we abandon any and all deliberate use of consequences when trying to establish a therapeutic structure in residential child care? I think it's an interesting question and it will be the subject of a future column.

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Beautiful Music: Bad Notes and All

Madora McKenzie Kibbe, writing in the *Christian Science Monitor*

He'd only had six lessons. He's only six years old. Still, our son was committed to taking part in his first piano recital. He exudes that "can do" attitude so often found in kindergartners. Never mind that everyone else involved in the late-spring concert had been playing since September, at least. But his teacher seemed to feel our son was up to the task, and apparently so did he.

He chose two pieces. He played them well, as well as one can play *Old MacDonald,* described on the programme as "Traditional," and *Mary Had a Little Lamb,* described as "Folk Song." Apparently, no one wants to take credit, or blame, for either of these fine selections. And when I say he plays them well, what I mean is he plays all the right notes and in the right order, too: there's not much to interpret. There is no sub text at this stage of the game.

Since it was his first ever recital, I thought I'd better sit in on the dress rehearsal the day before, to get a feel for what was in store. I was the only adult present other than the piano teacher, who had to be there. The other parents dropped and ran. I was there as an advance man to scout out the doings for the rest of the family, to let them know just how bad the whole event was going to be. "Bad" is such a relative term. In some contexts, "bad" can even mean "good." Alas, this was not that context. This was children ages 6 through who knows what; I'm not a good judge after age 10. Maybe they were all young and some were just very tall.

Remember Prof. Harold Hill's "think system" in the movie *The Music Man?* This was somewhat better than that. What these kids lacked in artistry they made up for in brevity. And they all knew how to bow very well. But perverse parent that I am, the worse it got, the more I liked it.

For one thing, my son did just fine, thanks, as did most of the kids. But it soon became apparent that this recital was not about the mastery of music. It

was about doing something as well as you could, in front of your family and a room full of friendly strangers. It was a mi-

crocosm of Life, and how to succeed in it: Do your best, be brief, then make room for the next guy. Share the limelight. Don't panic.

There was some bad violin. There always is. There was an unfortunate cello selection, *Beethoven's Minuet in G,* the very piece that is mangled in *The Music Man*. I kept wanting to point at my forehead and say, "Think! Think!" as the young girl valiantly struggled against the instrument. In the end, the girl won the match - she was unbowed. I wish I could say the same for the cello.

By rehearsal's end, I knew we'd all get through the recital in one piece. I let the rest of the family know about my guarded optimism.

The next day was spent pretending that whatever was happening at 5:30 p.m. was no big deal. We left our house at 5: 15. We walked across the street to the concert hall. (We live across the way from the college where our son takes piano lessons.) We probably could have just opened all our windows and let him play at home. But that wouldn't have been the same as surviving the recital.

My husband brought along a camera with a flash attachment. He sat poised with the camera in front of his face the entire time our son played. He never took one picture until the very end. He caught the upside of our son's final bow. I knew why he didn't snap a shot. He was afraid the flash would startle our son out of his concentration and *Old MacDonald* would turn into *Kitten on the Keys,* or *Mary Had a Little Lamb* into *Slaughter on 10th Avenue*. Mayhem would ensue, tears would flow, and for what? A parental paparazzi? My husband made the right choice. After all, it's not like we'd need a Polaroid to refresh our memories. Before there were cameras, people just remembered stuff. It was a lot more economical that way, and required less storage space.

The rest of the recital was mostly short and mainly sweet. Some of the kids were quite good. One girl was quite bad, but gratefully she didn't know it. All of them were troupers who showed grace under pressure and sensitivity, too. You can't play or hear Beethoven, Bach, or Mozart - however rudimentary the execution or reception - without being humbled by the presence of such soul. And best of all, no one tripped, slipped, or skipped. A collective sigh of relief was breathed at the end of the afternoon.

God bless the parents for paying for the lessons, for showing up and listening, with the least of expectations, attentively to all. God bless the teachers for patiently instructing tiny fingers into finders of notes, chords, and (occasionally) music.

And God bless the children for dressing neatly but not gaudily, for having good manners, and for playing, well, as well as can be expected. I'm hopeful that the musical path our son is on will eventually lead to our basement and long rehearsals with a high-school rock band. I don't want to push him, but I can dream, can't I?



A Practice Vignette

One warm afternoon, I was to work with a small group of four youngsters on an outdoor activity. We chose to play two-a-side volleyball in the hour allocated, with me as the referee.



The first ten minutes went well enough, but soon I could see Colin behaving aggressively toward Trevor, purposely targeting him with very hard throws, and then passing provocative comments. This tension changed the whole atmosphere of the game, and I could see the other two boys becoming more tentative in their play. Even though Trevor was physically smaller than Colin, I knew that this would soon end in a fight — which would be the end of my group, which the kids needed more than a battle at this stage.

Before it went any further, I stepped in and said "Okay, let's rotate positions for a while," and I tossed the referee's whistle to Colin. "You referee the game for a while, and I'll play in your place — and then we'll rotate again." Colin was as happy as can be in this sudden new role as controller of the game. The others were also excited by the plan that they would get a chance as referee. Trevor was obviously relieved to be off the hook and able to 'save face' in this way, and returned his attention to the game with new enthusiasm.

On the inter-personal level we had reduced the conflict potential, along with all of the anxiety and unpleasantness associated with this. And on the physical level we managed to keep the game going at a good pace, so the goals of this activity group were kept alive.

More interesting, I realised that I had relinquished my own position of authority and power as the game referee (as therefore as the group leader) and all of us found our new roles and relationships stimulating.

In my studies I had been learning that conflict resolution was a challenging skill, but that conflict avoidance was a better (and easier) skill to develop in work with youth.

I could have separated Colin and Trevor, or sent Colin back to his room, or even stopped the game to discuss the issue. Far better, though, was to keep the activity going for the benefit of all four boys.

We had planned a special tea for after the game. It was good to arrive at this point with the shared exhaustion of an hour's fast and furious exercise, and the fun of doing something together. We had all earned our tea.

– Byron Steele

Beyond Development: Towards a critical Child and Youth Care

Hans Skott-Myhre

It will come as no surprise to anyone who knows my work that I am going to begin my inaugural column here at CYC-net with a somewhat radical proposal. It is something of a given that the field of child and youth care is founded on the theories and principles of developmental psychology. In fact, a good deal of writing in the field cites foundational theorists in attachment theory, child development, moral development and more recently the neuro-psychology of development. For example, the ACYCP competencies for Child and Youth Care include a section on foundational knowledge that states: "The professional practitioner is well versed in current research and theory in human development with an emphasis on a developmental-ecological perspective." Borrowing heavily from the field of psychology, the competencies tell us that a child and youth care worker should have a working knowledge of, "Life Span Human Development Child/Adolescent Development (as appropriate for the arena of practice), including domains of Cognitive Development Social-emotional Development Physiological Development Psycho-sexual Development Spiritual Development, Exceptionality in Development including at-risk and special needs circumstances such as trauma, child abuse/neglect, developmental psychopathology, and developmental disorders, [and] Family Development, Systems and Dynamics."

Suffice it to say then, that child and youth care workers are expected to be well versed in the field of developmental psychology. My proposal is premised on the idea that this induction into the dominant theories and practices of developmental psychology is both ill advised and profoundly problematic. This is not to say that psychology, as a field, might not have much to offer. Feminist, critical, humanistic, Marxist, transpersonal psychologies, among others, offers intriguing and innovative ways of thinking about who we are and what our relationship is to others. Developmental psychology, on the other hand like most mainstream psychology, offers considerably less in these arenas and much more in the arena of constructing children and youth as "other" through the imposition of normative structures and hierarchies premised on age.

When I reflect on the competencies for CYC as premised in developmental psychology, I find myself struggling to recognize my own practice. I am not a

psychologist, although I teach and have taught in psychology departments, trained psychologists and presented at psychology conferences. I have an M.A. in counseling psychology and for much of my adult life I identified as a psycho-therapist. Essentially and at heart though, I am a youth worker. It was in that role that I spent about a quarter of a century working with homeless young people. In engaging that work, I encountered and was trained in the various psycho-therapeutic approaches and fads of my time and learned the methods and theories of psychology. Perhaps because my initiation into the world of this kind of thinking and work occurred at the edges of the deinstitutionalization of the asylums, my mentors imbued me with a fundamental caution about the power of psychology, psychiatry and psychotherapy to entrap and ensnare those it proposes to help.

As someone who has managed to elude precisely such capture throughout my life, I took this caution to heart. Throughout my work in mental hospitals, prisons, on the street and in shelters, I found myself in the role of an escapee; that is someone who finds themselves, by chance on the other side of the desk. For an escapee or what Basaglia calls class traitors there is no sense of division, hierarchical or otherwise from themselves and those they encounter in their work. For an escapee, the work is always comprised of finding ways to give the keys of institutions to the inmates, to subvert the mechanisms of power and hierarchy and to join in common struggle. Of course, this often pitted me against my colleagues and employers and resulted in a rather unstable employment pattern.

Over the 25 years or so of my work in the field, the force of psychology and psychiatry as a dominant discourse and modes of practice has escalated until it has encompassed all aspects of our work. Imbedded in such a system of thought and practice, I was able to see its effects with some degree of clarity. Not surprisingly, the escalation of psychology coincided with a turning away from politically driven and informed modes of practice. The role and function of psychology invaded all other modes of practice until almost everyone was versed in cognitive behaviorism, the importance of healthy development, attachment, attention deficit disorder and so on from the local school teacher, to the parent, the social worker, the community organizer, child, youth and elder care workers, politicians and of course the media. It is noteworthy that this escalation occurred, not coincidentally with notable developments in capitalism's regime of domination and control.

It was Foucault who noted that every instance of domination is met with instantaneous corresponding resistance. Indeed, both the escalation of capitalism and its deployment of social control through, what Donzelot has called, an ever expanding psy-network have met with struggle and resistance. Through this struggle and resistance new forms of psychology and psychiatry have come into being over the past forty years that CYC might do well to investigate as alternatives to dominant forms of psychology under capitalism. The anti-psychiatry movement, critical disabil-

ity activism, critical and Marxist psychology, feminist psychology, all have much to contribute to our work.

In that regard then, what does a critical non-normative psychology have to offer us in CYC? I would argue it offers a superb exemplar of how postmodern global capitalism functions in its ever-expanding intrusion into the very core of our libinal force. In studying the mechanisms through which psychology has inserted itself into the very consciousness of subjects across the globe and the ways in which this process has opened the door for capitalism to recode our social institutions and desires into modes of control and appropriation, we might begin to trace out some of the snares and traps laid for us, embedded in our very consciousness.

Foucault, once noted that the first revolutionary act was to investigate and eradicate the habits and beliefs of one's own age in one's self. Perhaps, like the accounts we hear of revolutionary struggle that inspire and inform our political praxis, child and youth care theorists and practitioners could begin to offer accounts of struggle against the ways each of us has been inducted into the psy-complex. In these accounts perhaps we could not simply critique psychology, as though from the outside, but engage in a collective struggle against its pernicious effects at the local and global levels through engagement with those mutually ensnared. Such a project would require a significant betrayal of the class trust invested in us as what Basaglia termed technicians of practical knowledge. Indeed, before the field of child and youth care could seriously engage with any form of new collective action, there would need to be a turning away from the affective affiliation with the capacity to separate oneself from the other through clinical observation, diagnosis and intervention.

To do this, an abandonment of the capacity to analyze from the outside is absolutely necessary. There would need to be a repudiation of the individual as a site of pathological dysfunction and reorientation away from particularization of individual adaptation to the psychotic system that is capitalism. This would take a different form of investment, a very personal investigation into what is at stake for each of us. Undoing our cherished beliefs and practices not just of our professional identity but of our own psychologically constituted selves will not be easy.

I would argue that engaging a revolutionary struggle against dominant modes of psychology from the inside may offer templates and possible new revolutionary forms of struggle that could ally child and youth care workers with others struggling against the domination of global capitalism. I should note that the obverse is also the case—our struggle to free ourselves from ourselves in order to engage with others can benefit immensely from the historical and contemporary struggles of revolutionaries, feminists, post-colonial and aboriginal activists, critical disability advocates, LGBTQ activists, youth subcultures, Marxists, and communists. Each of these offers histories of struggle founded in the contested space of a social constructed and disciplined subjectivities.

So what can we offer as child and youth care theorists and practitioners trained into dominant psychological theo-

ries and practices? We can explicate the technologies of psychological appropriation and intrusion because we are the technicians. We can explicate the modes psychologization and psychic invasion because we are the intruders. We can engage in collective and personal struggles against our disciplinary identities and our own attachment to a psychologically constructed self. We can cautiously join with others in struggle contingent on our ability to refuse our own tendency towards psychologization of the political process. We can seek common ground with new collective movements in producing a new world and new subject to come. To do that we can offer our very selves in the search for new forms of subjectivity, in the collectivity of our idiosyncratic concerns and historical circumstances and our common projects and purposes.

LETTER

The DSM issue

I was very troubled by another "rant" in the December 2012 *CYC-Online*. Cedrick's tirade about the DSM was, I believe, very unfortunate for two reasons. First, the way he went on about it contributes greatly, I believe, to the reasons we are still having trouble being honored as a profession! While I am not crazy about the DSM and the ways it is used, it is not all poppycock, and whether we like it or not it has many critical uses in mental health and child abuse. It opens the doors to services for our kids.

Further, the manner in which he addressed why our kids act as they do completely disregards the fact that real, diagnosable, harm has been done to them, and to their brains. And yes, there is very good research to back up some of the very real mental health issues that result from pre-natal exposure to substance abuse, neglect, and abuse. There is very good evidence for PTSD in many of our young people. And yes, as with any other disorders of our bodies, medicine sometimes is very helpful in relieving the distress. So, the content was one of the factors that I thought was very unfortunate.

The other troublesome thing for me was the placement – right in the beginning of the edition. Much later on in the Issue, toward the back, Leon Fulcher, in a very small section, asserts that "DSM-IV diagnostic categories are important", but the placement and size of the text does not present a good "counter" to the other very simplistic presentation.

Lorraine Fox

For Whom the Bell Tolls



Cedrick of Toxteth

When Eddie Turnbull told me to "fuck off and die," my first inclination was to grab him by the ears and turn his baseball cap the right way round, using his neck as the pivot. But, being a self-aware Child and Youth Care practitioner, I quickly realized that my desire to punish came from the sense of powerlessness I experienced in early childhood. As a professional, I understood how his hostility toward me was actually a projection drawn from his unexpressed anger toward his father. So, thanks to my knowledge and training, I was able to avoid jumping straight into the old counter-transference trap (Bush, 2001).

Frustrated by his inability to draw me into his pathological relational system, Eddie let fly with a stream of well-worn obscenities and stormed off to his room, slamming the door for good measure. This behavior was clearly symptomatic of his A.D. (Attachment Disorder) that had given rise to his A.D.D. (Attention Deficit Disorder) and, subsequently, his C.D.D. (Chronic Defiance Disorder). For Eddie, this episode was just another crisis; for me it was an opportunity for intervention.

Stepping deftly out of the energetic flow (an ancient Buddhist technique) I took a breath and calmly considered my options. An immediate confrontation would probably set off a power struggle in which his negative behavior would be reinforced by my negative attention, and this was the pattern that needed to be changed. Taking a behavioral stance, the most appropriate decision would be to withhold reinforcement and wait for a more pro-social response. But such disturbed behavior usually stems from more deeply-rooted problems and the most obvious behavioral solutions are not always the most effective in the long run. Eddie was very adept at setting up snot-fights and each confrontation served to reaffirm a negative self-image developed over years of rejection and abandonment. Cognitively, this was all held together by Eddie's pervasive belief that he was unlovable and that nobody would be there for him when the chips were down. So here was an opportunity to let him know that I would not abandon him while helping him

to reframe his self-defeating beliefs. But I would need to choose my moment carefully – it was all about timing.

As I waited patiently for the window of opportunity, Brenda Parkinson emerged from her room at the end of the hallway and shuffled toward me. She was obviously distressed and crying. As she approached our contact boundary, her whimpers turned into sobs – huge gulping, tear-pumping sobs. I noticed she'd been picking at her scabs again and a trickle of fresh blood ran down her forearm. My savior syndrome was immediately triggered but, once again, my self-awareness came to the fore. I am a middle child and my compulsive need to assuage the distress of others was a matter of survival in my family. Stepping out of the flow again (such a good technique) my mind was able to focus on Brenda's treatment plan. "I see you've been picking again," I said, assuming the prescribed neutral stance. "I want you to wash the wound and then apply the peroxide as usual."

Her sobbing stopped immediately. "You don't give a shit about me," she said, wiping her tears with her arm and smearing the blood across her cheek.

"We'll talk later," I told her.

"Go talk to your ass," she suggested unkindly and shuffled off in the direction of the bathroom. But my mind had already returned to the problem of Eddie – it was all about differential treatment.

As luck would have it, this untimely little episode with Brenda completely scuttled my timely intervention with Eddie. He must have heard our discussion and, realizing that my attention had been stolen, proceeded to launch a violent assault upon his immediate surroundings. Intervention was now more about de-escalation and I was moving swiftly in the direction of his room when the damned bell went off. Someone was leaving by the emergency exit. It could only have been Billy Maccleswaith who had sworn on his mother's chainsaw that he would take off before their next family therapy session. The thought of 'Bronco' Billy riding rough-shod around the local community caused me to do a quick about-turn, at which point I charged straight into the bedraggled Brenda who had chosen this precise moment to shuffle out of the bathroom with her bottle of hydrogen peroxide.

I could certainly appreciate that she was surprised by this sudden breach of etiquette but her reaction was worthy of an Oscar. First she hurled herself against the wall with a scream that completely overpowered the infernal bell. Then, after a dramatic pause, she slid slowly to the floor with a pitiful moan and proceeded to empty the entire contents of the bottle all over the new hallway carpet. At this point Jim Holden, our Executive Director made his entry, stage left.

As an administrator, Jim was big on accountability and, with a body slumped on the floor, a maniac destroying a room at the end of the hallway, our new carpet slowly changing colour and a bell from Hell clanging in the background, there was much to account for.

Being self-aware I realized that I was slipping out of presence and entering the state known as "fragmentation" (Cline, 1960) – that terrifying melt-down of the self that completely obliterates all sense of

worthiness and competence. My only option was to bracket off all that was happening around me (a useful cognitive technique) and access my deepest inner resources.

In this altered state of consciousness, Eddie, Brenda and Billy were systematically erased (temporarily of course) and even Jim, who was screaming something about the cost of carpets, was rendered silent and impotent as I struggled to reassemble the pieces of my fractured self.

Somewhere on the periphery of my awareness, I did get a glimpse of Billy Maccleswaith leaving the TV room to join the party but it was irrelevant information.

During the subsequent impromptu supervision session in the staff office, Jim was able to deal with his frustrations through a moderately contained catharsis and I could certainly appreciate where he was coming from. Jim came from a devoutly Catholic family in which authority was a primary theme and his obsession with the hallway carpet clearly revealed his parent's preoccupation with materialistic values. During his review of the current circumstances I detected a linear and dichotomized cognitive style characteristic of a failure to achieve "object constancy" at the critical developmental stage. His attitude toward me clearly lacked accurate empathy and non-conditional positive regard and I could only assume that Jim had problems with intimacy. Yet, as my employer, he did not have to explain to me why he had decided to test the emergency door on that particular afternoon and he had every right to suggest that I might benefit from additional training and supervision.

But that's all about Jim. For me it was a useful learning experience and I thanked Jim for his insights and suggestions. When he finally left, I went back upstairs to inspect the damage and had to admit that his concern for the carpet was not entirely spurious. As I pondered on the juxtaposition of human and material values, Eddie Turnbull poked his head from his bedroom door and grinned. "You got some shit eh?" he asked rhetorically. I turned away and walked slowly back to the staff office. "Fuck off and die Eddie Turnbull," I whispered – once the door was closed, of course.

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Cedrick of Toxteth was a columnist with *Relational Child & Youth Care Practice*. He is currently on vacation in Gaza but can be contacted through his editor at fewster@seaside.net

The Three Lens Perspective Method

Jack Phelan

Effective CYC practitioners see the world and the people we support through three perspectives, or lenses. They are a systemic lens, a cultural lens and a developmental lens.

Everyone we support is a member of a family system, no one has developed in isolation, and families have influence beyond simply everyday contact (see nature vs. nurture in your text). Culture and nationality create beliefs and ways of knowing that cannot be ignored, while understanding developmental dynamics, no matter how we try to dismiss them, are often the keys to unlock the contradictory behaviours we encounter in our work.



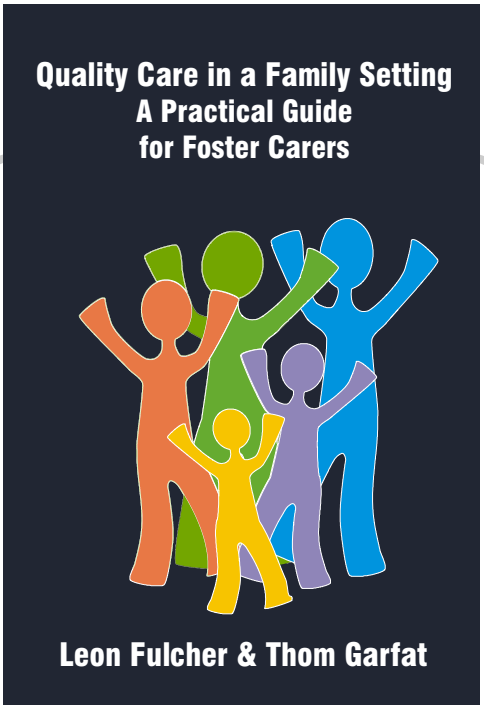
Hopefully there are few CYC practitioners who resist systemic thinking approaches. Unfortunately, we often attempt to isolate or separate people from their family, which is not a good idea. Physical safety is sometimes a concern, but this can be ensured with enough preparation, so no child, sibling or parent should be prevented from having regular contact with each other. I suggested to one group home program that instead of hiring a Family Support worker, they institute a policy of giving $5 per day to the Rec Fund for every visit by a family member to each resident, who could visit every day of the week to a max of $35 for the Rec Fund per youth. All the staff would welcome the visits, if only for the increase in cash, all the kids would have a good reason to see their family and the visits could be a few minutes to several hours. The greatly increased contact would benefit all. It would also save money.

Cultural sensitivity is a big issue. Most information here falls into the category of not knowing that you don't know something (see the Johari window in your text). The person to whom cultural insensitivity is obvious usually is powerless to create

any change. I moved to Canada from the USA almost 30 years ago, and there is little cultural difference, some say because there is little culture period, between these two North American life styles. Yet it took me many years to get used to the strange ways of my Canadian friends and colleagues. When I have been in South Africa to work with CYC people (a great privilege for me - they are incredible) I know that I don't know lots of things, but even though I have thought long and hard about it, I cannot really know what it is to have a European perspective imposed on a tribal culture. It is easy to sum it up in a sentence, but almost impossible for me to wrap my head around. The most useful thing I have learned from this is how much I do not understand about working with North American Aboriginal peoples.

Developmental thinking is very important to me, yet it is not the norm in most CYC settings. When I see the simplistic behavioural approaches that are the rule in most programs, I get discouraged about how little of our CYC literature actually gets put into practice.

So, start off the New Year with a new set of glasses, ones which have trifocal lens. You may discover that your perspective shift will influence your practice in wonderful ways.



While training and practice standards are now used in many places to enhance, monitor and evaluate the quality of care given to children and young people in out-of-home care, Foster Carers are often expected to perform miracles without practical assistance. Building from a strengths-based approach, **Quality Care in a Family Setting: A Practical Guide for Foster Carers** seeks to redress that deficit, offering practical help for Foster Carers seeking to do extraordinary things with the kids for whom they care.

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A rural South African Christmas story

The Little Drummer Boy

Miena had met Amos twice before, once when the social worker had first brought him to the children's home, and again the previous week when he had come with his grandfather to meet the staff prior to moving in. On both occasions he had seemed rather an angry child. He had looked crossly at the floor during all the introductions and discussions, and last week when offered a mug of coffee he just wagged his head and frowned. Usually the staff were pleased to meet a new boy, but Amos didn't make any friends on this visit. "A cheeky boy," said Flora, the cook, when he had gone off. "Not good." Flora took no nonsense from anyone, and would always speak her mind.



Several of the other staff agreed. "He didn't have very good manners." "He had nothing to say to anyone; hardly answered our questions, and not very polite," they said, as they headed back to their various tasks.

Miena thought - "Well, I suppose that's why he's coming here. Both of his parents are dead, his only relation is his grandfather who is not well, and he has spent so many years of his life looking after the old man, not going to school, and not learning much about life. That's probably why he got into so much trouble." Amos had been in trouble. Over the past year there had been two or three tries to get him into the local school, but he was certainly not up to the standard of the other ten-year-olds, and he had been bored and embarrassed by having to sit with the little children of six and seven. The class teachers had been irritated by his disruptive behaviour so when he ran off nobody minded.

There were times when Amos stole bread for his grandfather and himself from the Indian shop in the village because it was still ten days to go before pension day and there was nothing to eat. There were also the times when he stole an electric toaster and an alarm clock to sell on the roadside for spending money. But he wasn't very good at this, and he began to get a bad name with the local police. His clumsy and unpolished manners did not endear him to the few people who tried to help - like Mrs October from St Wilfred's Sunday School and Mr Paulse from the Boys' Brigade band - and when the social worker from the nearest town was called in it

seemed to her that Amos was just small trouble waiting to become big trouble, and grandfather was not able to be of much help.

"Well, let's see," said Miena. "We've had worse kids coming here, and most of them have done just fine."

Amos's first afternoon was a disaster. It had rained steadily through the whole day, so the children were all inside - on top of each other and getting on each others' nerves. Miena had talked to them about welcoming the newcomer and giving her "remember what it was like when you first came" speech. But kids having to stay inside on a rainy aftternoon soon lost their good intentions. She could see Amos feeling very uncomfortable, looking outside at the rain and longing to escape into fresh air and privacy. The older boys were quick to have some fun at his expense. 'Amos? Where did you get that name?" asked one. "He sounds like he escaped from the Bible." Everybody shrieked with laughter. Amos got up and walked outside into the rain.

Miena knew the narrow line she had to walk - between protectively taking his side against the others, and allowing him to be damaged by these experiences. She drew the children's attention away from what had happened by asking the older children to help her unpeg the laundry which was drying in the kitchen so that Flora could start with the evening meal, while the smaller kids went off to their rooms to wash up before tea. She grabbed the chance to "leave the ninety-nine" (she often used this biblical analogy of the lost sheep when seeking out the lone kids in difficulty) and went outside to find Amos.

He was just walking back and forth between the garage and the big oak staring at the ground. She strolled alongside him, trying to figure out what to say, but in the end just kept silent. "Maybe just by being here with him and keeping my big mouth shut I can let him know I understand how he's feeling," she thought. Amos just looked cross again.

That night, just before she went off duty, Miena went in to say goodnight to each of the children in her section. They seemed more tired from the noisy indoors afternoon than they would have been after an active sporting programme. She peeked round the door of Amos's room, expecting a deep scowl from an angry young boy - but he was lying with his eyes tight shut, and tears rolling slowly on to his sleeve. He didn't hear her come in. Miena looked at him, thinking - "no parents, a dying grandpa, no schooling, in trouble with the police, and about as friendly as a bad-tempered bear - what a start!" Humans have a natural tendency to want to tame wild animals, to make friends with them, to stroke them ... but they also know that they can easily get bitten. Once again Miena could think of nothing to say. She just put her hand on the boy's head. For a moment he didn't move, and then he pulled the blanket over himself and curled up into a ball.

The next afternoon things had got worse. The children were full of stories from school. The other children had teased Amos to the point where he had kicked out at one of the older boys - and got a smack for his trouble. He had walked into his new class at this point, and had refused to speak to the teacher. She

sent him along the passage to the office. The class had giggled when he came back, and he sat hiding his face in his arms for most of the day. He had walked back from school by himself. "At least he came back from school," thought Miena. Not that he really had anywhere else to go, but she felt quite moved that he came back to the children's home of his own accord; after his not-very-successful 24 hours here he might quite understandably have been tempted to run off.

Miena had been taught in a course to try to "translate" what children said, especially when they expressed themselves clumsily - or maybe when they didn't use words at all. She looked back over the past day, at what had happened, at how the other children had behaved. She also thought of the two occasions when she had been alone with Amos. Even though they had not exchanged a word, both when walking next to him in the rain and when going in to say goodnight, she had tried to convey some companionship, some reassurance.

Maybe he had "translated" her wordless message - and coming back might be his wordless reply: "OK, here I am. What now?" She decided to go ahead on this basis.

Tea time was the usual time when everyone talked excitedly about their day. It was encouraging how they got involved in things at school. This one had been chosen for a class bus trip to an aquarium; this one had been asked to talk to his class about his pet tortoise; this one was going off with the choir on Sunday to some event on a nearby farm; this one was going to practice kicking for the posts so that he might get into the under 14 second rugby team. Amos had nothing to offer. All this seemed way beyond him. But at least he was listening to the others, and sometimes looking up at someone who was talking. The novelty of his arrival yesterday had worn off, and was at least



taking up some physical space in the group. "Hey, Amos, pass me that teaspoon, man," asked Philip, one of the bigger boys. Silently he passed the teaspoon, and so took place the first fragment of positive "dialogue" between Amos and one of the other boys. Again no word from him, certainly no "thank you" from Philip, but the action (or interaction, or transaction) was a start.

The following day saw the first brief conversation between Miena and Amos. The school was not sure which class Amos should be placed in, and he had been rather passed from one class to the other throughout the day. He arrived home with no books at all, and with nothing to do while the others did their homework. Miena saw him sitting on the edge of the sandpit, doodling with a stick.

She joined him, and was immediately surprised to see that he had dampened with water an area of the sandpit so that he could draw quite accurately with the sharpened stick. "Is that your house?" she asked. He looked down at the picture in uncertain agreement - and only then did Miena realise how verbally handicapped he was. The minimal language he had been exposed to was itself a mixture of Afrikaans, English and Zulu, never enough of any one of these to become dominant. The use of language had always been fraught with anxiety for him, because people had become impatient with his slowness to understand and his hesitance in answering, and so had begun to shout at him.

Even now, as he looked down at his picture, he seemed to want to reply, but was afraid to. Miena asked again, quietly, and this time in English, in Zulu and in Afrikaans, "Is that your house?" He seemed so grateful that someone had helped him answer - and he explained in a halting mix of all three languages that it was.

He tried to ask her a question, and this time *she* could not understand, and as she struggled to make sense of it they both saw the funny side of the roles being shifted, and they laughed. It seemed that the name "Miena" sounded like the Zulu word for 'me', and Amos was wondering why she called herself this and didn't have a proper name like he did.

Pointing at herself, adding sign language to the other three, she explained. "My name is really *Helmiena*, but people just call me Miena. You can call me Miena or Helmiena."

In talking with Amos over the next weeks, Miena came to know how inferior he felt to the other children. He looked in awe at such things as hockey sticks and rugby boots, and the formal rules and skills of the games that went with them were quite beyond him. He would never learn all this. Alas, the other children were also soon to realise his limitations and his inability to participate in their games. It seemed only natural to toss a rugby ball forward to a fellow player ahead of him (against the rules of Rugby), and he was crushed by the angry disapproval of his team mates. He came to be left out of pick-up teams as a definite liability, and watched the games, confused, from the sidelines.

One day one of his sand pictures had an unexpectedly military look about it: there were clearly uniforms and lines of marching troops, as well as serious

looking weaponry and what looked like tins or casks. He tried to explain but it went way above Miena, and she was left to smile politely and both of them knew they had lost contact.

Two days later, as she was desperately trying to find some strengths for Amos to build on, she was re-reading his file and suddenly it hit her. One of the people who had taken some trouble with Amos was Mr Paulse from the Boys' Brigade band. She tracked him down through St Wilfred's Church in the small town near his grandfather's village.

"Yes, I remember Amos," he said. "How's he doing? I hope he's playing in the band!"

"We don't have a band here," she said. "I didn't know he was good at that." "Good?" shouted Mr Paulse over the rural telephone lines, "That boy has got rhythm! You must just try him on the drums!"

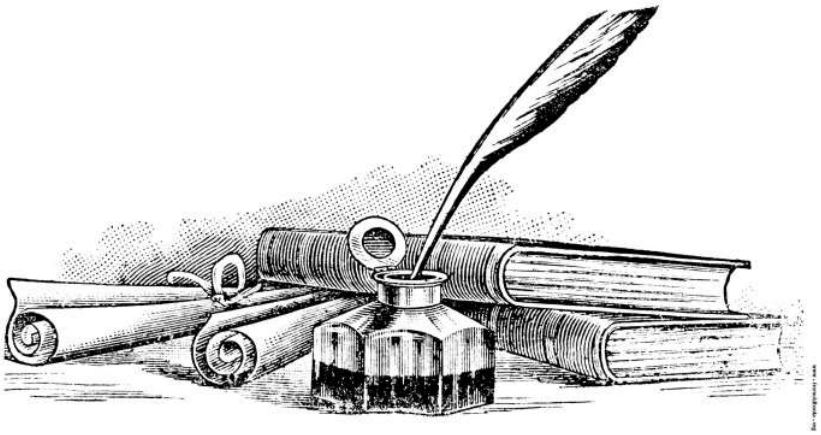
Miena thanked him, but regretted that there was no band either at the children's home or at the school. And *that*, she realised, was what his drawing was about - the Boys' Brigade band, and the tins and casks were drums! But we have no band, no drums, no drumsticks. But every journey, Miena remembered from somewhere, "begins with the first step." And that is what we are looking for for Amos. She had a plan.

In three weeks' time was the children's home's Carol Singing Concert. Because not all of them were musical, the staff had tried to accommodate all of the children's skills and enthusiasms (sometimes just enthusiasms!) in the Concert, so it had broadened out into more of a variety concert, sometimes very unChristmassy indeed! But this time there would be a new carol on the programme, *The Little Drummer Boy*, starring a real little drummer boy.

It turned out truly to be Amos's "first step". Not only was this a real link with the positive side of his past life, and not only was his rhythm a great hit with the other children, both older and younger, but Amos had a remarkable gift. In the dusty street outside a remote church in a country village, Amos had learned all of the drummer's rolls, along with the discipline of a secure beat. And from the enthusiastic Mr Paulse he had also learned the beginnings of jazz drumming. The afternoon was a huge success. Amos was included in several of the songs and plays, but most especially in his "own" carol, the rhythm of which saw him doing something important together with others - and this is what he went on to do in all others aspects of his life during the time he was at the children's home. And of course they bought a proper set of drums!

The really exciting end of the story was that just over a year after he came, he was adopted by his old mentor Mr Paulse and his wife - and this coming year, at the age of 20, he will be writing his final school exams.

Reprinted from South Africa's *Child & Youth Care, 15*,10, October 1977.



Penned Obsolescence

A couple of friends of mine went in for a parent-teacher conference last week. Their son is 9 years old and in Grade Three, and as responsible parents they wanted to keep tabs on his progress in school.

He's a smart, well-behaved kid, so the teacher had lots of praise for him. He does well in almost all of his subjects. He particularly excels in his work with computers. But alas, there was one problem area.

The teacher shook her head gravely. "His penmanship is very poor," she said. "We really need him to improve on that." She had some examples to show and sure enough, his writing was at the messy end of the Grade Three boy spectrum. Which means it was messy indeed.

Now, if it had been my child, I would have nodded right back at the teacher and solemnly agreed that his writing needed some good hard work. Because of course, you need to have legible handwriting in this world.

But my friends had one tiny question: "Why?"

The teacher seemed genuinely taken aback. The necessity of having legible handwriting is one of those things she clearly held as an element of faith.

"Why? Well ... because he needs to have handwriting that people can read," she said, pointing out what should have been plainly obvious to anyone. That argument won, she prepared to move on. But my friends weren't finished.

"Why?" they asked again.

The teacher was at a loss. I mean, what do you say to parents who don't understand something so basic?

His mom pressed. "You say he's great at computers. And we see that at home. So why does he need to have tidy handwriting? He's in Grade Three. It's impossible to know what he will be when he is a grown man, but it's almost certainly going to be something involving a keyboard and a monitor, wouldn't you say?"

And because pretty much every job right now involves a keyboard and a monitor, the teacher had to grudgingly concede that in ten or fifteen years, when this young man is out in the workforce, the odds are pretty much overwhelmingly in favour of him finding typing far more useful than writing in cursive script.

When she told me about this exchange, I was first aghast at my friend for challenging the teacher on something so clearly in her son's best interest. Of course he needed to know cursive.

And then I thought about what I do for a living.

I am a writer. And honestly, I can't write. Not with a pen. I can scrawl something out, but I don't think you could read it. Over my lifetime, my handwriting has degenerated to the point where it is truly atrocious, but it doesn't matter because nobody ever has to read it. Ever.

And that's today. In ten or fifteen years? Ballpoint pens will be curiosities, museum pieces.

Last Christmas, a dear friend gave me a pen and ink set. It consisted of a straight pen with a metal nib and an antique ink bottle.

I was delighted. It took me back to elementary school. I learned how to write with a straight pen — how to dip the nib in the ink and load it just so — not too much or it would drip, not too little or nothing would transfer to the paper. We were required to learn cursive with that kind of tool. We were not allowed to use pencils or the new-fangled ballpoint pens.

Looking back on that now, it seems a comical waste of time and effort. Thank goodness we have evolved enough as a society not to have our kids forced to learn how to do something using ridiculously outdated tools. We might as well teach them how to churn butter by hand.

Hey, I learned how to use a slide rule when I was in high school. A slide rule. They would not let us use the newfangled calculators, because they needed to be plugged into the wall and what if there was a power outage? In a blackout, you would never be able to type the number 58008 and hold your calculator upside down and see that it spelled "BOOBS". Tragic. No, better you learned how to multiply and divide with a slide rule.

Has anyone even seen a slide rule in the past 30 years? Is there someone left on the planet who can use one?

And if you asked him to, wouldn't he just point to his tiny solar powered calculator and say, "I could, but ... why?"

That is a very good question.





Postcard from the Coromandel Peninsula
January, 2013

Hi Colleagues! While Northern Hemisphere folk try to stay warm during the Winter season, we – at the other end of the World – are celebrating our Summer holidays again! That doesn't mean we've had a lot of sunshine however. After devastating Samoa and Fiji along the way, Cyclone Evan blew through with gale force winds and plenty of rain. Did you know that Hurricanes are Atlantic Ocean storms while cyclones are Pacific Ocean phenomena?



Children at Play

In spite of the weather, there have still been plenty of opportunities for play. While adults were playing in the local village 'rugby derby' between the Hills (Ruatahuna) and the Lake (Tuai) in our village, there were many opportunities for cousins and friends to play together, mostly making up their own games.



Bicycle by the Beach

When we arrived at the beach for our holidays, there was plenty of action, even if the weather didn't encourage sunbathing. All along the beach, children, young people and adults were getting engaged in all sorts of games, some running in and out of the shallow water, while other playtime activities involved building sand castles, digging holes, and constructing houses out of driftwood.



Bad Rip Tide Conditions at the Beach where Children Play

But play at the beach is also surrounded by dangers. For much of our first week at the beach there were dangerous rip tide conditions. As an island country, New Zealand schools give much attention to water safety. 'Swim Between the Flags' is a daily reminder for everyone, reinforced by public broadcasting on radios and televisions, as well as with signs on every beach.



Beach Patrol along Pauanui Beach

Beach lifesaving units are a volunteer feature of every NZ coastal village, supported by the wider community, government and businesses. Think of 'beach lifesaving' as you might think of child and youth care workers remaining vigilant during recreational activities or when making risk-assessments when planning activities that ensure everyone stays safe. An horrific accident was reported here on Christmas Eve when a popular young man – selected Head Boy for his school next year – lost control of the bike under speed while riding a quad bike with his mates and went off a 150 foot cliff! Very scary reminders!



Digging *Holes and Building Sand Castles*

How easy it is for accidents to occur when spending time with and around children or young people. Youths seem to have a default drive towards risk-taking at certain times in their lives. At our beach, some children were seemingly left to play where and as they liked but most were closely monitored by parents and carers. Like Child and Youth Care Workers, the Beach

Patrol offered vigilant supervision and oversight of everyone playing at the sea.

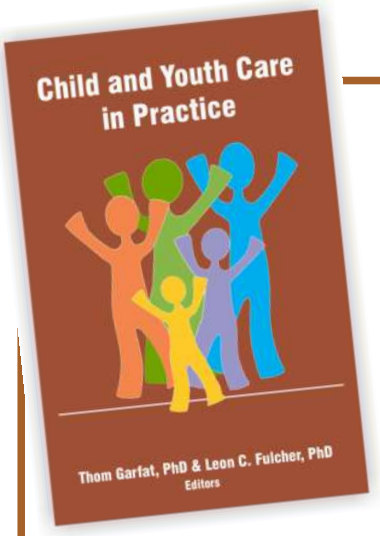


On Discovering Our First Rainbow!

A lasting impression was of my 2 year-old grandson 'discovering' his first rainbow! Can you remember seeing such wonders of nature for the very first time? Do you remember that sense of awe and amazement? It reminds me of our need as Carers to nurture imaginative play and to engage with vigilance in daily life events that have special meaning – if we notice! Without careful attention, it may be easier to think about youthful activities, not doing them!

May each of you have a Happy New Year and a Careful, Caring 2013!





Child and Youth Care in Practice

Thom Garfat & Leon Fulcher - editors

Child and Youth Care in Practice brings together some of the best of contemporary writings on Child and Youth Care practice. Starting with an updated version of the characteristics of a CYC approach and ranging from practice-based evidence that informs evidence-based Outcomes that Matter through to direct care, supervision and management, through education to creative arts, Child and Youth Care in Practice demonstrates the application of a Child and Youth Care approach across many areas of our work.
Drawing upon writings from different parts of the world, this is a practice ideas book for college courses, teams, trainers, carers, managers and individual practitioners. Child and Youth Care in Practice shows the expanse and connectedness of our field. It is a testament to the evolution of a Child and Youth Care approach.

Child and Youth Care in Practice is available in soft cover ($19.95) or Adobe PDF e-book format ($14.95).

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EndNotes



793 Million Adults Worldwide Would Not Be Able To Read These Words
— UNESCO

“We had to leave behind all of our possessions . The only thing we could bring with us is what we have in our heads, what we have been taught—our education . Education is the only thing that cannot be taken from us.”
— Woman who fled from Darfur to Chad, 2004

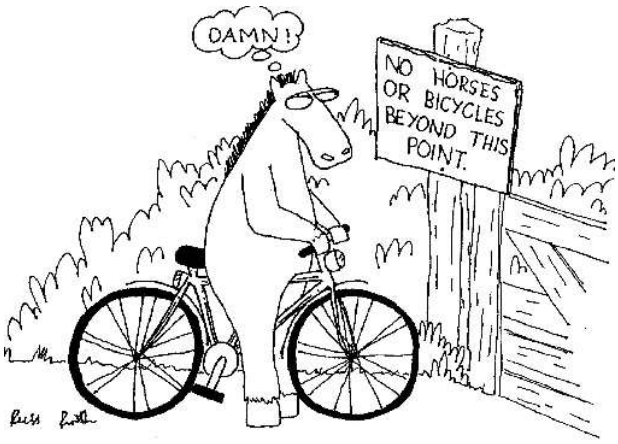
"So please, oh PLEASE, we beg, we pray, Go throw your TV set away, And in its place you can install, A lovely bookshelf on the wall."
— Roald Dahl, Charlie and the Chocolate Factory

"Children are made readers on the laps of their parents."
— Emilie Buchwald



"There are many little ways to enlarge your child's world. Love of books is the best of all."
— Jacqueline Kennedy

"The more that you read, the more things you will know. The more you learn, the more places you'll go."...
— Dr. Seuss, "I Can Read With My Eyes Shut!"



"To succeed in life, you need three things: a wishbone, a backbone and a funnybone."
— Reba McEntire

"The 50-50-90 rule: Anytime you have a 50-50 chance of getting something right, there's a 90% probability you'll get it wrong."
— Andy Rooney

"Critics who treat 'adult' as a term of approval, instead of as a merely descriptive term, cannot be adult themselves. To be concerned about being grown up, to admire the grown up because it is grown up, to blush at the suspicion of being childish; these things are the marks of childhood and adolescence. And in childhood and adolescence they are, in moderation, healthy symptoms. Young things ought to want to grow. But to carry on into middle life or even into early manhood this concern about being adult is a mark of really arrested development. When I was ten, I read fairy tales in secret and would have been ashamed if I had been found doing so. Now that I am fifty I read them openly. When I became a man I put away childish things, including the fear of childishness and the desire to be very grown up."

— C.S. Lewis

"Children must be taught how to think, not what to think."

— Margaret Mead



And how many doses did you give Daddy?

"Times are bad. Children no longer obey their parents, and everyone is writing a book."

— Marcus Tullius Cicero (106 BC – 43 BC)

"There are only two ways to live your life. One is as though nothing is a miracle. The other is as though everything is a miracle."

— Albert Einstein

"I may not have gone where I intended to go, but I think I have ended up where I needed to be."

— Douglas Adams, The Long Dark Tea-Time of the Soul

THE OPTIMIST — Charles M. Schulz



THE INTERNATIONAL CHILD AND YOUTH CARE NETWORK

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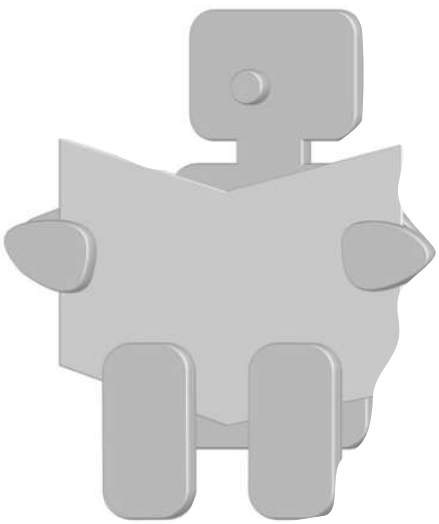
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