

# CYC-Online

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**SPECIAL ISSUE**  
Characteristics of  
Relational Child and Youth Care

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

**Issue 236 / October 2018**



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# Characteristics of Relational Child and Youth Care

James Freeman

**W**elcome to the October 2018 Special Issue of *CYC-Online*. Each month as the journal of CYC-Net makes its way around the world we are delighted to hear of stories about how a certain article has brought encouragement, insight, or perspective to readers. Our writers and editors volunteer their time to make each issue come together for you and it is a labor of love.

This month is a special issue which includes the updated and revised characteristics of Relational Child and Youth Care. You'll read in the introduction what new elements are included and I believe this will be a very practical help to your ongoing and daily caring of children.

When I first was exposed the 25 characteristics it was an immensely integrating experience. A large part of my career in serving others was guided by intuition and key lessons learned from experience and from reading others who themselves were on similar journeys. The characteristics brought so much of this together in one place and provided names for several concepts I knew – or wanted to know – but didn't have ways of articulating them.

Naming and defining these characteristics is not an attempt to outline and express every corner of caring for young people, but is a refreshing description of the care and advocacy done by people like you every day around the globe. It has



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its place in the top of my personal library along with a just a handful of other classic texts.

Part of the strength of the characteristics comes in its brevity. For the majority of our work to be summed up in just 25 characteristics is quite an accomplishment. Yet within them there is plenty of room for creativity and imagination in how they are applied. I value how they are representative of quality care and not an attempt to be exhaustive.

So, let me go back to the first time I was exposed to the characteristics. As I saw the 25 items listed on the page they seemed to magically fall into three categories. This launched a series of discussions with Thom Garfat which resulted in us naming the three categories of being, interpreting, and doing. This organization into the memorable 'BID' made them easy to remember and provided a 'hook' for each characteristic to hang on.

Since that first experience I can't begin to count the number the deeply meaningful and valuable conversations with colleagues on our work using the organization and content of the characteristics. My hope is that this update and revision gives them a boost and accelerates similar conversation and application around the world. I could not be more delighted that you and the rest of the readers of *CYC-Online* are going to be a part of that.

Also in this special issue are columns from some of our regular contributors who you have come to value and appreciate on a monthly basis. I am so deeply thankful for their insight (and sometimes provoking perspectives) that enhance our lives. Enjoy them and share them with your team members and colleagues.

Thanks for reading and for all you do alongside young people every day.



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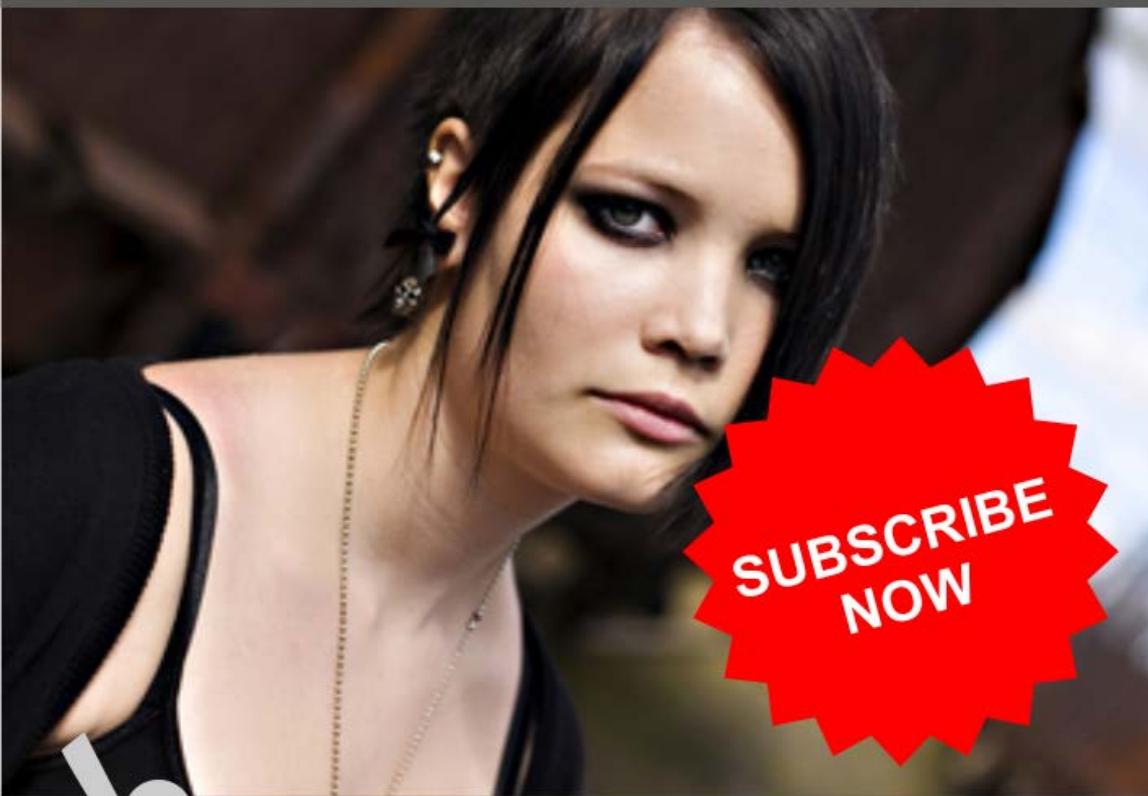
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# Characteristics of a Relational Child and Youth Care Approach Revisited

Thom Garfat, James Freeman, Kiaras Gharabaghi and Leon Fulcher

## Abstract

*Relational Child and Youth Care is articulated through twenty-five characteristics which are organized in a three-part framework of ways of being, interpreting, and doing. These characteristics seek to express Child and Youth Care practice in the life-space and in the moment of interaction between the practitioner and the young person, family, or community. This revision comes after nearly fifteen years from the first expression of the characteristics and is based on extensive feedback and observations from around the world. It includes a focus on inclusive practice related to culture, race, trauma, and other historic contexts important to the Child and Youth Care field.*

## Introduction

### **A Brief History of the Characteristics**

In 2004, Garfat (2004a) identified characteristics, drawn from research, classic and contemporary literature and his and others' experience of the field, which were thought to identify a Child and Youth Care (CYC) approach to caring. These characteristics were updated by Fulcher and Garfat (2008) when writing about their applicability in foster care and then again in a review of applications of a relational Child and Youth Care approach in a special issue of the *Relational Child and Youth Care Practice* journal (2011). These applications were further developed in



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*Making Moments Meaningful in CYC Practice* (Garfat, Fulcher & Digney, 2013), in *Child and Youth Care in Practice* (Garfat & Fulcher, 2012), and in *Child and Youth Care Practice with Families* (Fulcher & Garfat, 2015). Subsequent writings expressed how the characteristics were applicable to specific practices of supervision (Charles, Freeman & Garfat, 2016) and trauma responsive care (Freeman, 2015a). These characteristics are again updated and presented here based on readings, workshops, conferences, discussions and insights drawn from the field in the past few years.

### **About this Revision**

This updated version of the 25 characteristics represents a significant enhancement from previous versions. It acknowledges and includes many significant voices that are important to the field. It also acknowledges that the field of Child and Youth Care has, over a period of decades, been complacent in its approach to centering the lived experiences of Indigenous, racialized, non-binary gendered, neuro-diverse bodies, presenting instead a list of characteristics that can be read as fundamentally 'white', ablelist, and heteronormative (Gharabaghi, 2016; Vachon, 2018, Skott-Myhre, 2017). We have also learned a lot about the effects of trauma on young people, including generational trauma as well as abuse and neglect.

This new version of the 25 characteristics is not a critique of previous versions; it is instead a way of re-contextualizing the characteristics within lived experiences and intersectionalities in an effort to provide a foundation (albeit one in need of constant growth and adaptation) for Child and Youth Care practice moving forward. Collectively, we set out to reimagine the 25 characteristics by engaging over 100 Child and Youth Care involved people (broadly defined) from North America and the Caribbean, Africa, Asia, Australia and Europe in order to open dialogue among differently located and positioned individuals to reflect on the characteristics and provide suggestions for rendering these commensurate with the many different ways people are connected to the field. Through this process, the 25 characteristics were reviewed by individuals with longstanding involvement in



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the field and its community, as well as by many individuals thinking and writing from perspectives and with identities reflecting various contexts including trauma, multiple racial, gender, ability/disability, sexual orientation, and class positions.

In reflecting on the feedback we received, we must first express how grateful we are that so many individuals provided detailed, serious, meaningful suggestions for shifting the nuances and the scope of the 25 characteristics to such an inclusive and relevant space. We are especially grateful for the feedback from individuals who have long encountered barriers, sometimes invisible to us, in attempting to access this field and the community that comes with it. We are equally grateful for the expression of relevance and meaning that these characteristics have in such diverse geographies, experiences and cultural spaces. We heard about how these characteristics have been helpful in Isibindi projects in South Africa, in residential settings across Canada, in post-secondary education settings in Europe, North America and Africa, and in community-based child and youth care services in Australia and Asia. We learned that the field, broadly defined, is fundamentally interested in continuing discussions and exploration of the following themes:

- The role of power embedded in racist ideologies, state and institutional structures, and cultural hegemonies;
- A critical perspective on the universality of core concepts, including care, love and relational practice;
- The importance of historical events and practices and their connection to generational and on-going trauma;
- Acknowledging, especially in Canada, the United States and Australia, Indigenous ways of knowing, experiencing, and sharing;
- Framing Child and Youth Care practice as an approach rather than a rigidly defined professional practice with impenetrable borders for individuals and groups of people with different lived experiences based on race, gender, ability/disability and other criteria.



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We also learned about, and are pleased to express our commitment to, the need for on-going reflection on, and revision of, these 25 characteristics, always with the voices of diverse individuals and groups as partners. In many respects, we (the authors) do not own these characteristics. They belong to our diverse field and the people who are drawing on these characteristics as a way of being in the world.

## **Defining a Relational Child and Youth Care Approach**

We believe that Child and Youth Care practitioners are ideally situated to be among the most influential of healers and helpers in a person or family's life. For many years, the work that Child and Youth Care practitioners do was considered, at best, a sub-profession and the workers themselves were frequently considered to be extensions of other helping professionals, most commonly Social Workers (Garfat & Charles, 2010). However, with the passage of time and the evolution of a distinct approach to practice, Child and Youth Care (CYC)<sup>1</sup> and CYC practitioners, like social pedagogues in Europe and child care workers in South Africa, have come to be recognized as possessing a specific expertise and a unique approach to working with children, youth and families (Fulcher & Garfat, 2015; Mann-Feder, Scott, & Hardy, 2017; Thumbadoo, 2008; ) involving a “comprehensive framework for being with young people in relational and authentic ways” (Gharabaghi, 2017a, p. 5).

A CYC practitioner's position in the daily life of another person, and/or their family and community, allows the practitioner to intervene proactively, responsively and immediately to assist others to develop different ways of acting and experiencing in the world (Fulcher & Garfat, 2008). There is no other form of

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<sup>1</sup> The term Child and Youth Care (CYC) is used here in both the specific and generic sense. While it does refer to those practitioners in a variety of countries who carry the title of CYC worker, it also refers to those who might practice within a Child and Youth Care framework but be identified with different titles such as youth worker, social pedagogue, residential social worker, and across multiple settings.



helping which is so immediate, so grounded in the present experiencing or, one might say, so everyday. This immediacy of being present as helpers creates in-the-moment learning opportunities (Ward, 1998) allowing the individual to experiment with alternative ways of acting and experiencing as they are living their lives. CYC practice is not oriented around temporally spaced and infrequent visits to an office where the 'client' meets with a therapist who has little to no experience of the individual's experiences in everyday life. Rather, it is based on being in-the-moment with the individual(s), experiencing their life and living with it them as it unfolds (Baizerman, 1999; Winfield, 2008), within an inclusive, rights-based, anti-oppressive and trauma-informed framework that extends from the nature of inter-personal relations to the engagement of systemic and institutional features of injustice (Daniel, 2016). Child and youth care practice seeks to avoid the pitfalls of being with others as framed eloquently by Hooks (2000): "When we face pain in relationships, our first response is to sever bonds rather than to maintain commitment." We remember, always, that young people are the authors of their own story (history) and, ultimately, the agents of their own change (Gharabaghi & Stuart, 2011).

Child and Youth Care practice is based on helping people think about and live their life differently, as they are living it (Freeman, 2015b; Garfat, 2002). It is a focused, timely, practical and, above all, immediately responsive form of caring which uses "applied learning and daily uses of knowledge to inform more responsive daily encounters with children or young people" (Fulcher 2004, p. 34). It is immediate and focused on the moment as it is occurring. It allows for the individual to learn, experience and practice different thoughts, feelings and actions in the most important area of their lives – daily life as they are living it (Gannon, 2014; Mucina, 2012).

We recognize that becoming involved in a person's or family's life is more than an inter-personal process; it requires an engagement with the context of history and its consequences, including, for example, the histories of residential schools and deeply embedded biases impacting Indigenous communities across North



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America, as well as anti-Black racism, gender normativity, sexual conservatism, neuro-diversity and other histories of oppression and racism around the world. Still we believe that Child and Youth Care practitioners are ideally situated to impact the circumstances of young people, their families and their communities precisely because CYC practice offers a unique way of being in the world, and therefore of being with young people, their families, and their communities in the context of their present situation.

## **The Characteristics as a Framework for Practice**

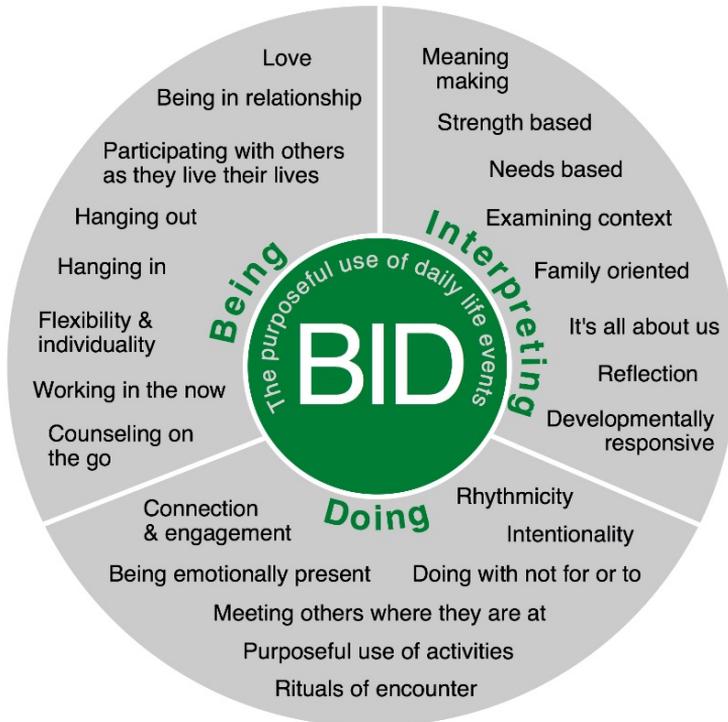
The diagram below (Freeman & Garfat, 2014) shows how these characteristics of a Child and Youth Care approach are arranged around the purposeful use of daily life events and grouped according to processes of Being, Interpreting and Doing (Freeman & Garfat, 2014). These characteristics are foundational to our way of being, interpreting and doing in our work, wherever our work is located. They characterize the Child and Youth Care way of being in the world with other(s).

This approach outlined by these characteristics aims for inclusiveness, an equitable joining together of all who participate in the field. Thus, one might be, for example, a Child and Youth Care worker, a CYC instructor, a family worker, a trainer, a youth advocate, a community development worker, a researcher, a supervisor, etc. What binds them together, as CYC practitioners, is the shared approach to their work. Thus, CYC practitioners are connected by how they think about and carry out their work. Child and Youth Care is, after all, an ‘approach’ or a way of being in the world with others. So, we aim here to be inclusive while acknowledging the historic context of trauma, power, and ‘privilege and cultural singularity’ (Gharabaghi, 2017b) which is the history of our field. Indeed, as Skott-Myhre said, all of us “need to seek to be accountable to our privilege in real and material ways” (2017, p. 17) and recognize the political aspects of our work.



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### Characteristics of a Relational Child and Youth Care Approach

Freeman, J. & Garfat, T. (2014). Being, interpreting, doing: A framework for organizing the characteristics of a relational child and youth care approach. *Child & Youth Care Online*, 179, 23-27. Retrieved from <http://www.cyc-net.org/cyc-online/jan2014.pdf>

The 25 characteristics of relational Child and Youth Care Practice are not intended to capture, for example, the limiting world of institutional care and traditional designations within the professional field of Child and Youth Care. They are, quite to the contrary, meant to reflect a particular approach to 'being with', whether this is framed around euro-centric ideas of developmental growth or, for



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example, Indigenous ideas about the ‘Healing Path’ (McCabe, 2007). Ultimately, the Characteristics are about child and youth care practice in the life-space and in the moment. They do not represent an analysis of social systems, institutions or processes. They make no attempt to comprehensively capture the richness of literature that speaks to anti-oppressive practices, marginalization, system change and advocacy. And they are certainly not meant to provide a foundation for policy frameworks. The characteristics speak to how we are with young people, in all of their diversity and life experiences, understanding that people’s lives are very much impacted by social structures, power relations, racism, exclusion, marginalization and other dynamics.

## **Relational Child and Youth Care Practice**

*Relational* Child and Youth Care practice is an approach in which attention is directed towards ‘the in-between between us’ (Garfat, 2008). As Bellefeuille and Jamieson noted “relational practice is a dynamic, rich, flexible, and continually evolving process of co-constructed inquiry. In this type of inquiry, meaning emerges within the ‘space between’ the individual, family, or community” (2008, p. 38). The co-constructed nature of the in-between is a central feature of effective relational Child and Youth Care practice. Without a focus on the in-between between us, there is no relational practice.

This co-created space, *the in-between between us*, represents the ‘hub of the wheel’ around which all characteristics of Child and Youth Care practice revolve. We often call this co-created space between us the relationship, but relational practice involves much more than just ‘having a relationship’ (whether good or not) with another person. Rather, it means that the practitioner is constantly attending to the co-created space between self and other, wondering – for example – ‘Is it a safe enough place?’, ‘Is it a learning space?’ ‘Is it a developmentally appropriate place of experience?’ ‘Is it a place of pain? Of joy?’ ‘Of inclusion and equity?’ The practitioner also continuously reflects on the nature of power embedded within this co-created space, recognizing the inherent power imbalance between



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practitioner and young person that can be further accentuated through racial, gender and other expressions of individuality. Honouring the space between Self and other includes an active, present and transparent acknowledgment of power. The focus, however, is more on the characteristics of the co-created relationship itself, than on those of the individuals in the relationship. As Gharabaghi (2014, p. 8) explained “relational practice shifts the focus from the actors engaged in some form of interaction to the experience of interacting regardless of the specific actors”. A focus on the in-between between us, concentrates on the experience itself with an understanding that this experience is subject to, or even mediated by, externally situated and historically burdened structures, institutions, and processes which involved generational trauma, racial, cultural, and material power dynamics.

The creation of this in-between space is impacted by the self-identity, culture, historical context and practice setting of those involved in this co-creating. (Gharabaghi, 2014). How do, for example, the current contexts and cultural histories of a middle-aged Polish male immigrant CYC and an indigenous Cree female teenager from Northern Canada, intersect to impact on the evolution of their relational space in the context of a large city drop-in shelter? It becomes complex indeed.

A focus on the ‘in-between between us’ ensures that the Child and Youth Care practitioner remains attentive to the mutuality of relationship, recognizing that both parties to the relationship create and are influenced by it (Fewster, 1990, 2001). We are all impacted by our encounter in the in-between. Stuart argued that “the relationship is the intervention” (2009, p. 222) and a focus on the relational aspects of practice, as described here, helps to ensure that the CYC practitioner maintains this focus on the relational in-between. The understanding of the multiple identity dimensions both parties bring to that in-between space and the ways in which those identities can simultaneously intersect and compete, is central to how the relational dynamic unfolds.

As Fewster said, relational practice “is not only a very different perspective; it is a different pathway, across a very different terrain, in search of a very different



destination”. (Fewster, 2005a, p. 3). It is, as Krueger (2004, n.p.) pointed out “a way of being with youth in the lived experience” in which both parties must experience *relational safety* (Garfat, 2016) requiring an inclusive focus on what each bring to the evolution of the relational space. It is a focus on ‘how you are, who you are, while you do what you do’ (Garfat, 2013). Relational practice is a way of being in the world with others in which the focus is on connectedness, not individuation (Fletcher, 1998) or isolation while recognizing that each individual’s experiences can impact on how they are in the world and how they see themselves positioned in the world.

In the following, 25 characteristics of a Relational Child and Youth Care approach are identified, high-lighted and organised according to a framework we call BID – Being, Interpreting and Doing – which represents an effective foundation for describing the Child and Youth Care process of connecting to promote growth, change and learning (see, for example, Bristow, 2017; Freeman & Garfat, 2014). The BID sections should not be considered as sequential or linear but rather as inherently connected. For example, while I am Doing, I am also still Interpreting and Being. While at times there may be a greater focus on one element of this triad, the practitioner is Being, Interpreting and Doing at all times. The characteristics are conceptualized around the idea of the ‘purposeful use of daily life events’ which we see as central to, and the defining characteristic of, effective relational Child and Youth Care practice. Each of the other characteristics

*“demonstrate how this use of daily life events integrates into the larger CYC approach as well as describe the qualities of those who use daily live events effectively. The use of daily life events links to each of the other characteristics and unifies them in a structured system”* (Freeman & Garfat, 2014, 23-27).



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## Characteristics of a Relational Child and Youth Care Approach

The characteristics and descriptions which follow evolved through discussions, observations, readings, dialogues and other encounters with the field of Child and Youth Care practice, with a focus on the relational. They do not completely reflect, perhaps, how we would 'like' CYC practice to be. Rather they reflect a collective observation of aspects of the field as identified at the time of this writing. Thus, these characteristics represent an inherent tension, in as much as the field *as it is* has often limited itself to very particular mechanisms of inclusion that have inadvertently excluded many lived experiences based on race, gender identity, sexuality, disability and others. The characteristics nevertheless seek to take account of ways of being, ways of interpreting, and ways of doing that seek to be inclusive of lived experiences. We recognise that the field is evolving constantly and expect that these characteristics will become even more defined and expansive in the future.

The characteristics have been organised into three (3) groupings: Being, Interpreting and Doing. This framework (BIDs) evolved from the work of practitioners (Freeman & Garfat, 2014) as a way of thinking about the process of intervention within the field of Child and Youth Care practice. But we are also aware that while we are making bids for connection so, too, young people, when they are able to, make bids to connect with us. While young people sometimes cannot or are not able to make such bids for connection, we are constantly on the alert to notice them, however they might occur.

*“Together the three categories – Being, Interpreting, and Doing – form the acronym BID, highlighting the bids for connection that are at the center of our relational work. To make a bid is the act of making an offer for something. It is an old word dating from before the twelfth century and is defined as an “attempt or effort to win, achieve, or attract” (Merriam-Webster, n.d.) as in making a bid for reelection” (Freeman & Garfat, 2014, 25).*



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This framework for organisation highlights anchor characteristics in each of the three areas.

*“The anchor characteristics provide strength and support to the other characteristics within each category. Identifying anchors within each category offers practical guidance to those beginning in the field as they focus on their own development. It prioritizes, in a way, what might be an essential starting point in one’s personal growth and development. The three anchors in this framework include:*

- *Love – in the category of Being*
  - *Meaning making – in the category of Interpreting*
  - *Connection & engagement – in the category of Doing.”*
- (Freeman and Garfat, 2014, p. 26)

The following describes and articulates the 25 characteristics and their relevance in relational Child and Youth Care practice in today’s world.

## **Being**

*“Being in relationship means that we have what it takes to remain open and responsive in conditions where most mortals – and professionals – quickly distance themselves, become ‘objective’ and look for the external ‘fix.’” (Fewster, 2004)*

**Love** serves as a “prerequisite of healthy development” (Smith, 2011) and a lack of a basic love for others and a willingness to be stretched and grow in that love may be an indication of the need for an individual to consider a different field. (Freeman & Garfat, 2014, p. 26).



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*Love is inclusive* – regardless of who, or how, you are, you belong in this endeavor – if you are connected at all, you are a part of it. Extended family, community and community members, people of cultures different than the practitioner, multiple support staff, intimate friends, etc. – all are a part of this process of engaging in an appropriate response to the young person and family, based on this foundation of love. To be inclusive means to accept people for who and how they are while acknowledging that everyone brings to the relational encounter their own history and that history requires recognition, understanding, valuing and acceptance if we are to focus on the creation of relational safety (Garfat, 2016). It means “honoring differences and accepting diversity as a norm” (InclusionBC, 2018).

Inclusiveness also implies that while I invite other(s) to be a part of my experience (process) I also work to create the experiences where they will include me in theirs. Inclusiveness is a goal, often illusive and always significant. It requires that I, as an individual, attend to what helps the other person(s) feel included – how do they prefer to be identified, what is important to them, what would count as an inclusive gesture? I also must attend to how they need me to be in order to want to include me in their world of experience for, if inclusiveness is seen as a one-way street where I am the one ‘including other’, and not worried about them including me, then it is not a relationship based on equity (Marshall, 2017). So, one is constantly wondering ‘how do I need to be or what do I need to do in order for this person to experience inclusion?’ What effort am I applying to this end? The ‘what I have to do?’ may focus on my interaction and may also include ‘how to I need to act on our environmental context so that it expresses and invites inclusion?’ The practitioner recognizes that it may not be possible to be or to become what the young person needs. I cannot be Indigenous or Black or Transgendered if in fact I am white and cis-gendered. But the practitioner can extend the invitation to being with and doing with the young person even in the context of limitations presented by fixed identities. Inclusion is an interactive and an environmental consideration.



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Love, as Thumbadoo (2011) writing from a South African context argued, is present in powerful Child and Youth Care moments with (an) other. She asserts that love must be present when real connections are made between self and other. This is not, of course, a sexual love but a love of (an) other as a human being in the Ubuntu sense of “I am because you are”. Thumbadoo (2011, p. 197) further asserts that “caring and love intermingle in the encounters” between CYC practitioners and others”. While Thumbadoo writes from the South African context, her words are echoed elsewhere. Mark Smith (2011, p. 192), writing from a United Kingdom context, claims that “child and youth care – in contrast perhaps to other professions or aspiring professions – is irredeemably a practical, moral and relational endeavor. As such, it is fertile ground for the growth of love”. Whitfield has said that “love is the most healing of our resources” (1989, p. 133). Relational CYC practice is, in this sense, an act of love and loving – one holds others dear, one cherishes their being, and ultimately one acts in the context of love in a non-exploitative manner, accepting and honouring other for who and how they are. As Ranahan (2000, p. 57) said, when discussing love in CYC practice, “a more mature form of love, can exist in practice when we choose to include it, even in a brief moment of our connectedness with a child”. An edition of the Scottish Journal of Residential Child Care (2017) has also affirmed the importance, and role, of love in our field.

***Being in relationship*** is not the same as ‘having a relationship’. Everyone *has* relationships but ‘*being in relationship*’ means engaging with the other person in an intimate and profound manner which impacts both young person *and* helper (Gannon, 2008). A CYC practitioner recognizes that they engage in a relationship with a person where each has contributed to making that relationship what it is (Fewster, 1990), even when the young person may have first encountered the practitioner under the circumstances of someone else’s choosing (such as an involuntary residential placement). It also means engaging in relationships and being in these relationships with intention for whatever time is available.



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While being-in-relationship might well be a universal characteristic of relational CYC practice, *how* one engages in relationship and the meaning of such engagement will be influenced by the history, culture, identity, capabilities and other aspects of the participants to this co-creation of the in-between. Thus, when we make efforts to be-in-relationship with other we are constantly contextualizing our actions and understanding in terms of the attributes we each bring to this encounter. As we shall see when considering the characteristic of Meaning-Making, what counts as an inviting gesture to one person may be experienced quite differently by the other – constant reflection, therefore, permeates our attempts to work towards being-in-relationship with other(s).

Relationships are comprised of a history and that history continues to shape the relationship and our being in such relationships. Writing about UK social work practices with young people in care, Thomas came to similar conclusions about the importance children give to relationships including “the continuity of this relationship, reliability and availability, confidentiality, advocacy and doing things together” (2005, p. 189). As Fewster said, “Being in relationship means that we have what it takes to remain open and responsive in conditions where most mortals – and professionals – quickly distance themselves, become ‘objective’ and look for the external fix” (2004, p. 3). Being in relationship, then, means that you and I encounter and *be* with one another in the in-between between us (Garfat, 2008). Being in relationship requires that we are constantly reflecting on the intersectionalities of self and other(s).

***Being and participating with people in the everyday moments of their lives.*** Whether it is with a family in their home as they are doing dishes or playing soccer with a young person in the community park; attending a human rights rally with a person concerned about their community, or chatting with a homeless youth on the streets; whether it involves hanging out with a mother in jail, engaging an autistic student, or participating with a young person in a church activity – CYC practitioners involve themselves in all aspects of the daily life of the people with



whom they work (Fulcher & Ainsworth, 2006; Hilton, 2002; Smart, 2006). As Bristow (2017, p. 19) said, when talking about working with people with autism, being with people “as they live their lives can be as simple as checking in throughout the day, or it can involve a more thorough involvement in their lives”. Young people author their own narratives, their own stories that capture their experience of life (Gharabaghi & Stuart (2011) and the role of the CYC practitioner is to become a significant character in their stories wherever those stories unfold.

When a CYC educator, for example, encounters a student in the cafeteria, the CYC responds to the student from a CYC perspective. When a CYC practitioner on the street encounters a young person, that worker remembers to interact using the characteristics of a relational CYC approach. The worker attends, for example, to a young person’s relationships with the other inhabitants of their street life, their identity and the socio-cultural context that frames their identity. Central to a CYC approach is the idea that if people can change how they are (develop different or new ways of being and / or doing), in the minutia of their lives (Maier, 1979), then change will be more enduring, for their relationships are central to who they are and how they are in their world and the world of others. Being and participating with people as they live their life, where they live their lives, increases the potential for them to develop new ways of being in their everyday world. And we remember, always, that sometimes the necessary changes are not in how the young people are, but, rather, changes are needed in the world which surrounds them.

Partnering with young people to challenge the world as it is and as it impacts them in particular, is one core element of being with young people as they live their lives. For Indigenous young people, for example, living their lives means also living deeply embedded racism, many symptoms of exclusion and few opportunities to live the spirit of their cultures, their languages or their rituals. Practitioners recognize that in today’s world, enduring change requires enduring advocacy through committed partnership with young people, their families and their communities.



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***Hanging out*** means that some of the CYC practitioner's time is spent doing apparently simple, everyday (yet extremely important) things with people (Garfat, 1999). To an outsider, it may seem as though nothing is happening. A walk in the park or ritualistically sipping tea with a family; kicking stones with a young person; browsing through cyber-space, chatting in the corridor, wheeling someone along the street, or leaning on a street lamp chatting with a homeless young person – all may seem like 'doing nothing' when, in fact, these may be the most important of activities. During such moments and experiences of 'hanging out' one is investing in building relationships of trust, safety, connectedness, and professional intimacy. In this *hanging out* control and power are set aside by the CYC as much as possible; rather, it is more an encounter, simply, of people hanging out together hopefully in the context of the young person's life space. And this takes time – something often missed as finance controllers scan quickly through monthly and yearly accounts or supervisors review a 'shift report' of notable incidences. These are the very types of relationships which are necessary if the practitioner is to become a significant and influential person included in the life of others (House of Commons Select Committee, 2009; Redl, 1952).

***Hanging In*** means that the Child and Youth Care practitioner does not give up when 'times are tough', even if, as hooks (2000) pointed out, this may be the intuitive response. Rather, one hangs in and works things through, demonstrating commitment and caring for that child, young person or parents and family members (Gompf, 2003). The traumatized child or young person in a foster home who is struggling to follow expectations, the Indigenous youth struggling to re-connect with cultural traditions, the Syrian student who is struggling to grasp a North American custom, the parent from another country who struggles with learning to parent according to 'expectations and demands' of a new culture, the research subjects who find it difficult to appear for interviews, or the person with a 'disability' trying to be in the world with others unable to see beyond the 'disability' and, therefore, do not engage with the full person – for CYC Practitioners these



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are all signs of the need to hang in. Sometimes things are ‘tough’ for the young person, sometimes for the practitioner and sometimes for both but hanging in means not giving up.

It requires that one be patient and move at the other’s pace rather than the practitioner’s own pace (Fulcher, 2006b) or the expectation of the program or service model. As a practitioner, for example, reaches out to connect with someone who has a history and context which warns against immediate connection, the practitioner also needs to hang in and not become frustrated while exploring new or culturally different ways of making that connection.

Equally, when times seem ‘good’, the practitioner does not automatically assume that ‘all is well’. Steckley and Kendrick (2008) highlighted implications associated with ‘*holding on*’ while ‘*hanging in*’; signaling the importance trauma sensitive forms of physical restraint as extreme examples of this characteristic. One must recognize that when the times are good, set-backs may be just around the corner. After all, learning and change, indeed healing, take time effort, practice, and learning from feedback.

***Working in the now*** means that the Child and Youth Care practitioner remains focused on the ‘here and now’, on what is happening in this moment between the practitioner and the other person (Freeman, 2014; Phelan, 2009). This allows the practitioner the opportunity to enhance their ability to “recognize and respond to behaviors as they are occurring” (Freeman, 2014, p. 14). Such an orientation on the present arises from the assumption that ‘we are who we are, wherever we are’ and that we bring our whole selves to every interaction. At the same time, this orientation to the here and now does not negate our continuous awareness of structural and systemic contexts that may contribute to individuals or families engaging in behaviours as reasonable and necessary defense mechanisms against racism, generational trauma, marginalization, exclusion and oppression.

In the present, one carries with them the past as well as expectations about the future (Winfield, 2005). If a person can change their way of being with another or



other(s) in the present, so too can they generalize that way of being to other situations in their life. Past experiences can become even more important learning cues in the here and now. Similarly, expectations about the future or future consequences can also change through new lived experiences in daily life events as they happen.

***Counseling on the go.*** Unlike in other forms of helping, a Child and Youth Care practitioner does not normally meet with someone for a counseling session at a scheduled time and place (although that occasionally does happen and can be valuable). The counseling which occurs between a CYC practitioner and the other(s) typically occurs through fragmented but connected interactions, trusting that the ability of the other and the skill of the CYC practitioner will continue to connect such moments together into a coherent process (Krueger, 1999). Some refer to this CYC characteristic as ‘life-space counseling’ (Redl & Wineman, 1952). Here we notice the important role in which each relationship history impacts on present and future prospects for facilitated learning. As Mann-Feder (2011) explains, these moments of connected interaction are often more powerful than traditional approaches to ‘talk therapy’ precisely because they happen in moments of movement and activity when motivation to learn and try new things is high and relevant

***Flexibility and individuality*** refer to the fact that every person and family is unique. Each person brings to the relational encounter a history of previous life experiences which may include relationships of pain, a history of oppression, positive encounters with adults, feelings of worthiness or unworthiness, experiences of racism, and the list could go on forever. What is important is that the practitioner recognizes that all these previous experiences are an important part of the context of the encounter and are a part of what influences, self or other, the person in their present context. Even historic trauma, racism, or abuse accumulates and can impact the present moment for an individual or family. The



effective CYC practitioner is aware of this dynamic and adjusts their approach respectfully.

All of one's interventions must be tailored to fit the person and/or family as the practitioner understands them (Michael, 2005) and has learned about, and from, them. This means that the CYC practitioner is flexible in their interactions with each person, recognizing that there is no one approach or intervention which fits for everyone, or applies in all situations. Just because the last time the practitioner intervened in a particular manner when engaging with a person from a culture different than the practitioner's, and that action was successful, does not mean that all people from that culture will respond in the same manner. All people, in their unique cultural context, are different and individual. Just because one young person liked a joke when they were in pain, this does not mean that another young person will respond likewise (Digney, 2007). As deFinney, Loisselle and Dean (2010, p. 72) said, we always must take account of "the intersecting effects of gender, race, sexuality, (dis)ability, and age formations, among others". Just as CYC practitioners are individuals, so it is for everyone with whom they work. Thus, CYC practitioners must be ever flexible, preparing to modify their approach and way of being as appropriate with each unique individual they encounter. From this flows the contemporary reflection that 'one size does not fit all' (Naidoo, 2005) and any intervention must be considered in the light of both individuals specific history and current identity. This identified way of being with others is a unique contribution which CYC practitioners bring in supporting children, youth and families in today's world.

## **Interpreting**

*Meaning making is the process through which each of us – worker or child – interprets everything else including, for example, what constitutes a strength of character. (Freeman, 2013).*



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**Meaning-Making** refers to the process a person goes through in making sense of their experiences (Garfat, 2004b; Steckley & Smart, 2005). An action occurs – one interprets it according to their own way of making sense of things – and then acts according to that perception. The other person in any interaction does exactly the same. Thus, two people may respond very differently to a simple gesture because of what it means to them. What is important is not ‘what one meant to say or do’ but how the practitioner’s words or actions are interpreted by the other person. Saying hello, for example, to one young person on the streets may be interpreted as a gesture of inclusion, while to another it may signal betrayal. A male offering to shake hands with a woman of one culture may be interpreted as a gesture of equality, while to a woman from another culture it may signal invasion and disrespect. Things mean what they mean to the individual. Most of us behave in a manner which suggests that ‘our way’ of seeing the world is ‘the right way’ of seeing the world, and this is just not true. The CYC practitioner must guard against this unfortunate human tendency.

The process of meaning-making is influenced by many factors and just as the practitioner must be concerned about what influences the young person’s process of meaning making, so must the practitioner reflect equally on their own. How, for example, might a white middle class Canadian male, be influenced in the process of making meaning by a history of privilege or upbringing in the cultural context of a white euro-centric family history which includes the colonial history of perceiving self as the savior or hero ‘protecting and saving’ others? As Brokenleg said: “Our worldviews are shaped by our cultural and family attachments. Each of us drags around our cultural tail, a thousand years long as well as our more personal family tale (1998, p. 139) and “the way we and others see the world and make meaning in part is determined by the rituals, traditions, views and beliefs of our culture and families” (Krueger, 2006). Meaning making is central and inherent in every interaction we have with another person.



**Examining Context** requires one to be conscious of how everything that occurs does so in a context unique to the helper, the other, the specific moment of interaction and the history of such interactions (Krueger & Stuart, 1999). Some elements of context may be the same such as national and regional policies, political environment, agency philosophy, regulations, or the physical environment. Even when elements of context are the same, however, how these are experienced may differ substantially, especially when elements such as racism, exclusion or marginalization are considered. Other elements of context (e.g., cultural traditions, trauma histories, personal experiences of being cared for, previous relationships with adults, developmental stage, specific capabilities) vary with the individual interactions between CYC practitioner and the other person (Fulcher, 2006a). The interaction, for example, between a university student and a CYC instructor is contextualized by the meaning of education to both participants, the power in the relationship between the two as well as the power dynamics perpetuated by the institution as a symbol of dominant classes, racial, gender and other hegemonies. The structures and expectations of the university, the philosophies about education and many more things impact on the moment of interaction. Thus, no two contexts can ever be the same and the CYC practitioner is constantly examining all these elements so as to understand and engage with the moment more fully. Relational practice which does not include an awareness of the specific context of the multi-layered, lived experiences of others is insufficient (Munroe, 2017) for effective CYC practice.

**A Needs-Based Focus** assumes that everything one does, is done for a purpose (Hill, 2001). That purpose is to meet personal or social needs, although one cannot assume that everyone is constantly aware of what need they are trying to meet. As CYC practitioners, the task is to help people identify their needs and to find more satisfying ways of meeting them. When one helps a person to find a different, more satisfying, way of meeting a need then the previous way of meeting the need (usually an undesirable behaviour) is no longer necessary (Maier, 1979). Thus, it



becomes easier for that person to let go of such behaviour. The young person who belongs to a gang may be meeting the need for belonging. A partner having an affair may be meeting the need to feel valued. A young runaway may be meeting a need for safety. The student who 'acts out' in class may be meeting a need to be noticed by others.

While there are many frameworks which purport to identify human needs, a needs-based focus addresses human needs with direct and clear language (e.g., a need to be noticed or cared for, a need to matter to someone, experience connection or safety). Existing models of basic needs inform rather than limit such application.

**Strengths-Based.** The Child and Youth Care practitioner is positioned to seek out the strengths of the other(s) in whatever context they are encountered. It is, in fact, a primary task of CYC practitioners (Freeman, 2013). The practitioner admires, for example, the resilience of street youths and their ability to survive in a dangerous world. The practitioner identifies strengths in families who think all is lost and appreciates and rejoices in a student's determination to master a difficult concept or the autistic child's efforts to communicate. This focus on strengths and resilience enables others to also experience themselves as competent and worthy (Brendtro & Larson, 2005). Quite often this may represent the beginnings of a new experience of self for many of the children and young people with whom CYC practitioners work. Gilligan (2009) claimed that resilience is about doing well in adversity. As CYC practitioners reframe their thinking towards a strengths-based orientation, not only do they support the resilience of the children and young people with whom they work, they are also empowered themselves.

**Developmentally Responsive Practice** means that the Child and Youth Care practitioner attends to the relevant developmental characteristics of each individual (Fulcher & Garfat, 2008; Maier, 1987). Rather than simply reacting to their behaviour, the practitioner responds to the person's needs in a manner which is



proactively consistent with their developmental stage and needs (Small & Fulcher, 2006). Here one considers development not from a chronological perspective but rather from a capacity perspective. This enables the practitioner to consider each person as an individual with strengths and challenges in different areas since nobody develops consistently across all areas of their potential. When thinking of families, the practitioner also considers their developmental stage and potential, recognizing that not all families develop according to some predetermined plan and that the concept of development commonly differs across cultures. In fact, quite differently than in traditional developmental psychology, the CYC developmental perspective is focused on confidence building around the demonstrated capacities of the young person or a family or even a community in order to aspire to further accomplishments. In this way, the CYC practitioner can operate from within a framework of neuro-diversity, and the many different ways in which developmental process is articulated and critiqued across traumatized, racialized and gendered communities.

***It's All about Us*** refers to the fact that, ultimately, interactions with other people are profoundly influenced by who CYC practitioners are themselves, As Burford and Fulcher noted there is “an important interplay between the diagnostic characteristics of residents and the patterns of staff team functioning found in any residential group care centre” (2006, p. 202-203). It is only through a deep and active self-awareness that the practitioner can be reassured that their actions are in the interest of the other(s) and not simply the CYC practitioner meeting their own needs, or that working over any length of time with particular young people may impact directly on a practitioner’s actual state of being (Mattingly, 2006). ‘It’s all about us’ also refers to the fact that one is not operating alone. The plural pronoun ‘us’ refers to everyone involved in helping another person grow and develop. This holds for all CYC practitioners, whether their titles be Foster Carer, Kinship Carer, Birth Family member, Young Person, Social Worker, Teacher, Therapist, Manager, Play Group or Youth Group leader, Peer Mentor, Distant Relatives, Clan



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or Tribal members, etc., Each has a role to play. The more everyone is working together, unified and not ‘us and them’, the more successful everyone will be in supporting developmental outcomes for the people with whom we work. Abraham (2009) refers to this as ‘Team Parenting’. Milligan and Stevens (2006) spoke about this as collaborative practice. It is thus argued that the CYC approach is holistic, ecological and inclusive. Ultimately, “We’re all in this together!”

**Family-Oriented.** There was a time when family was not considered to be an important part of the Child and Youth Care field. Indeed, CYC workers were often encouraged to think of family as ‘the enemy’ – the cause of the problems of the child or young person with whom they were working (Shaw & Garfat, 2004). Now CYC practitioners recognize that family is important (Ainsworth, 2006). Families – including extended family members, clan or tribe – are ever present. The student in the classroom carries the expectations of family and extended family members. The young person on the street carries ‘family’ – even if only the ideal family – in their head. Many youths also choose their family, selecting those who are meaningful to them. Families with whom CYC practitioners work are not only present but so, too, are the families and extended families of the parents. Families may exist or be imagined in local geographies (and therefore be physically accessible) or in distant and even transnational spaces, with many intersections of language, family rituals and traditions, and social values. Also present are the family and extended families of the CYC practitioner, whether working the floor, or engaging in supervision. The competent practitioner is ever mindful that there is no such thing, really, as helping in the absence of family and extended family members. This is because family – in whatever form or tradition – is always with us and also with each person the CYC practitioner encounters (Garfat & Charles, 2010) and that ‘family’ is best identified by whom the young person identifies as family, not by the traditional cultural norms.



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**Reflection** is the process one goes through when thinking about one's work: What have we done? What are we doing here? What might we do in the future? How is my history impacting on the current situation? How have traumatic experiences in the past impacted this current interaction? What biases am I holding, consciously or unconsciously, which may be of importance here? How is the power I hold (e.g., as a result of my professional position, privilege, economic means, gender identity, abilities) impacting the current circumstance and how is the power of the space I am in impacting me? The effective helper is a reflective helper, always contemplating whether there are better ways, or how one might do things differently (Winfield, 2005). As the practitioner intervenes in the moment, they are questioning why they are doing what they are doing. After the intervention is over, the practitioner reviews why they did what they did. In preparing for the next intervention, one might ask: 'Why am I thinking of doing this?' 'What is influencing me to think like this?' or 'How might my various actions be interpreted by the other person(s)?' This continuous process of reflection before, during, and after an action (Schon, 1983) helps the CYC practitioner to stay constantly focused, in an ongoing way, on acting in the best interests of the other(s).

## Doing

*"Professional involvement is about doing with intention."* (Ricks, 1992)

**Connection and Engagement** builds from the notion that if someone is not connected with another, and/or if one cannot engage with them in a significant and culturally meaningful manner, then the practitioner's interventions cannot be effective (Garfat & Charles, 2010). It is unacceptable to blame the 'other' when they are nonresponsive; it is the practitioner's obligation to work towards making the connection. All too often, a failure to connect or engage gets rendered as a diagnostic justification for 'what's wrong with the other person'. Relationship is the foundation of all CYC work and connection is the foundation of relationship



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(Brendtro & du Toit, 2005). The practitioner connects with the person, and then engages with them as they live their lives. Helping a young woman nurse her child, assisting parents to prepare the garden, teaching a young person to shoot a basketball, helping a new immigrant to navigate the health and welfare systems, combating oppressive practices, etc. – all such engagements are powerful when one is connected in relationship *with* another and sometimes with community.

**Rituals of Encounter** require that Child and Youth Care practitioners give conscious reflection to the ways in which they engage with another. This involves giving respectful attention to important protocols associated with engaging with someone from cultural traditions that are different from one's own (Fulcher, 2003). It also means paying attention to one's own positionality, particularly when practitioner and young person represent different races, faith groups, gender identities, etc. Simply trying to understand, as well as contemplate different relational starting points can present major challenges. One's own personal experiences of acculturation and socialisation impose taken-for-granted assumptions and a cognitive mindset that is not easily altered. Rituals of encounter between practitioner(s) and children or young people have developed through cultural protocols. The meaning a young person gives to culture – including youth group or gang culture – is constantly evolving as they seek to understand and adapt to their current situation and any new living environment or experiences. Each encounter requires that a cultural lens be included in a CYC practitioner's basic competencies. Like transitional objects, rituals of encounter strengthen purposeful communication. And for each person, from each culture, it is unique.

Ritual is important to identity formation and to our existence as social beings. From daily routines to the ways we meet and greet each other, rituals place us with one another, bringing us together by framing shared experiences; helping us to recognize self in each other. Rituals can also be a way of showing *resistance to injustice*, a way of contesting power through a public celebration of common purpose (Snell, 2017)



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**Intentionality** means that everything a Child and Youth Care practitioner does is done with a purpose (Molepo, 2005). There are few ‘random’ actions or interventions. It means thinking consciously about *what is required for the other to be comfortable* with intentional attempts at making connections. All the practitioner’s interventions are planned and fit with the regularly reviewed goals established with the young person and/or their families. When a community-based CYC practitioner meets with a family in their home, it is important to decide how each individual will be greeted on arrival, who will be greeted first and how one will be with them. All of these decisions, as a reflective practitioner, take into consideration the similarities and differences between the practitioner and other – culture, race, identity, place in the world, etc. A CYC practitioner facilitating a training program, for example, needs to decide how the group will be greeted, how individuals might be singled out for attention, how the practitioner needs to open themselves to the differences between themselves, as the trainer, and the identities of the participants. No matter where CYC practitioners work, what they do is always intentional and contextually considered. This does not mean that one abandons spontaneity. But even in the moment of spontaneity, the practitioner continues to reflect on their intention(s) in the moment. As Ricks, 1992, p. 56) said, “the intentional involvement in intervention requires that the worker be thoughtful and have clarity of purpose in determining “what to do before doing it”. This is the core of reflective practice.

**Meeting Them Where They Are At.** Meeting people ‘where they are at’ (Krueger, 2000) involves being with people where they live their lives but also more than that. It means accepting people for *how they are* and who they are as we encounter them in their lives. They may be ‘different’ from us and we must honour and adapt to that difference. It means responding appropriately to their developmental capabilities, accepting their fears and hesitations, celebrating their joys and enabling them – without pressure – to be who they are in interactions with others (Small & Fulcher, 2006). It also means that we must be open to their



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suspicions of us, their perceptions of how we are different, and their hesitations to engage or be engaged. Young people and families from traumatized, racialized or transgender communities have good reason to be weary of anyone presenting themselves as ‘helpers’. This is important (and perhaps even more so) when the ‘differences between us’ make us afraid or uncomfortable. As Krueger said, we must be “geared to their emotional, cognitive, social, and physical needs” (2000, n.p.). Just as a forest guide must meet others at the beginning of their journey, so does the CYC practitioner meet the other “where they are at” as they begin the journey and then move on together from there. Meeting people where they are at also requires that the practitioner be aware of the circumstances that brought them there.

**Purposeful Use of Activities.** Phelan (2017) has argued that one of the essential tasks of Child and Youth Care practitioners is to arrange experiences for people. The practitioner arranges “experiences that promote the possibility of new beliefs for the people we support” (Phelan, 2009, n.p.). The practitioner attempts to facilitate learning opportunities in the everyday. Such learning opportunities and the purposeful use of activities enable children and young people to experience safer places where new experiences can happen, and important learning can be nurtured. One learns about and takes into consideration a person’s previous experiences in anticipation of how new experiences might offer the potential for growth (Phelan, 2009, n.p.). For example, someone who has never experienced being cared for may experience this through a learning opportunity and planned experience arranged – even engineered – by the CYC Practitioner. As Karen VanderVen (2003) has said, the purposeful making of a water bomb with a balloon or making a meal together can change a life.

**Doing ‘With’, not ‘For’ or ‘To’** refers to how CYC practitioners engage with people, helping them to learn and develop through doing things *with* them. In this way we do not deny them the prospect of learning and growing through doing



everything for them, especially when they are capable of doing it themselves (Delano & Shaw, 2011). Nor does one stand back and do things to them (such as ordering them about). Ultimately one remains engaged 'with' people through the process of their own growth and development, walking alongside them as a guide, acknowledging their similarities and differences. This process of 'doing with' requires the practitioner's ongoing commitment to the co-created space between practitioner and other, monitoring the changing characteristics and experience of that co-created space (Phelan, 2009). Whether it is in supervision, with a family in a rural garden, or engaging in any other activity – the constant focus is on being and doing *with* the other. As Al Triesman suggested in 1982 (n.p.), "When we do things to youth and not *with* them, it is not going to work so well".

The foregoing is not meant to imply that there are never times when we do things to, or for, young people and others. There are times and situations when a young person, for example, may not have the physical ability or capacity to do everything with the CYC practitioner. In these situations, the practitioner may indeed do some things 'for' the young person, while still being engaged *with* the young person, but only to the point where the young person is once again able to engage *with* the practitioner (dressing oneself comes to mind as an example). There are also times when it may be appropriate to do 'to' the young person – for example in situations of imminent and serious harm to self or others. However, always the goal is to return to a state of 'doing with' as soon as possible.

*Doing with* implies that we are engaged with them, even if we are doing something for them, which means that our doing for them is done in an agreed engagement. Indeed, if we have been engaged in doing *with* them, before the need to 'do to' arises, then *our doing to is in the context of doing with* and likely makes the process easier.

Independence – or perhaps better stated as inter-dependence – is a goal for many young people who want to live on their own. Doing with, for, or to is inherently tied to assessing and responding to developmental process and growth and individualized in each interaction of caring.



**Rhythmicity** refers to the shared experience of engaging in a synchronized, dynamic connection with another (Krueger, 1994; Maier, 1992). Rhythms of coming and going, rhythmic rituals of acknowledgement, patterns of play amongst children, simple repeated gestures of greeting at the door of the family home, special handshakes on the street, or with a teacher on entering the classroom – all are examples of the rhythms in which one might engage and experience with people. Connecting in rhythm with people helps to nurture and strengthen connections and a sense of ‘being with’ that person. We pay particular attention to the rhythms that acknowledge the ways of being and doing of young people, their families and communities, especially when working across racial, gender or other identities. While working, regardless of location, a child and youth care approach invites one to pay particular attention to the rhythms of that person’s, or that family’s life, thereby strengthening opportunities to enter into rhythms of connectedness and caring with them.

**Being Emotionally Present.** Mark Krueger was perhaps the greatest advocate in the CYC field for ‘being present’ (Krueger, 1999). Whether with children, young people or adults and families – being present remains a central feature of how CYC practitioners work. While difficult to describe, being present is an experience most will have had with another and in relations with other(s). Intentional presence is a core element of relational practice; the space in-between us cannot emerge, much less be recognized, unless we are present. At the same time, presence is not contingent on the practitioner’s physical presence; we can be present virtually in the emotions, the imagination, or the mental constructions of the young person. No matter how we are present, it This involves allowing one’s Self to be in the moment with the other or others (Fewster, 1990). At some level, of course, one is always ‘present’.

But ‘being present’ in the relational sense involves the Child and Youth Care practitioner making a conscious effort to make her or his ‘Self’ available and self-evident in the moment, focusing with immediacy on the other(s). When I am with



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you, I am with you and not somewhere else! My thoughts and affections are connected in being with you in this moment. When I am unable to be physically with you, I leave in your presence a symbol of me, which could be what Henry Maier (1981) had termed ‘a transitional object’. Ricks (2003) has argued that one of the most important aspects of relational practice is for the practitioner to be present with the other while simultaneously being present with self. She called this active self-awareness. As Ranahan (2017, p. 4) noted “when present – or presencing – child and youth care workers are fully implicated in the process in moments of naming and making visible silenced experiences”.

***Using Daily Life Events to Facilitate Change.*** Relational Child and Youth Care practice involves using the everyday, seemingly simple, moments which occur as CYC practitioners live and work with people to help them find different ways of being and living in the world (Maier, 1987). These moments – as they are occurring – provide the most powerful and relevant opportunities for change. Whether it be an opportunity-led event (Ward, 1998) with a child in a residential program or foster home, a life altering moment in working with a family (Jones 2007; Shaw & Garfat, 2004), a brief encounter with youths on the street (Apetkar, 2001), or a simple exchange in a rural college classroom (Shaw, 2011) – the moment, and its potential for powerful change, is seen as central to a CYC approach. Child and Youth Care practitioners are defined in their work by the way they make use of these moments.

## **Conclusion**

The field of Child and Youth Care has expanded beyond its origins in residential child care to encompass youth work and a wide range of practices within child and youth services. Child and Youth Care practitioners are found everywhere – from the most isolated rural Isibindi projects in South Africa, to the halls of college and university academia. Practitioners can be located using a CYC approach from the streets of large urban cities to isolation wards in children’s hospitals; and from the



tundra of northern Canada to the mountains of Bulgaria or Borneo. It is a worldwide practice – especially across the English-speaking world that parallels the European tradition of Social Pedagogy.

Child and Youth Care practitioners can also be found working in non-English-speaking places where political and economic histories may have introduced English patterns of health and social services administration. This includes places that are looking to ‘English-speaking countries’ for examples (for better or worse) of best practice in the delivery of health and welfare services for children, young people and their families. The activities of international non-governmental organizations have also contributed to the extension of Child and Youth Care approaches through recruitment of health and welfare personnel to provide care for children, young people and families in the so-called global South.

Experience in the field shows that a Child and Youth Care approach may find ready applications in direct care work with people of all ages across the life span of development, and in all settings (see VanderVen, 1992). As noted from the beginning, a Child and Youth Care approach represents a way of being and working in the world. Fundamentally, it is, about how one does what these practitioners do, not a question of what the practitioner is called or where they are located. It is this type of relational approach which gives us hope and the opportunity to be among the most influential of healers and caring individuals in a child or family’s life.

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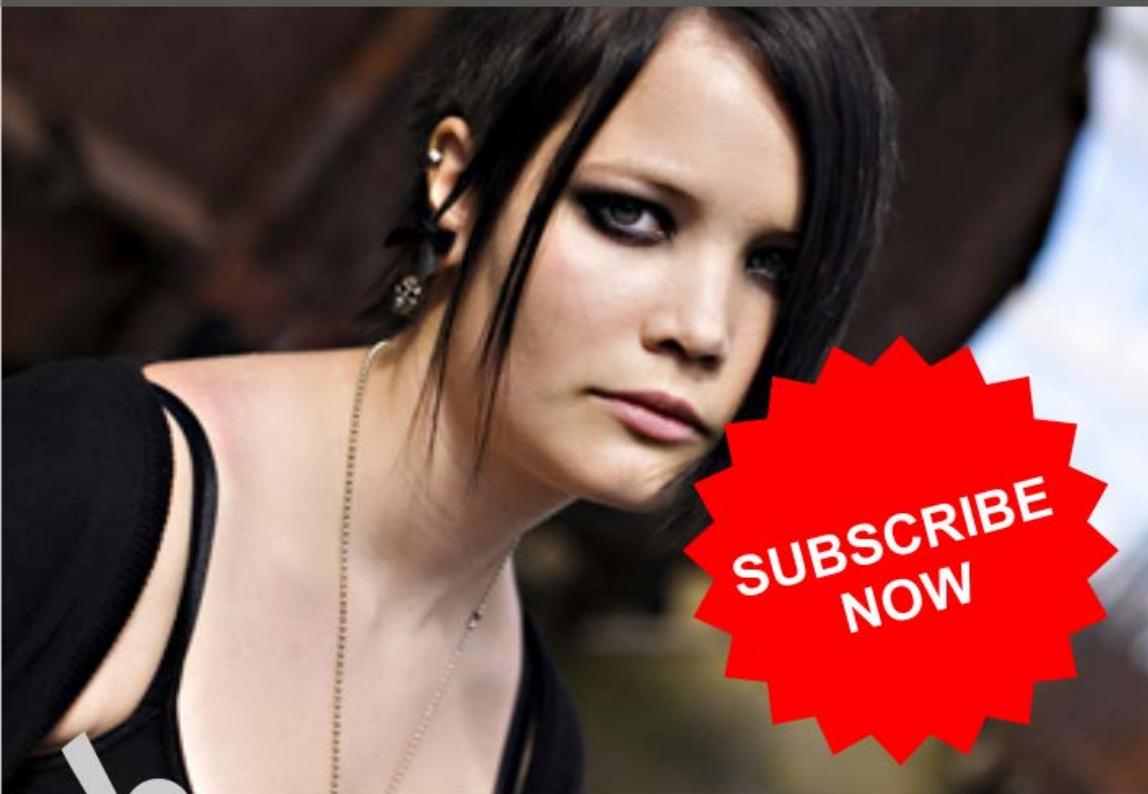
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# Power is Naturally Fearful for Supervisors Too

Jack Phelan

Thinking about power and how it is an everyday dynamic for supervisors is an uncomfortable, but important developmental issue. Just as power is a threshold concept for CYC practitioners (see August *CYC-Online*), it is also a threshold concept that, when understood, creates a major shift in the supervisor and her/his capacity to become professionally competent. Exploring how power is both a necessary ingredient in supervisory capacity and a major impediment to supervisory sophistication, is the focus of this month's column.

When a competent and successful CYC practitioner becomes a new supervisor, there are some startling and awkward realities that suddenly need to be confronted. CYC colleagues become distant and suspicious because you are now part of the management team. You are no longer invited to socialize after work with the workers and feel alienated from your former support system. You also quickly realize that you know little about managing the details of your new position and feel unsafe with colleagues and superiors. This competence anxiety is similar to the uncomfortable reality for new staff who feel overwhelmed by the demands of life space work.

Newly appointed supervisors have some predictable behaviors; they have to become impersonal interacting with their staff because relationships are now awkward, leading to feeling manipulated to do favors for former colleagues, so now boundaries need to be strong. The anxiety about managing adults creates a need to focus on behavior and external control of staff, resulting in micro-managing too often. New supervisors want to clarify deadlines for reporting, schedules and



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written log expectations, etc. and this creates friction with experienced staff members who resent the control. Capable staff members become passive aggressive in responding to this micro-managing, which builds more anxiety and leads to greater emphasis on control attempts for the supervisor. Less experienced staff welcome this external control because they want to be told when and how to perform, but it drives capable staff crazy.

So new supervisors have three basic challenges to meet; becoming comfortable in their new authority role, managing relationships by being fair and unbiased with each staff member and learning how to manage the behavior of adults without being too intrusive. It should take about one year to develop the expertise to manage people well, which is mostly learned through on the job experience. This stage of being a supervisor is accomplished by learning how to handle the power of having authority without power becoming detrimental.

There is little emphasis on professional expertise development during this developmental stage. In fact, supervisors who are functioning at this level are managing people without really using their specific professional expertise. There are CYC programs which have supervisors from non-CYC backgrounds who function well when this is the expectation of them. In reality, newer staff, with little experience need an external control approach for the first year of practice, but need relational supervision to transition from this behavioral focus when they are ready to grow.

This is where thinking about power and reflecting on relational dynamics becomes a threshold concept that radically affects the professional effectiveness of supervisors. After about a year, supervisors should be realizing that the real goal of a supervisor is to support people to choose to be competent and professionally motivated. People can be supervised in a manner that creates a personal desire to be capable, rather than doing good work because the supervisor is watching. External control efforts are now seen by the supervisor as needing to be reduced and eventually eliminated with more experienced, capable staff.



Just as mature CYC practitioners realize that external control is not indicated in relational CYC approaches, so too the supervisor realizes that if he/she is to create and support relational practice, then the supervisor also must use relational ideas. Youth and families always believe that they know themselves and their needs best, and effective practitioners respect this and maintain this “one down stance” when they interact with people. So too good practitioners believe that they know better than the supervisor (who is removed from the real action) how to perform, and effective supervisors realize that the power of authority is not helpful in supporting these practitioners. Professional supervision involves teaching and motivating people to learn more about CYC theory and practice and supervisors become more skilled at this focus during the next three years of supervisory experience. Supervisors who remain stagnant as managers of behavior do not get to this level and really do not create professionally focused practitioners.

After four or five years of experience, supervisors realize another level of awareness about power, becoming able to mentor fully developed practitioners without needing to teach or motivate them in any specific manner, but to create a relationship of equals that anchors and sustains mature practitioners so that they continue to develop excellence and skill throughout their careers.

The true power of professional CYC supervision is to have little to no need to be powerful, using relational dynamics with each staff member, based on their individual development and expertise. The awareness of this threshold concept about power is not a natural development, since many supervisors get stuck in management ideas and control approaches. Anxiety about liability and potential missteps can block new and experienced supervisors from becoming more relational, so they need support and vision to continue to grow and learn.



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# RESIDENTIAL CHILD AND YOUTH CARE IN A DEVELOPING WORLD

Tuhinul Islam and Leon Fulcher  
Editors



**Residential Child and Youth Care in a Developing World** builds from a critique of Courtney, M. E. & Iwaniec, D. (Eds). (2009). *Residential Care of Children: Comparative Perspectives* (Oxford University Press) which evaluated de-institutionalisation policies in the residential care of children in 11 countries.

It also builds on the comparative efforts of Whittaker, del Valle & Holmes (2015) *Therapeutic Residential Care for Children and Youth: Developing Evidence-Based International Practice*. We started from an intellectual claim that residential child and youth care “places” exist everywhere – whether called homes, orphanages, schools, centres or institutions. Unlike Courtney & Iwaniec or Whittaker et al, we include private boarding schools, madrassa and other religious learning centres in our definition of residential child and youth care. Residential establishments involve any building(s) (and sometimes tents) where children or young people are brought together to live in shared community life spaces for given periods of time, whether as refugees of war, poverty, disease, abuse, famine or natural disaster.

**Residential Child and Youth Care in a Developing World** captures some of the challenges and changes faced by residential child and youth care workers in 83 countries – places that rarely feature in the international literature. Each contributor has highlighted challenges and opportunities facing residential child and youth care in their own country’s.

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# The Force of Water

Hans Skott-Myhre

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Living here in the southern United States, hurricane season is always a time of vigilance. Watching the development and progression of hurricanes as they shift and change, becoming more or less powerful as they approach human habitation. The nature and force of hurricanes appears to be changing like so much else in the ecology in which we are imbedded. Hurricanes are becoming more intense and frequent. Their duration is increasing along with the amount of rainfall they bring with them. All of this is of considerable concern to the future generations we in CYC engage in our daily work.

Very probably, I should be writing a column that points out the sheer irresponsibility of CYC's weak engagement with the devastating impacts of climate change and other forms of ecological degradation. While we wrestle with the effects of a deteriorating social with our trauma informed approaches, mindfulness techniques, life-space interventions, self-care and so on, the living environment in which young people live is becoming increasingly inhospitable and toxic. And as a field, we are doing very little or nothing about it, other than trying to get young people to feel a bit better about themselves as they traverse the coming ecological abyss. But that is not the column I am writing today, although perhaps it ought to be.

Instead, I want to write about water, or more specifically, the force of water. I grew up in Seattle and before climate change, we could count on being surrounded by water. It was in the lakes, the Pacific Ocean, and in the sky with pretty constant rainfall of varying intensities. The joke was that if you were born and raised in Seattle, you developed webbing between your toes.



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Water was a constant. Most of the time it was an innocuous, if pervasive part of daily living. However, there were occasions when there would be a typhoon that would take the roof off our house or a flood that would erase a section of highway. Those occasions were few and relatively non-catastrophic. Water was just a part of growing up, along with gray skies and a certain low-level hobbit like melancholy.

It was when I moved to Northern California that I truly experienced the force of water. I had moved to a small little hippie town on the coast north of San Francisco with my very pregnant partner. We were awaiting the impending birth of our first child and were quite pleased to have found a rental we could afford about a block from the beach. I had taken a job in the East Bay at an inpatient psychiatric unit about an hour and half commute away around the north edge of San Francisco Bay. It was my first day on the job and I woke early to rain. Being from Seattle I didn't think anything of it and headed out in the pre-dawn darkness excited to see what my new job would be like.

As I headed up the coast highway, I began to notice what looked like small streams crossing the highway. I plowed along in my Volkswagen bus as they got deeper and deeper. My anxiety began to creep up as the rain increased along with the depth and strength of the water crossing the road. Finally, after about a half an hour I arrived on the edges of Point Reyes Station to find my way blocked by what had become a lake covering the highway and the surrounding countryside. I noticed the cars on the other side were not attempting to cross and wisely I followed their lead.

Turning around I headed back, in what was still pre-dawn darkness. By now, I was really a bit scared and nervous about the increasing depth, width, and strength of the water crossing the road. But I didn't want to leave my pregnant partner stranded alone in this crazy weather, so I plowed on. By the time I made it back to town I was truly shaken. As I crested the hill above the little town we lived in, I breathed a sigh of relief. Finally, safe and sound and a few blocks from home. It was then that I noticed that the town was under water up to the roofs of cars parked on the street.



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It turned out the heavy rains had coincided with an abnormally high tide surge. I could see our house, which was fortunately on a hill above the flood, but there was no way I could drive to it. I mustered up my courage and headed down the hill on foot into the flood waters determined to get home. This was all well before cell phones and so I couldn't reach my partner and tell her what was going on and I didn't want her to be alone, pregnant and worried about me. So into the water I went. In retrospect it was quite a foolhardy thing to do. The tide had currents that could have easily swept me out to sea, but I didn't know that at the time. I waded for about fifteen minutes in chest high water until I got to the house. I made it and after a hot bath and some deep breathing, I calmed myself down from what was truly a terrifying encounter with the force of water.

The combination of high tides and heavy rain cut the peninsula on which our little town was situated off from the mainland for about a week. We were suddenly an island accessible only by boat or helicopter. The main coast highway was also closed due to mudslides and so even if we could have reached the mainland, there was nowhere to go. We watched the Coast Guard helicopters fly overhead and wondered if we were going to have a heli-birth. As it turned out, the water receded, the highway reopened, and our baby didn't arrive until all of that had taken place and was born safe and sound at San Francisco General Hospital.

I recently got thinking about water and its force, as I was talking with one of my students and his graduate committee about effective modes of political action under late stage capitalism. The conversation had turned to questions of how to resist or revolt against global capital, both systemically and in CYC practice. Not surprisingly, I had been mulling these questions over in my mind as I edited the latest issue of *CYC-Online* on Radical Youth Work. I thought that if we were to take the charge of radical youth work as the development of projects and practices that promote youth and adults working together towards common purpose, then the question of tactics becomes a paramount concern. It is almost trite to say, but somehow often omitted, that tactics must be responsive to the actual material conditions of one's own historical moment. In other words, whatever we do must



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be responsive to the actual configuration of the system we are attempting to influence. Because capitalism is a logic that thoroughly saturates our global society from the smallest components to the largest, our tactics need to operate at both the micro and the macro level.

It is Foucault, who reminds us that all politics originate as micro-politics. That is to say that although capitalism appears to produce the world from the top down i.e. corporations, governments, armies, and so forth, it actually is produced by us from the bottom up. It is in our day to day interactions at the most trivial level that the logic of exchange, private property, and profit are reiterated in literally trillions of mundane actions and conversations about those actions. We replicate the system and give it force as billions of us reproduce capitalist values across the planet moment to moment.

This profoundly powerful genesis of all systems of human organization arising in the mundane daily activities of all of us, gives particular pertinence to the emphasis on life space work in CYC theory and practice. In a sense, it has important and possibly unanticipated implications for what Marxists have always asserted as the primary political function of seizing the means of production. Of course, in the traditional reading of Marx this meant to take the factories back from the capitalist class and turn them into worker cooperatives.

In our contemporary moment, however, factories are no longer the dominant mode of production. Instead, it is immaterial labor or social labor that is the primary engine of capitalist production. As Negri (1996) points out, capitalism is now exploiting our capacities for social relations. This is the world of social media and the ever-expanding world of Artificial Intelligence. In this world, to seize the means of production would change. Instead of factories, we would reclaim the engines of our own social creativity — that is to say to reclaim our capacity to make the world.

Traditionally, again within the Marxist vernacular, the political is composed of acts of resistance and revolution. That is to say, the way to block capitalist appropriation or exploitation is through acts that refuse its demands or by



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overthrowing systems of capitalist governance and replacing them with governance truly responsive to the people. While there has been some success in the area of refusal and resistance over the past 200 years or so, revolutions on the whole have a more dubious history. Indeed, in a world in which capitalism now has a global influence on nation states across the world and access to weapons of mass destruction beyond our comprehension, the idea of successful armed struggle or violent revolution seems highly improbable, if not suicidal. And since global capitalism is no longer centered in any nation state, overthrowing national governments would very probably have little impact on the existing system of rule. In fact, it wouldn't be surprising (and it has happened) that corporations would be happy to sell us the arms to mount the revolution and the means to rebuild after it was all said and done.

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On the same note, I wonder if resistance and refusal work any longer either? It seems to me that capitalism thrives on the creation of new forms of social identity and easily capitalizes through the media on contestations between varying groups. In short, social upheaval makes money and making money is the fundamental logic of capitalism. For us to refuse or resist some aspect of capitalism creates an event that can be translated into a variety of money-making activities. In this sense, as they say in Star Trek about the Borg, resistance is futile and our resistance will be assimilated.

What does this mean for Radical approaches to CYC? What politics are available to us in working with young people that won't simply extend capitalist logic? How can we move into spaces of life affirming practices that assert logics of material care and love? I would argue that perhaps the logic of water holds some possibilities. I am thinking in particular of the way in which water adapts itself to a range of environmental contingencies. If the environment is temperate, it takes its form in what we call water. If things get cold enough it shifts its form into ice and if things get very hot it shifts into steam. All of these shifts without ever compromising its essential nature as water. In each of these forms it holds tremendous force.

As water, it comprises oceans, rivers, streams and a significant proportion of the human body. It flows across the planet in huge floods and into the tiniest of crevices in microscopic drips and drops. As ice and snow it can break stones apart, cover entire continents, bring human endeavors to a standstill, sink large ships, and distribute massive boulders across thousands of miles. As steam it can sterilize, power geysers and turbines, and add humidity to an otherwise arid environment. Water in these various forms can morph and shift its flows to greater and lesser degrees of intensity and speed responsive to the environment in which it finds itself. It's force doesn't lie in its ability to do anything other than the capacity to flow into things and gradually encompass space. When it meets a blockage, it simply finds a way around it. This may take time, but water is nothing if not persistent. It can wear away the most massive of structures given enough time.



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I would argue that for those of us in CYC, the force of water holds a number of lessons both at the level of politics per se and at the level of politics as interpersonal practice in our daily work. To learn to adapt to our environment without compromising our essential nature as living creative material force is a life art. It means finding the variations in ourselves that allow for an array of possible subjectivities that extend well beyond our imagined true self. Indeed, like water who we are is both multiple and deeply intertwined with all the living things that surround us, create us, sustain us, and in the end undo us.

Given this, the kind of variations of who we might become, that might lead to effective political action and deeply transformative CYC youth-adult interactions, might well be discovered through an examination of how to seek the spaces that are open to us, rather than to try and force ourselves into spaces that will resist us at every turn. This is a subtler politics that requires patience and the willingness to move in and out of spaces over time. To gain ground and relinquish it, knowing we will be back as soon as it becomes available again. To do that requires that sometimes we are water, sometimes ice, and sometimes steam, but we are always a force of nature that is infinitely persistent.

The autonomist Marxists argue that resistance precedes domination and is never reactionary. It precedes domination because it is made up of the living flow of creative force, which is precisely that which domination tries to control and shape. What we do as CYC, when we do it best, is an exemplar of that principle—we are moving with a faith in the capacity of living force to transform the world and outmaneuver and always exceed the duration of any system that would limit who might become.

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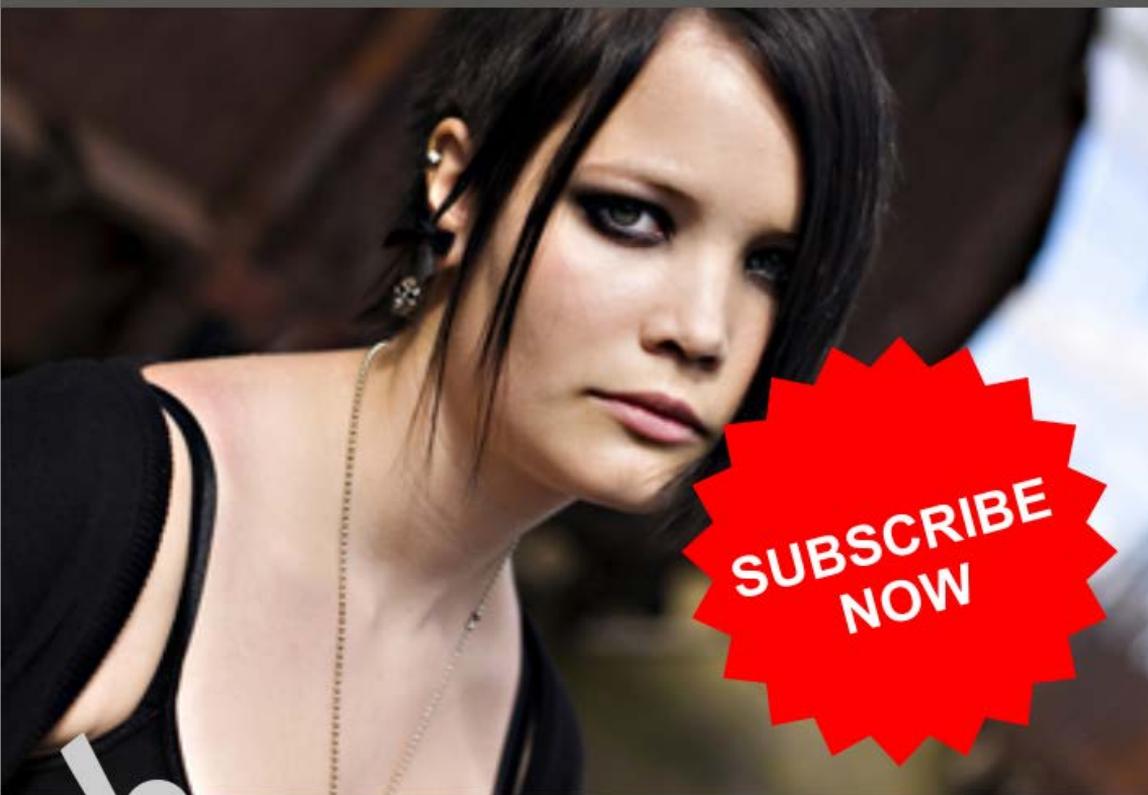
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# Self Care and the Imagination

Kiaras Gharabaghi

Whenever conversations in child and youth care turn to a consideration of topics that may require an investment of time, practitioners point out that time is often not something available in abundance. One example of this is the conversation about professional development. Just about everyone realizes that professional development, in some form, is an important part of excellent practice. And just about everyone agrees that there is not enough opportunity for practitioners to participate in professional development events, with employers citing issues ranging from the cost of conferences and workshops themselves, the replacement costs of frontline staff to attend such events (especially in residential care settings), to the fears of losing staff to better jobs if one invests too much in their professional development. As a result, many voices in the field, often slightly removed from everyday practice, encourage practitioners to seek professional development on their own, to pay for conferences themselves, and to read more. Such advice is not entirely unreasonable, although it probably romanticises times long past when a distant generation did indeed create its own professional development networks on their own dime and their own time. People like Jack Phelan, Thom Garfat and the late Mark Krueger told wonderful stories about hitchhiking across geographies to get to the events coordinated by a few wild and crazy practitioners, sharing hotel rooms in groups of 10 or more, and learning and partying together for days at a time.

Some of these recommendations may no longer be practical, and perhaps miss some important dynamics that likely would further perpetuate the participation of racialized and other people for whom much broader and systemic social barriers are not simply removed because they want to take the initiative. At any rate, many



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practitioners have pointed out that when one works shifts through all hours of the day (and night), unpaid overtime to ensure relationships with young people are honoured, and likely more than one job to pay the bills, it is not so easy to participate in things as yet another thing to fit into the day, the week or the month.

Another conversation that seems to miss the mark most of the time, or at least reflect quite different lived experiences for those practicing in the field every day versus those commenting on or researching the field, is the conversation about self care. Again, everyone realizes that self care is important, and many have argued that a lack of self care is actually dangerous, both for the practitioner and for the young people involved with the practitioner. One problem is that the idea of self care is often reduced to very operational things, such as, for example, taking care of the body through regular exercise and healthy nutrition. The advice includes such creative jewels as 'go for a walk', 'join a gym', 'eat less meat', 'get plenty of sleep' and moderate alcohol, tobacco, coffee and other drugs, both legal and not so legal. More recently, the advice has incorporated calls for more yoga and more mindfulness as well.



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It is not that anyone suggests that these things wouldn't be good. It is just that most practitioners find it enormously challenging to fit additional things into their lives, even if such things are good for them. Indeed, I have heard from many practitioners that the pressure to demonstrate a good attitude toward self care by doing precisely the things often suggested actually causes a great deal of stress. Some practitioners feel guilty about not going to the gym, about enjoying a juicy pork chop, and about having a chronic fear of yoga.

For many practitioners, self care becomes a performance of taking care of oneself to mitigate the perceived expectations of others. If I go to yoga once, I can talk about it for weeks and create an identity that values yoga and exudes my



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maturity to care for myself. This strikes me as worse than skipping the yoga class and biting into a double patty burger at Burger King (this is *not* an endorsement of Burger King). In fact, I think that a logistical approach to self care is misguided. Engaging in activities that are unrelated to one's professional practice in order to gain distance from that practice is not self care at all and I really wish we would stop advising especially younger practitioners that it is. Don't get me wrong, I am all for having multiple interests and pursuing these. If you like yoga, go right ahead and join a class. If you want to be a vegetarian, be that – the world will indeed be a better place for it. But will any of these things make you a stronger, healthier practitioner? I don't think so. Sometimes these things make you a worse practitioner, such as when you resent missing your yoga class because you were called in for a shift at your workplace.

Self care as a function of child and youth care practice necessarily has to connect to that practice. It is not at all unhealthy to seek out self care mechanisms that are within your practice rather than external to it. Trying to connect physical exercise as a form of self care in relation to one's practice has the effect of creating a binary between practice and non-practice. In many professional endeavours, that would be just fine. But in a professional field that is built on an approach (to being in the world) rather than a series of tasks and rigid professional standards, such a binary is counter-productive and inherently and explicitly negates child and youth care as an approach, replacing it with child and youth care as a technical matter, an expression of logistical competencies from which one occasionally needs a break.

So what could self care be in child and youth care practice? I think self care in our field is first and foremost a commitment to 'exercising' the imagination. Let me put this a little more bluntly – self care is a way of re-imagining everything one encounters in practice in a manner that eliminates everything one doesn't like about what one encounters in practice. It is about re-telling stories with a level of control and commanding presence that is largely impossible in practice. It is about story-telling to oneself, re-creating oneself as a character in one's story who finds pathways to meaningful engagement, meaningful relational practice, meaningful care,



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nurture and love, and meaningful outcomes. It is even about imagining oneself as a warrior of social justice, an ally or participant in anti-racism, a revolutionary in the 'un-doing' of institutional control and oppression. In our imagination, we can create pathways for being with young people that render them partners rather than clients. We can overcome barriers to social justice that have been embedded for decades and even centuries. We can assume identities that are fully intersectional, and we can be with identities that are fully intersectional. We can, as Eve Tuck has eloquently argued, abandon 'damage-based' frameworks of thought and action and replace these with 'desire-based' frameworks of thought and action. Indeed, we can feel successful, whatever that may mean to us.

Self care conceived as an act of the imagination has practical value. It does not require additional time investment; we can imagine as we are engaged in other things – while we drive to work, while we attend yet another boring seminar, while we witness things that aren't right. The imagination is free to us; we can access it any time. In our imagination, we can emancipate ourselves from oppression; we can move as we see fit. Note that this is not the same as being reflective. Reflection, and reflective practice, unfolds in the here and now, in the material world we are presented with. Reflection also is a good process, but it is one that inherently tasks us to think beyond ourselves. We reflect on action, on inter-subjective experiences, on right and wrong. In so doing, we don't re-imagining ourselves and the world around us. We just think about what we might have done differently. This can add stress as much as it can give us peace.

When Garfat suggested that child and youth care is 'a way of being in the world', I was deeply impacted. It is such a simple phrase, but one that carries a great deal of meaning, and perhaps one that necessitates a critical view of our practice in real time. For the world in which we are is not just a material world of a collection of pre-shaped, pre-determined phenomena. The world in which we are exists beyond and within that which we see and experience in a tangible, material manner. In order to ensure that child and youth care is a way of being in the world, we cannot allow the world as it is constructed by others (mostly white people) to



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be the world in which we move. Our imagination is the readily available tool, accessible to each and everyone of us, that allows for an engagement of a world we care about, and in which we can care about ourselves. Self care does not mean to escape our practice. It means to build our practice in a way that is just. We cannot build institutions, processes, professional standards, mechanisms of inclusion or, for that matter, relational practice, by rearranging items that are at the root of our stress, our dissatisfaction, our concern. We need our imagination to recast the material world in terms that are meaningful to us. When we do this, we gain hope; we gain strength, and we gain strategies for being in the world that don't reproduce the oppression of what we may currently experience.

Some people find it difficult to conceive of the imagination as a real thing; they argue that they live in the real world, in the material world, among and within the phenomena that are impacting them. Dreaming about some utopia is not going to change the problems we face right now. Of course they are right. But the imagination is not a dream, nor is it inherently predisposed toward utopia. The imagination allows us to see possibilities outside of the vested interests of systems, institutions, processes and procedures. And unlike in dreams, we are fully conscious as we exercise our imagination, and therefore we can drive the process along the threshold of what is and what could be. The worst-case scenario is to put to rest our capacity to imagine something better. Doing so means that whatever is creating a need to care for ourselves will continue to create that need; forward movement is largely ruled out.

Through our imagination, we gain the capacity to think possible the things everyone tells us are not. And that is a much more powerful way of self care than eating salad, although there is nothing wrong with salad either.

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# **International Online Child and Youth Care Education: How to Train Care Worker Groups**

**Niels Peter Rygaard**

## **Introduction: Setting Global Standards for Caregiver Training**

Due to migration, urbanisation, natural disasters and political unrest, millions of children and youth worldwide grow up outside their families. In underprivileged orphanages, foster care systems, in migrant camps, and as homeless youth. Long term outcomes are sad: only half of children in care ever pass the 9th grade or get a job, suffering from poor mental health. This applies also to wealthy countries like Canada, Denmark and Sweden in spite of huge investments (MacKean et al. 2018, Vinnerljung 2005). The poor outcome is due not only to economy – a major cause is the lack of education and support for child and youth care workers, foster parents, and all other frontline staff practicing relations-based work (Rygaard 2017).

Local governments are often unable to support, educate and monitor care work systems effectively. As a result, most care work is performed by volunteer, professional and non-government organisations (NGOs). Growing numbers of high risk children and homeless youth calls for large scale education and supportive training of care workers at low cost, in how to learn and practice quality care work.

To meet this challenge, the Fairstart Foundation gathered a network of international researchers to design international trainer’s trainer educations, and caregiver group training programs. Outcomes of this effort include 420 instructors from organisations and government agencies in 26 countries graduated their four



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month education, creating a global child and youth care network. In two year co-creation projects with local organisations, the 20 free language versions of training programs online used by instructors have trained the care worker groups of some 30.000 children and youth worldwide, creating a community working from uniform standards for training.

## **The Workplace Environment of Child and Youth Workers Causes Frequent Burnouts – Why?**

As a Danish-American child psychologist and researcher, I worked ten years from 1981 in a therapeutic school home with traumatized children and youth suffering from early deprivation, insecure attachments and behaviour problems. This taught me how difficult it is to translate research into daily reality. In 2005 I published “Severe Attachment Disorder — a Guide to Practical Therapy,” published in 14 languages within a few years. This sent me on a world tour to lecture and study care systems on all continents, providing a global overview. I learned from conversations with experienced frontline workers in CYC and organisations worldwide that the poor outcomes for children in foster and institutional care are mainly due to a universal challenge. Hopelessly overworked staff facing large numbers of severely disturbed kids and youth, and limited knowledge of how to practice research-based care practices with a documented effect. This work environment causes frequent burnouts and excessive stress, crippling the mental health of dedicated professionals, in particular that of young volunteers. Why is the mental state of care workers so important for the lifespan success of children and youth?

## **Four Dimensions of Successful Lifelong Development**

During a visit to Peru in 2006, I was awed. An orphanage in Arequipa run by five volunteers hosting 36 girls on a 10\$ daily budget were able to help most girls into higher education and academic careers! Staff practices were quite simple and consistent with current research: The basic needs of any child or youth include



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having a few committed long-term adult caregivers, and membership of a group of peers over a long time span. These five caregivers worked all year round for practically nothing to provide the girls with a secure base, enabling them to erase the effects of truly horrific childhood histories. I learned that this amazing outcome was caused by their ability to form a strong and supportive staff group and workplace environment. They and many others inspired my idea of the need for online based training.

To determine the core elements of professional trainer education, I gathered a network of 28 researchers in placed children and youth from all corners, ranging from Ed Tronick, Bob McCall and Charles Zeanah in the US, Yvon Gauthier in Canada, over Europe to Rukhsana Saddul in Pakistan and Kamikado Kazuhiro in Japan, etc. For two years, they generously shared and discussed their answers to a simple question: what works in daily care practice for children and youth without parents? Summing up their recommendations, the state of mind of care workers was one of the four basic conditions for lifelong success in care. Any of these are equally important:

1. *Continuity in caregiver relations.* A long term secure attachment and relation to a few caregivers. Continuity in caregiver relations applies not only to parents, but for all ages to care workers, teachers, etc. Professional care work can erase the impact of former trauma, even if this work starts in youth (Crockenburg et al. 2008, Vinnerljung 2016).
2. *Peer group membership.* Being an accepted member of a long-term group of peers. Small child/ youth groups yield the best results (Christoffersen et al. 2014). Having a long-term group of peers is important for adult life. Care leavers living in supervised peer groups after care show increased educational and employment success, as opposed to living alone (Moelholm et al. 2012).



3. *Continuous education and supervision of care workers.* The mental wellbeing of care workers, and knowledge about how to meet disturbed behaviour is paramount for their ability to form secure relations with children and youth. The more care workers, foster families or residential staff are isolated, the higher the frequency of burnout, abuse and use of violence in care (Rutter, Ijzendoorn, et al. 2008).
4. *Agreement between those the child or youth has bonded with, and those who manage the placement.* Conflicts and contradictory agendas between social workers, local authorities, parents and foster parents, schools, etc. create paralyzing loyalty conflicts in the child, causing serial shifts in placements with deteriorating mental effects and increased homelessness for care leavers. So do frequent shifts in the child's social case worker (Rygaard et al. 2014).

Any efficient intervention and daily organisation of care work must include these qualities. They became cornerstones in the international instructor (trainer's trainer) education.

### **Forming a Strong Instructor Community and Strong Training Groups**

Realising the importance of care worker wellbeing and organisation for child development, the design of the international online education aims not only at improving care practices. The four-month curriculum provides an online classroom where instructors share experiences from training with fellow students, provide peer feedback (proven by research to be more efficient than teacher feedback) and support. Other topics include how to meet resistance and motivate when training groups, learning theory, and group development dynamics. Creating a strong sense of group commitment also applies to the instructor's work when training a group.

For example, in a cooperation with SOS Children's Villages, 20 staff from five East African countries became Fairstart instructors, training groups of kinship and foster parents hosting 660 in care, using Fairstart's Swahili and Kinyarwanda



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sessions. These parent groups (mostly poor women living in remote areas with 6-9 foster children and teenagers) spontaneously created mutual WhatsApp support networks, and even started advising village neighbours in problems with their teenagers. The development of those in care improved by 20%, measured on five dimensions known to predict adult life success (Fairstart, 2017).

## **Active Co-Creation and Inclusion of Creative Participant Knowledge and Expertise**

Many educational designs are top-down teachings from experts, telling people what to do while ignoring the most valuable assets: people's own prior knowledge and firsthand experience. Here, participant's professional and personal life experiences are a core element in training, enabling participants to understand child and youth behaviour as normal responses to loss and lack of stable care. Instructors and group members share personal childhood and work experiences in inspiring frequent discussions. For example, one session about working with teenagers starts by a group interview about how participants experienced their own puberty, their fears, dreams, and their transition from depending on adults to peer group dependency. At the end of each group training session, the instructor helps each participant design a work plan: how they will apply what they learned and discussed in the session at home, presented at the start of the next session. The principle of any participant being an active co-designer of improved care practices and new mindsets applies to all levels, from the partner organisation to the children and youth involved. Children and youth learn to understand and cope with their own behavioural and emotional problems through dialogues and evaluate their own development before and after program completion.

## **Instructor Education Modules and Sessions for Group Training**

Fairstart offers two instructor curriculums: one for family-based care and one for group based care. Before signing up at either, the student makes appointments for eight three-hour sessions with a training group. When participating in the four-month online curriculum (see [www.fairstartinstructor.com](http://www.fairstartinstructor.com)), students work in the



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EdX platform classroom, developed by Harvard University and the Massachusetts Institute of Technology (MIT). Between modules the instructor trains a group using Fairstart sessions.

The curriculum contains eight four-hour modules to be followed from home or workplace. Each module introduces theory in depth and video lectures and prepares the student for training a group of care workers between each module. In the first group session, the instructor introduces training and interviews participants about their workplace quality and stress levels, and the state of each child or youth in their care. In the following six sessions, the instructor trains six Fairstart session topics, only needing a projector, a laptop and internet or a USB flash drive.

In the last session, participants evaluate and score the initial questions again. Instructors register answers in their module, allowing to measure care worker and each child/ youth's progress. The instructor writes an exam paper and gives and receives peer feedback. Once educated, instructors can train any number of groups and combine any of Fairstart's many additional sessions and resource sessions at no expense (see [www.fairstartfoundation.com/programme-overview](http://www.fairstartfoundation.com/programme-overview)).

## **Blended Learning Offers Versatility and Low Costs for Users**

Offering the basics of attachment theory and relations work applied in everyday situations – by combining online education with local group training – has created an exponential demand for partnerships from organisations and professionals worldwide. Feedback from instructors show that they are now local experts in quality care training (a few video testimonials from Canada and other countries are available at [www.fairstartfoundation.com/feedback-and-reflections-from-fairstart-instructors](http://www.fairstartfoundation.com/feedback-and-reflections-from-fairstart-instructors)). Organisations reduce their expenses for physical seminars, travel and hotel expenses, as well as for developing their own training programs. Instead, they are inspired by the one to two-year partnership process of creating local versions adjusted to language and culture.



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## **Examples of Ongoing Partnerships and Partnerships in the Waiting Line**

Cooperation with SOS Children's Villages is now expanding to Ethiopia and Somaliland, and another 20 instructors will be educated. For Greenland government, Fairstart recently developed a cross-professional education and training program in Danish and Inuit. Participants are school teachers, residential and school home staff. In Spain, professor Eva Gomez from Cantabria University runs an umbrella organisation for all foster care and residential homes. Accompanied by representatives from Chile, Mexico, Peru and Honduras, she has initiated a cooperation. Portuguese psychologist Margarida Gaspar de Matos has applied her government for foster care versions in Portuguese.

Two NGOs in Egypt applied for versions in Arabic, and likewise organisations in Lithuania, Estonia, Latvia and Belarus. American Dana Evans living in Yekaterinburg was educated as instructor and now trains leaders, professionals and groups across Russia. A local instructor has included Fairstart in the government foster care program of Kyrgyzstan.

The only limitation to this expansion are the challenges for partner organisations to find funding for cooperation to co-create and implement new versions. In many countries, the 950 € fee for individual students represents a huge investment, even when a 20 % discount for student groups is offered. Fairstart is financed by a mix of donations from other foundations, the selling of individual instructor spaces, and by joint funding applications with partner organisations. This finances the work of the four staff members, author included, and the volunteer board.

To participate students must: Speak English besides any local language, have some experience in child and youth care, invest 65 hours over four months to study modules and train a group, make appointments for eight three-hour sessions with a group of care workers, and have access to internet and basic computer skills. Participants range from experienced frontline workers wanting to train colleagues, to educated professionals and academics.



At Fairstart, we're constantly amazed by the engagement, dedication and support from researchers, professionals and care workers. On behalf of the team, my thanks to all enthusiastic professionals and partner organisations who make this effort work around the globe to empower the care workers of children and youth.

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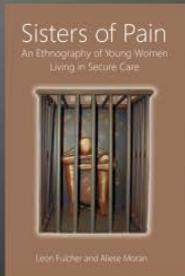
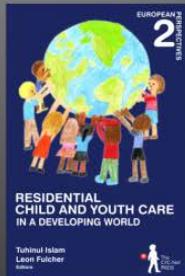
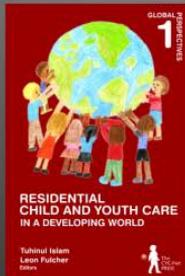
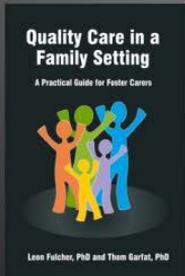
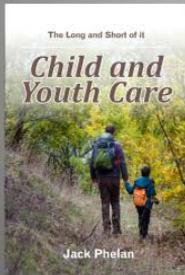
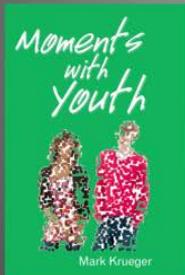
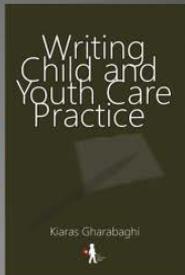
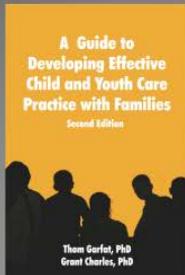
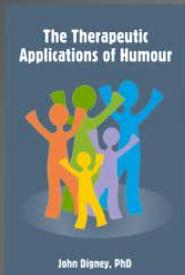
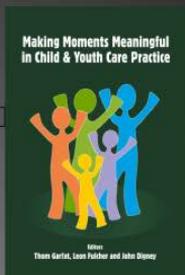
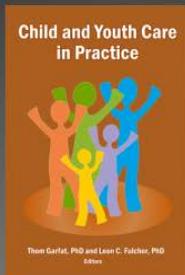
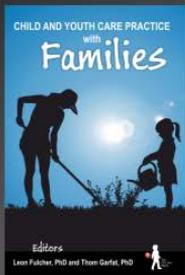


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# The Statistical Reason Why Youth Work Ought to be Voluntary

Doug Magnuson and Priscilla Healey

For every profession that claims an expertise about what other people need there is a daunting statistical problem. This problem has become most visible in medicine in recent years. For example, even when a medical test is 99% accurate, the proportion of people who are accurately diagnosed as having some condition is very low. Here is how the math works.

Stegenga (2018) cites an example using a medical condition that afflicts 1 in 5000 people. For every 1,000,000 people, 200 people will have it. If you have it, 99% of the time you will test positive, so 198 of those 200 people will test positive. Subtracting those 200 people from 1,000,000 leaves 999,800 of the one million who are healthy—at least, they do not have this condition. Of that 999,800 people who do not have the condition, one percent of these will test positive even though they do not have it, that is, 9,998. Therefore, there are 9,998 plus 198 = 10196 people with positive tests and of these .019 actually have the condition. That is, only two percent of the positive tests are accurate, with a test that claims 99% accuracy. The false positive rate is very high. This is a shocking number.

The failure to take into account false positives is why so many men have had unnecessary treatment for prostate cancer and are now incontinent and impotent, and it is why so many women have had unnecessary surgery, radiation, and chemotherapy for breast cancer that did not exist or was not a threat. The way to avoid the high false positive error rate is to not have the test at all. In other words, it is riskier to have the test than it is not to have the test. Medical researchers



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advocate raising the age at which women have mammograms and some advocate that men never take tests for prostate cancer.

The problem of false positives is not just a problem in medicine. It is a problem in social work, counselling, psychology, psychiatry—and every kind of child and youth care work. All of these claim some expertise in identifying when children, youth, and families need us, and we have nothing close to a 99% accuracy rate for anything we do.

Consider a situation in which perhaps .5 percent of the population of youth could benefit from some youth work support, but our ability to identify which youth comprise the .5 percent is only 70% accurate. (and this may be optimistic). For every 10,000 people, 50 people could benefit, and of these 50 we will accurately identify 35. Ten thousand minus 35 is 9965 people, and of these 30%, or 2990 people, will be inaccurately identified as needing our help even though they do not. These 2,990 plus 35 is 3025, and so we have 3025 people we have deemed needing our help and of these only about one percent actually do. Like the medical examples, this is a problem.

Of course, in real life not everybody is assessed for needing services, so the total number of people with false positive assessments will not be this high. Even so, the accuracy problem remains. Like the tests for prostate and breast cancer, the solution to the false positive rate is to not have the assessment at all. This is why our demands for more services, funding, referrals, and surveillance are a problem. The consequence of these is the provision of services for people who do not need the help or who are harmed by our help, and the more people we serve the problematic this is.

We are working in numerous services with systems implying confidence in our assessment that youth need us: Learning plans in schools, treatment for sexual abuse in counselling, socio-emotional interventions in group homes, training programs for adults in child welfare, judgments of developmental “progress” in early childhood, suicide prevention programs, interventions for eating disorders,



and any and every type of treatment and care for the dozens of DSM “disorders” and other mental health initiatives. False positives are endemic.

The solution is not to stop providing services. One improvement needed is to improve our referral, assessment, and decision-making processes. A second improvement is to reorganize our work so that very few services are compulsory. If participants can choose to participate or not, and if they can walk away any time they want, we will add to our own assessments their self-assessment about whether they will benefit, and it will require us to work more diligently on the effectiveness and attractiveness of what we offer.

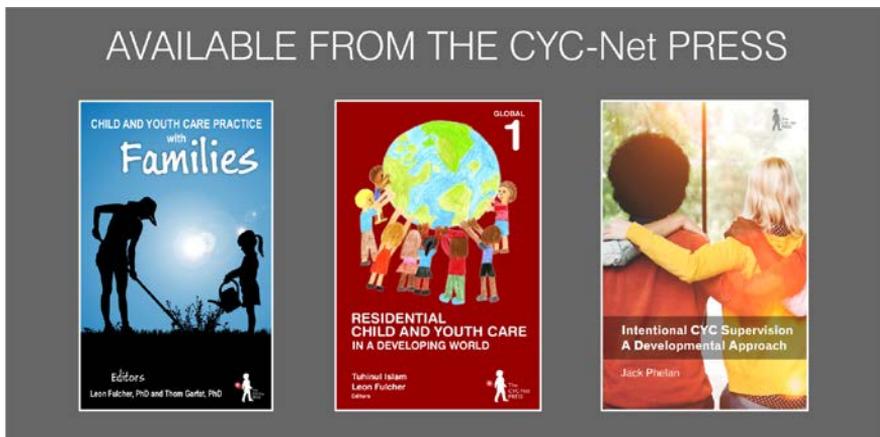
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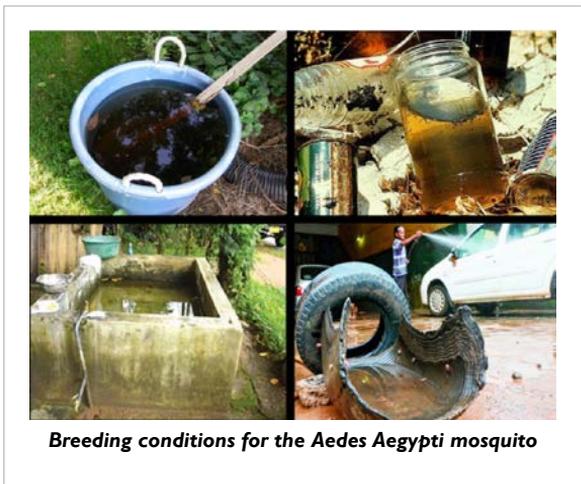
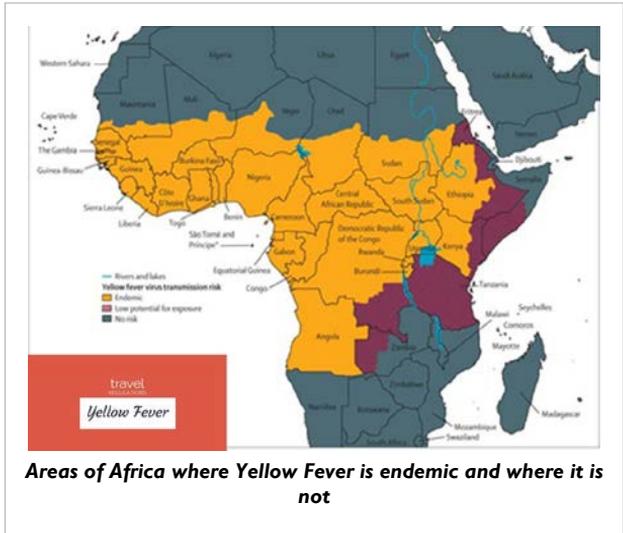
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It is interesting how some countries require a certificate of vaccination for the Yellow Fever virus. Other countries require such a certificate if you have visited a country where the *Aedes Aegypti* mosquito remains active. Regardless, **you do not want what this Mozzie shares!**

In historic times, folk travelled with mosquito nets to new places and were exposed to the 'local' bugs, viruses and creepy-crawlies. The first effective vaccine against Yellow Fever was discovered in 1951 by Max Theiler of the Rockefeller Foundation. He was awarded the Nobel Prize in Physiology or Medicine – the only Nobel Prize ever awarded for a virus vaccine!

It's important when travelling to give some



advance thought about where one might encounter mosquitoes and where they re-produce. Consider wearing long trousers and tops, and using insect repellent around where the mozzies, no-see-ems, midgies or sand flies can creep in!

I remember the year – not long after the vaccine for the Yellow Fever virus was discovered – when the Salk vaccine against polio was rolled out across all American primary schools. The painful arm from that encounter remains a lingering memory but it did keep me from getting the polio virus like another family member did. Lined up in alphabetical order, as for every inoculation, everyone turned every time to watch our fellow student Larry Heaps collapse in a 'heap' after receiving his vaccinations! Poor guy.

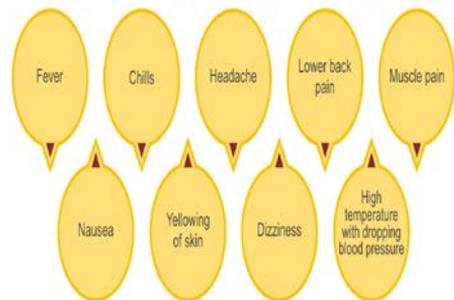
It can be a challenge distinguishing between say, a flu virus symptoms, and how one feels compared with Yellow Fever. Some of the symptoms are the same, but a high temperature with dropping blood pressure are far more worrisome elements that start to kick in.

I suspect that there are many child and youth care workers in this world who may have set off on continental and world travels without giving much thought to



**Children who have been awarded their Yellow Fever Certificates**

One may develop flu-like symptoms 3-6 days after the mosquito bite like



**Flu like symptoms such as these appear after 3-5 days**



vaccinations. When was your last booster vaccination for diphtheria and tetanus? Don't go abroad without that one!

Then what about Typhoid and Hepatitis A or B? Depending on where one goes, these 'nasties' may be lurking in a 'beachside salad' or in Hawker Stall 'foodstuffs' because of limited sanitation conditions, or from the water used to prepare raw vegetables for consumption.

Never forget good travel insurance, the kind that will pay to get you evacuated out of a sickly or sticky situation! New Zealand recently had a young person in Bali sadly ignore that lesson!

Enjoy your travels, heed caution and follow the Scouting or Guiding Motto – **Be Prepared!**



*The discovery of a miracle serum has offered hope and health for millions*



*Now one costly injection gives lifetime protection against Yellow Fever*



*A signed Yellow Fever Vaccination Certificate can be added to travel documents*



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