

CONTRIBUTIONS TO QUALITY DEVELOPMENT IN CHILD PROTECTION

2

EXPERTISE

Children in Child Protection

On the Participation of Children and
Adolescents in the Helping Process:
An Exploratory Study



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PREFACE

In 2008, the National Centre on Early Prevention in Childhood (NZFH) – sponsored by the German Federal Ministry for Family, Seniors, Women and Youth, as part of a resolution by the State Governors and the German Chancellor – received the task of establishing a “platform for the regular exchange of experiences on problematic child-protection interventions.”

This task arose after a number of severe cases came to the public attention in which neglect or abuse had led to the death of children. The deaths of *Kevin*, *Lea Sophie* and *Jessica* initiated an intensive public debate about how best to protect children in Germany.

The study of this subject showed, first, how multifarious this matter is and, second, how urgent a carefully prepared analysis is in order to avoid jumping to conclusions that do not do justice to the cases at hand as well as to those persons involved in protecting children. It also became clear that the empirical analysis of such problematic child protection cases can be useful in the future only if the results are helpful in achieving qualitative improvements in the system of child protection.

To this end a research project entitled “Learning from Mistakes” was publicly tendered and eventually awarded to the Kronberger Kreis für Qualitätsentwicklung e.V. (Kronberg Circle for Quality Development) and the Alice Salomon University in Berlin. The researchers envisioned a concept of a process of quality development supported by a dialogue between several partners, the goal being to do justice to the various dimensions present in difficult child-protection interventions. The idea is to gain the perspectives of all parties involved in such a process and to engage them in a dialogue. The parties include the professionals involved in the cases, the parents, and the children as well. Workshops on quality development were carried out in 42 different communities, where concrete cases and the existing administrative structures of child protection were discussed intensively. The parents, the main recipients of child and adolescent welfare services, were included in these workshops and introduced their vantage point to the discussion. In addition, six of the communities involved underwent a qualitative examination.

This publication, which focused on the perspectives of the children in question, is one result of that project. In particular, the question of the extent to which the needs and desires of the children are being respected and in-

corporated into the process was investigated. This is an explorative study based on an empirical analysis of ten child-protection cases stemming from five of the ten communities chosen for the study. Here, the authors of the study argue for drastically increasing the participation of children and adolescents in the process of child protection.

National Centre on Early Prevention in Childhood

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THE STARTING POINT AND GOAL

The field of child protection is dedicated to children, their protection and the promotion of their healthy development. Nearly everyone would agree with this statement. Yet, what is odd is that in fact, in the course of the last 150 years of the history of modern child protection, very little has become known about how children and adolescents actually experience the efforts of child-protection agencies and professionals, who intervene in their lives and offer help and support on their behalf. Even though historically authors spoke consistently of “child saving and rescue” (Nelson, 1984; Costin/Karger/Stoesz, 1996; Platt, 1972; Parton, 1985) – of “saving children” who were victims of abuse and neglect – the children in question were largely absent from the entire process of child protection. Later, in the 1970s, when the issue of child abuse and neglect was rediscovered and came to be discussed on an international scope, this circumstance did not change much. Only rarely the actual abused children and their development and treatment were made part of the debate (see especially the contribution emerging from the National Center for the Prevention and Treatment of Child Abuse and Neglect in Denver, Colorado, under the leadership of Henry Kempe; Martin, 1976). From the very beginning of the “new” child-protection movement in Germany, with the establishment of child-protection centers in several cities, there were voices noting that a surprising number of helpers were in fact reacting toward abused children with denial and resistance. One of the rare studies at that time critically showed: “Although dedicated research into child abuse has been around for some 20 years now, the condition of the abused child has been largely ignored. The attention of special institutions for child protection is rather concentrated on working with the parents and with the whole family. The children are often forgotten or disregarded” (Behme/Schmude, 1983, p. 9).

Only in the last few years has the field of child and adolescent welfare, in particular the area of child protection, become more interested in the children and adolescents themselves as agents in child-protection processes with their own special interests and needs. In Great Britain this has led to a refocusing of the attention toward “the child’s journey from needing to receiving the right help” (cf. Munro, 2011).

In our research and quality-development project “Learning from Mistakes – Quality Management in Child Protection,” the focus was originally not put on

the children and adolescents involved. Only during the first year of research did it become apparent to us, particularly in our interactions with the specialists from the local child-protection agencies, how important the theme of “participation of children and adolescents in child protection” really was. We were pleased to have the opportunity to include the international experiences, especially those from France and England, in our own explorative study of children and adolescents and thus to gain further insights into these important matters. The following thoughts guided us in this endeavor:

- The new debate on early services promoted an increased interest in strengthening the participation of children and adolescents by expanding the number of avenues to services that can be chosen and used by children themselves.
- In child and adolescent welfare, participation is rightfully seen as a factor influencing both quality and effectiveness, and in child-protection circles there is hope that increased participation will contribute to furthering better intervention outcomes (ISA, 2010; Holland, 2006).
- Nevertheless, the subject of participation and child rights does pose an overall challenge to the fields of child protection and social work (Krappmann, 2006). Especially in cases where the child’s well-being is in danger does the difficulty arise as to how to balance the children’s vulnerability and autonomy. Professional caseworkers therefore always face the challenge of how to minimize the risks to the child by only intervening on their behalf, while at the same time trying to optimize the assistance process by enabling the full participation of the child (Healey/Darlington, 2009), taking into account that failing to allow the child to participate may lead to further risks (Barreyre/Fiacre, 2009).
- Finally it became clear, that the professional quality and errors in child protection work can be determined only through a multilateral dialogue that reflects the perspectives of all actors involved – clients, professionals, and particularly the children and adolescents themselves (cf. Wolff, 2006). This has become very clear in the most recent debates surrounding the quality of child-protection practice

In light of the issues discussed above, it is the expressed intent of this study to create a new awareness of the

situation of children and adolescents in child protection. We want to define a new theoretical framework for further studies and innovations in practice as well as take a look at the state of the art of international research. Further, by preparing a qualitative analysis of some of our research material we want to provide first answers to the question of the proper role of children in child-protection processes. Our guiding interest is in deepening our understanding of the role of participation of children and adolescents in child protection. In Chapter 2, we define the *conceptual framework of participation*, which we support in Chapter 3 with the newest *research results on the participation of minors in child protection*, and with respect to the debates presently taking place in the French-, English- and German-speaking countries. Finally, in Chapter 4, we offer our analysis of the considerable empirical material emerging from the research project “Learning from Mistakes – Quality Management in Child Protection,” in particular in light of our own evaluation of selected case records. Our objective was to determine how children and adolescents are presently being addressed, judged and enlisted in the process. To this end, we chose ten case records to look at more closely. This process of case analysis forms the basis for our *empirical findings*. A literature search and the empirical analysis are two paths that lead to our suggestions in Chapter 5 for including the participation of children and adolescents in the future practice of child protection. In Chapter 6 we provide *suggestions for further research* into these matters.

2

THE CONCEPTUAL FRAMEWORK

There is an ongoing international debate, particularly in the English-, but also in the French- and German-speaking countries, surrounding the theme of the participation of children and adolescents in the field of child and adolescent welfare. In child-protection circles, however, the participation of children and adolescents has not garnered great interest, although newer publications do stress that the “voice of the child” is an important principle in effective child-protection measures (Munro, 2008, 2011). At the same time, there is hardly another “approach in modern welfare work that is received with such skepticism, ignorance or even resistance” (Krause, 2008, p. 201).

Nevertheless, the relevant literature suggests that children and adolescents should be increasingly included in the strategies of participation, with the goal of improving the overall quality of child-protection practice. Bob Lonne, Nigel Parton, Jane Thomson and Maria Harries write in their book *Reforming Child Protection* (2009): “When we write of service users we must begin with children and young people in the child protection system. In many other contexts of their lives, the issues of parents and other family members themselves are central. However, when we are considering child protection, the focus must be the children and young people for whom these services exist, and care work is done” (p. 78). In this perspective, children and adolescents are seen as “stakeholders” who play an important role in whether the measures enacted in fact succeed or fail. In the German-speaking countries, Marius Metzger (2010) dealt with the question of how to strengthen the position of children involved in child-protection interventions, whereas Manfred Liebel (2009) more generally emphasized the role of the child as protagonist.

The *child as agent* in the child-protection process has become an overlapping and “running theme” (cf. Prout, 1997, 1998) in the discussion of *agency*, for example, in social politics, particularly in the UK Government Green Paper “Every Child Matters” from 2003. But newer research has also taken a great interest in this theme: In September 2010 and in March 2011 conferences were held in Amsterdam and Liège, respectively, which followed up on the agency debate by dealing with the role of the child as agent.

In the end, the movement surrounding children’s rights as well as the newer approaches to research on

childhood and the users and recipients of child-welfare measures have all contributed to the theme of the participation of children and adolescents in the child and youth welfare system becoming one of the most important themes in professional circles in recent history. The result has been that the question of the participation of children and adolescents in child-protection interventions has now come to the forefront.

THEORETICAL ASPECTS: FROM CLIENTS TO AGENTS

The discussions on the quality of social services which took place over the past few decades have highlighted the necessity of heeding the standpoints of the recipients of welfare interventions from many different perspectives, in this case the children and adolescents involved (cf. for example, Oelerich/Schaarschuch, 2005). The central concern was to concentrate on the concrete circumstances of the recipients. As part of the research on clients, various concepts and approaches were developed, such as an orientation toward the living environment, coping, subjective experience and finally the service-oriented nature of social work. Research on the clients was addressed not only toward studying their life stories and reporting their experiences, but also toward evaluating their interactions with the offers made by social services (cf. for example Rätz-Heinisch, 2005).

In recent years, a number of authors have employed biography-analytical methods to study the effectiveness of educational measures from the vantage point of the recipients (cf. for example Gehres, 1997; Lambers, 1996; Normann, 2003). In these studies the authors attempt to reconstruct client experiences as well as the factors that enabled positive results to emerge from the helping process (cf. for a review Wolf, K. 2007). Anyhow, there is a growing interest in determining the effectiveness of such child welfare measures from the perspective of the parents as well as the children and adolescents involved (cf. *ibid.*). The basic argument in this debate concerns how to ensure the quality as well as the effectiveness and efficiency of social services. Interestingly, researchers (e.g., at the Institute for Social Work, ISA, in Münster) identified the attitude of the recipients toward their participation as the most important factor in the success of child and adoles-

cent welfare measures (cf. *ibid.*, 2010, p. 155)¹ – a finding that directly supports our endeavor to study the practice of participation in child protection.

Research on the recipients of welfare interventions is also interested in the factors that ensure efficiency, though these efforts are addressed more toward determining the relationship between the offers made and the biographies of the clients as well as reconstructing the subjective perspectives of the clients toward social services: “The goal of clienthood research lies in reconstructing the self-importance, the subjective experiences and the biographical processes of clients in the context of institutional settings” (Oelerich/Schaarschutz, 2005, p. 16). The research interest is oriented more toward the empirical nature of the living conditions and socialization contexts, the self-concepts, the interpretations, the perceptual patterns, and the problems and resources of those receiving attention from social-work agencies. The goal is always to optimize the quality of the offers, which also lies in the programmatic interest of the institutions providing such services: “The related epistemological interest consists in gaining an understanding of the clients’ life situations that leads to optimizing professional socio-pedagogical actions and socio-pedagogical arrangements” (Oelerich/Schaarschutz, 2005, p. 16).

However, this research approach overlooks the fact that children and adolescents are not only influenced by the processes and settings of such assistance, but that minors also have a direct effect on, and indeed can serve to change, these settings and processes (cf. the critical remarks by Uprichard, 2010). Indeed the clients are “understood as subjects ... who actively interact with the circumstances of the service provisions. Yet the emphasis of this type of research lies squarely on the way the clients deal with and experience the situations they are involved in” (Oelerich/Schaarschutz, 2005, p. 16).

Newer theories of service provisions have attempted to replace the more passive concept of “clients” with the concept of “concerned” persons or of “service users” (cf. Oelerich/Schaarschutz, 2005). This approach assumes that people who utilize the services or become recipi-

ents of social services are simultaneously co-producers of those services. Accordingly, as part of the overall organizational and social context, the professionals in such agencies continually create new situations together with their “clients.” Further, the assumption is that the users will develop individual strategies for the use of the offered services, which involve both programmatically envisaged strategies as well as those that may not have been foreseen by the social work organizations but that sometimes are also (mis)understood by the professional caseworkers as “tampering with” or “exploiting” existing professional structures. The idea of “service users” is different from that of “clients” inasmuch as “service participants” are not simply those who receive care, but are understood as persons who actively produce and contribute to solutions. Then the question arises as to how far such service organizations are able to provide service users with the opportunity to create ways and means to effectively using the offered social service programs; this is the new criterion for legitimizing professional social work (cf. Oelerich/Schaarschutz, 2005).

The concept of the “actor” similarly means that children and adolescents are no longer seen as mere recipients of service provisions, but rather as active subjects of their own lives who are also able to actively co-create helping processes. This approach can certainly be seen as “a reaction to the reduction and stigmatization of the self-interpretations of recipients as well as to the insufficient consideration of the given social and civil rights and the ecological contexts of the social services” (Homfeld/Schroer/Schweppe, 2008, pp. 7f.). The concept of *agency* turns the focus to the idea that service users are able to develop life coping strategies (cf. Böhnisch, 2008) and a sense of agency in their own social environments. According to Dorothy Holland, agency may be seen as the “realized capacity of people to act upon their world and not only to know about or give personal intersubjective significance to it. That capacity is the power of people to act purposively and reflectively, in more or less complex interrelationships with one another, to reiterate and remake the world in which they live, circumstances where

1 These researchers discovered that increased participation of children not only promoted a good working atmosphere with the agency, but also generally strengthened the capabilities of the children in question (cf. ISA, 2010, pp. 148, 155). On the importance of capabilities for pedagogy, cf. Otto/Ziegler, 2008a and 2008b.

they may consider different courses of action possible and desirable“ (Holland, 1998, p. 42). In this sense the actor is an individual who “influences his or her own life and environment more or less consciously and reflexively” (Raithelhuber, 2008, p. 17).

In this actor-oriented theoretical frame of reference, the possibilities to participate in and to contribute to services in the context of organizations and helping processes are seen rather critically: “The analysis is not only directed toward overcoming individual challenges, but rather toward overcoming frames of structural, organizational and legal conditions that allow for or limit rooms for maneuver” (cf. Homfeldt/Schroer/Schwepe, 2008, p. 8). The focus of research thus lies in the question of how to “be capable of exerting some degree of control over the social relations in which one is enmeshed, which in turn implies the ability to transform those social relations to some degree” (Sewell, 1992, p. 20).

Amyrtya Sen (2000) pointed out that actors are often confronted with very different acting conditions. According to Sen (p. 21), the central component for overcoming the lack of possibilities for self-realization lies not only in the ability to partake in material wealth, but also to enjoy good education, health and culture. Sen sees five types of freedom that further human capabilities and raise one’s social chances: political freedom, economic advantages, social chances, and guarantees of transparency and social security. Insofar, personal *agency* can only be understood in the context of “differences of power and of collective resistance and struggle” (Homfeldt/Schroer/Schwepe, 2008, p. 9).

The term *agency* or *childhood agency* (James/Prout, 1990) stems from sociological research on childhood (for an introduction, see Hurrelmann/Bründel, 2003) and clashes somewhat with the concepts of traditional socio-pedagogy. Modern research on childhood prefers an alternative approach to the usual scientific opinions that childhood is a sort of transitional phase on the road to adulthood, and that children are to be seen as vulnerable objects of concern in the care of adults. Rather, in the scope of interactional theory, children are understood as social actors of their own accord; children are involved in the construction of their own concrete social environment as well as being actively part of the “production of ‘childhood’ as a social phenomenon” (James/Prout, 1990, p. 8).

In his contribution entitled “Agency and Generational Differences: Some Implications of Childhood Research for Socio-Pedagogy,” Florian Esser (2008) dealt with the question of how it is possible to “take up the critical impetus of modern social scientific research on childhood without sacrificing the socio-pedagogic perspective” (p. 133). The desire to focus more on children and their needs is not new to the scientific discussion, but it still has great potential: “A socio-pedagogical orientation toward the existing circumstances in the lives of children for their own sake and the establishment of an actor perspective necessarily lead to a different understanding of professionalism” (Esser, 2008, pp. 135-136).

The theoretical connection of such socio-pedagogical considerations to modern childhood research can first and foremost contribute to the establishment of interdisciplinary childhood research (Lange, 2006, p. 92). Second, the sociological discussion surrounding the terms *agency* and *structure* provides a very differentiated theoretical background for examining the often implicitly normative premises of the various “child-centered approaches”: “However clear the critical direction denoted by the idea of agency may be in the present context toward more teleological or functional conceptions of children and childhood, the theoretical conceptions and their applications in actual research remain heterogeneous” (Esser, 2008, p. 136). The danger inherent in such approaches lies in ascribing children a sort of “primitive power,” of regarding the agency and the autonomy of children from an ontological perspective and disregarding the actual life circumstances of children and adolescents with their very own conflicts. By focusing on children’s agency (their capacity to act), research is in danger of romanticizing childhood and naturalizing children solely as active, willful not-quite-adults (cf. Baader, 2004; Krappmann, 2002).

An alternative path may be found in more recent social-psychological studies that connect the social agency present in concrete situations to interactive and dynamically expressed competences (cf. Grundmann et al., 2006): “Here, children are seen as developing individuals, with no need to revert to merely naturalistic premises” (Esser, 2008, p. 138). This new impetus in socio-pedagogic research has the task of orienting itself to the present and future opportunities for action that children and adolescents have and of unraveling the ways in which they can participate.

CONCEPTUAL FRAMEWORK: PARTICIPATION AS A MULTIFACETED CONCEPT

Participation has become one of the central paradigms in child and adolescent welfare. Nevertheless, this concept is not always easy to understand and implement. According to Tanja Betz, Wolfgang Gaiser and Liane Pluto (2010), the problem lies “inherently in the vagueness of the term ‘participation’ as well as in the changes and enhancements that have occurred over the past 50 years. We have experienced a normative priming of both the term participation and the debates surrounding its use” (p. 11).

Thus, a few preliminary semantic remarks may be useful. The idea of participation “goes back to the Latin roots in the verb ‘participare’ and denotes literally to take part in or share in” (Pluto, 2007, p. 17). Originally, participation referred solely to processes, strategies and actions that citizens took to obtain influence over political decisions and power in a parliamentary democracy. Participation in the sense of “sharing in” connotes “the way in which people can gain access to the processes, institutions and services of their respective society. In this sense we speak of a continuum or a state of conflict between social inclusion and exclusion” (Liebel, 2009, p. 480). This tradition sees participation less as the prerequisite of rational and legitimate sovereignty and more as a way of achieving political and social integration (Schmidt, 2000). This latter, more restrictive meaning is characterized as being “instrumental.” “Normative,” on the other hand, are approaches that consider participation not as a means but as an intrinsically valuable entity. In this sense participation is not only understood as action in a formal sense of the word, but as a form of active behavior: “Participation, sharing or involvement all refer to the way in which individuals or social groups express their own free will – how they make or influence decisions” (Liebel, 2009, p. 480).

In the broad social modernization processes that occurred during the 1970s, participation became a major principle in institutions, and also in the context of criticism of “expertocracies” and institutions in general, in the debates that were being held concerning evaluation and control as well as in the discussions surrounding the discussions about democratization of society (cf. Rosanvallon, 2010). In this sense participation came to be seen as a way to secure democratic processes and as a

way toward more equality in power relationships (Betz/Gaiser/Pluto, 2010, p. 12). In addition, the hope was that the modern institutions would secure their own ability to adapt and survive by implementing the participation of all citizens.

As Liane Pluto (2007) could show, the difficulty in pinning down an exact definition of the term also meant that participation came to be employed in very different contexts. In politics, for example, participation has been used since the 1960s as a way to safeguard democracy and as a criterion for the transparency and justice in power systems – and this in face of the danger that politicians who adhere to the logic inherent in political systems may become estranged from the needs and interests of the citizens. The concept of participation was then reintroduced in the discussions surrounding communitarism, civil society and governance (Bröckling/Krasmann/Lemke, 2000). In the 1990s it also popped up in the debate surrounding the modernization of administrative authorities: The citizens namely had increasingly gotten the feeling that administrations were no longer heeding their interests or even were blocking them outright. Participation also came to play a major role in the distribution of foreign aid, particularly against the background of the changes taking place from the previously paternalistic way in which aid was distributed toward a more cooperative basis. Behind all this was the acknowledgement that foreign aid could not succeed if it was not carried out together with those concerned and adapted to the local conditions.

Eventually the idea spread to medicine and psycho-social work as well that interventions can only be effective when there is participation of patients and clients, respectively. The goal is to strengthen the position of clients and patients within an expert system. Participation should lead to evaluations in dialogue and to decisions being made in interaction and in cooperation with everyone involved. In this sense participation is directed toward furthering democratization and empowerment of and in cooperation with all parties concerned. The danger, on the other hand, lies in shifting the responsibility to the clients/patients and thus exonerating the experts (cf. Pluto, 2007) – which can lead to so-called deprofessionalization effects. The broad experiences gained in the area of psycho-social work and medicine, however, revealed that participatory practices can safely be employed even

in borderline situations. Thus, these concepts and their implementation embody much potential for program discussions in child and adolescent welfare (cf. *ibid.*).

Participation has become a central paradigm in child and adolescent welfare since the 8th Report on Youth in the Federal Republic of Germany of 1989, which moved the attention front and center toward clients and their environment. The attention paid to participation, as mentioned above, occurred in the context of a general change of the role of children in society, the developments that took place in the social-scientific research on childhood, and the debates that ensued in the political discussion surrounding children and their rights that 1989 led also to the UN-Convention of the Rights of the Child (UNCRC). Yet the theme of participation and the “discovery” of the child is not completely new: There have been many approaches in reform pedagogics, psychoanalysis, life-world and resilience psychology, research on family and parental violence which have put children and adolescents and their needs at the center of attention of social pedagogy and social work.

Yet it was the controversy surrounding the role of children as actors in society with actionable rights which gave new impetus to these considerations. What began as a political movement eventually became a central educational challenge (Krappmann, 2006), in particular for child protection, where professionals are confronted with the contradictions between their role of safeguarding children from abuse and neglect (limiting the child’s vulnerability) and enabling the rights of children to self-determination and autonomy. Therefore, professional specialists have the task of balancing their actions to reduce the risks facing children and adolescents with making their complete participation possible (Healy/Darlington, 2009). Failing to include all the persons involved, it should be noted, might introduce new risks (Barreyre, 2009). This is the greatest challenge to the implementation of participation, which is required by German law according to para. 5 “Options and Choice” and para. 36 “Helping Process Planning” of the German Child Welfare Act, Social Act Book VIII (SGB). Parents, children and adolescents must always be included in the helping process, whereby, in child abuse and neglect cases, the mandate to protect the welfare of children according to para. 8a of the German Child Welfare Act, Social Act Book VIII, remains in force. However, according to para 8a of the German Child Welfare Act,

Social Act Book VIII, the right of children to participate is linked to the developmental stage of the respective children and adolescents. The latter demand can be treacherous since it contains the possibility of sidestepping the right to participate of children or adolescents who are not sufficiently developed: “Linking inclusion to the developmental stage also contains the risk of misinterpreting this possibility as a way to restrict their right to participate” (Pluto, 2007, p. 36).

Thus, in the field of child protection, the concept of participation is confronted with many special conditions, particularly the statutory (as well as the traditionally paternalistic and budgetary) mandate to protect children and adolescents. Participation presumes the existence of self-determined positions of children and adolescents or the concession of such positions by others. Yet these positions are restricted again and again in social work, particularly in child protection, for various reasons. Often the precondition of voluntariness is not present in matters of child and adolescent welfare, since both children and adolescents (and their parents) can be turned into clients or service users against their will. At the same time, the very idea of allowing a person to participate always presumes that the concerned person would have taken the role as a user of social services voluntarily and could act autonomously. The basic problem lies in the fact of a double mandate or the tensions between two very different demands that are being made – to help and yet to retain control of the situation (even sometimes through repression) (Böhnisch/Lösch, 1973; Schone, 2008). Further tensions ensue when the programs offered by child and adolescent welfare agencies are not only directed primarily toward children and adolescents, but also toward their parents as well. In this dual role and in the scope of such programs child-welfare organizations create complex structures that approach the actors involved from contradictory positions. The actors involved – the children, adolescents, parents and caseworkers – have very different interests, roles and hierarchical positions, particularly in cases where a child’s well-being is in danger. In this respect participation, especially in child protection, has to be seen in the light of power relations and asymmetric power structures: “In their professional actions the specialists must be attuned to the existence of asymmetry and of conflicts with multiple levels. At the same time, they have the task of including all groups in the process,

which necessarily leads to conflicts of interest” (Pluto, 2007, pp. 50ff.). Because a child, however, is clearly in the weaker position, the professionals involved have the obligation to support the child in such participation processes (cf. Münden/Mutke/Schone, 2000). Yet they must also be aware of the interest of the parents, establish and maintain contact with them and include them in the work at hand. This is a complex task for any caseworker, especially since they are required to act in accordance with other biographical, organizational and systemic demands: “One is part of the whole affair, but one has the task to pilot the whole process as well” (Pluto, 2007, p. 52).

In light of this situation it is important to study closely the power relations and asymmetric structures present in participation processes, not only with respect to the relationship between the caseworkers and the clients, but also between adults and children in general (in light of the possible tensions or even discriminations present in intergenerational relationships) (cf. Mason/Michaux, 2005). Another important question concerns how power and resources can be more fairly distributed. Clearly, professionals and adults tend not to want to share their power, as they fear the loss of generational and professional resources (e.g., McLeod, 2007; cf. also Gil, 1998). Yet, conceivably, broad participation need not necessarily lead to a loss of power or privileges on the part of any single participant. Quite the contrary, all parties may realize leeways for action and successes for themselves should mutual empowerment arise: “A key question is whether children’s and young people’s participation means taking power from adult (zero sum) or whether both can be empowered (variable sum)? What are the conditions that lead either to mutual empowerment or to redistribution of power?” (Davis/Edwards, 2004, p. 98).

When we speak of participation in child and adolescent welfare, the discrimination children experience at the hands of adults is usually implicitly and sometimes explicitly included. Often it is assumed that “specific conditions are valid for this age group which are different from those of adults, e.g., age-related interests, special vulnerabilities, need for protection and developmental necessities” (Liebel, 2009, p. 480). This presumption is based on a conceptual differentiation between adults and child/adolescent spheres: “Childhood and adolescence are not seen as integral parts of the social fabric, but rather as preliminary stages and developmental legs in the

run toward becoming an adult – who presumably would then act and think rationally” (Liebel, 2009, p. 481).

In this sense participation can mean an adult granting a child a particular right without conceding a position of equality in their interactions. The idea of participation is thus employed in child protection, and in child and adolescent welfare in general, to describe a number of situations that differ greatly in focus, nature, range and participatory structure (Sinclair, 2004).

Participation processes can refer to (a) private or public decisions as well as to (b) individual or collective (case-specific or case-unspecific) decisions. The goals pursued may vary widely – from an evaluation of the well-being of an endangered child (para. 8a German Child Welfare Act, Social Act, Book VIII), to setting up a joint plan for the helping process (para. 36 German Social Act, Book VIII), to developing an appropriate assistance procedure. Participation concerns collective decisions, for example, when it takes the form of a political plea about child abuse or when the plan calls for the extensive inclusion of endangered children and adolescents in a research project. But participation can also encompass (a) individual oral meetings, for example, a meeting between the all participating parties involved in assistance planning conferences, and (b) an assembly of many children, say, in a residential home (these are prescribed in France since January 2002, cf. Verdier, 2006). But one could also imagine (c) a long-term or one-off questioning in public surroundings such as was held as part of the *Irish National Children’s Strategy – Our Children Their Lives* (2000), where children were queried about their life in a children’s home as part of a survey about child protection (cf. Pinkerton, 2004). Participation can also take place in the form of a meeting or a child or adolescent forum like that found in the Youth Forum of the agency “SOS Children’s Village International” as part of the project “Differentiating and Planning Transitions during Adolescence.” Generally, however, child protection deals more with case-oriented participation than with inter-case and political participation (cf. Brown, 2005). A political background is present in participation processes, if at all, with adolescents and less so with younger children. Especially children in difficult life situations, with disabilities or from immigrant families tend to be excluded from being participants at all and having a voice in their own affairs (cf. Sinclair, 2004; Borland et al., 2001).

Stage or phase models are often used to describe forms of participation. The lowest level in such models stands for “nonparticipation” (in the form of manipulation, heteronomy, alibi-inclusion), whereas the highest levels are reserved for partnership, self-determination and self-administration (cf. Hart, 1997; Shier, 2001; Arnstein in Abeling, 2003; Gernert, 1993). In the end, these typologies, which serve to differentiate the levels of participation of children, denote rather the power relations that exist between children and adults. These typologies are usually also the subject of critical discussion: “Their value lies in their clear and simple nature, and they are often employed by organizations that work with children to measure the amount of participation present. Their disadvantage lies in their static nature; they do not allow for several forms of participation to exist parallel to each other in a single initiative, nor do they allow transitions from one form to another. Such typologies are based on simple and simplistic dichotomies, and do not do justice to the dynamics and the contradictory nature of power relations” (Liebel, 2009, p. 482).

Other models (cf. for example Treseder, 1997) better reflect the various elements involved in the process of participation – independent thinking, taking part in conversations and decisions, helping to shape the situation, bearing responsibility. However, they do not pursue a hierarchy, but only list the most important elements occurring in such processes: communication, planning, decision-making, organization, responsibility. Yet even such models still do not capture the complexity of the power relations and the various situations and sociocultural contexts that define the participation of children.

In order to describe the different intensities and types of participation, some authors have chosen to differentiate between *direct* and *indirect* participation. Indirect participation processes set up by adults may be differentiated from those the children themselves directly establish. For such situations also the terms “top-down” and “bottom-up” participation are used. The question here is whether participation is being used to create identification with and to reduce resistance in the helping process – or whether the goal is to introduce changes that are in the interest of the children and adolescents. Participation can “be only implemented in an emancipatory sense if it gives children and adolescents the ability to act on it in their own interests and according to their own interests

and intentions ... Participation is only relevant to them when it does not serve the purpose of integrating them into an existing social system, but when their participation has the effect of helping to change that system at the same time” (Liebel, 2009, p. 487). John Davis and Rosie Edwards agree with this notion: “Participation needs to be transformative. In other words, it needs to challenge the dominant discourse that represents children and young people as lacking the knowledge or competence to be participants in the policy debate” (Davis/Edwards, 2004, p. 104).

Contrary to such an attribution, even the 8th Youth Report painted a picture of young people who are seen as an innovative and critical potential for society. Participation in this sense, generally as particularly in child protection, therefore, can be conceptualized as being positioned in a field of conflicting priorities between the poles of “continuously dressing individuals,” on the one hand, and of “realizing the potential for social renewal” through a critical distance toward power, on the other (Keupp, 2008).

3

**A RESEARCH OVERVIEW:
CHILDREN AND ADOLESCENTS
IN CHILD PROTECTION**

A look at the German-, English- and French-language research literature reveals that the theme of participation of children and adolescent in helping processes is gradually gaining foot among empirical researchers. Nigel Parton (2004) even speaks of an “explosion” of research in the field of child and adolescent participation. A closer look at the research, however, quickly shows various interests at work. For example, the research addresses the role of participation in educational interventions (Pluto, 2007), in helping processes concerning matters of guardianship (Stötzel/Fegert, 2005), in residential home care (Kriener, 2007; Stork, 2009), in the welfare system itself (Parton, 2006) or in the research itself (Irwin/Waugh/Bonner, 2006). The common theme is an interest in how best to set up structures, conditions and situations that promote participation. Although the studies are devoted to very different fields of research, they generally come to the same conclusion, even uniformly across nations: There is a clear discrepancy between the theoretical ideas promoted in research studies and their implementation in practice (e.g. Cashmore, 2002). Thus, the discussion being carried out in the literature seems to have undergone a major shift, whereas the daily practice has not (e.g., Margolin, 1997). Participation “wavers between doubts and a positive utopia,” as Liane Pluto (2008, p. 196) formulated it: “Many empirical studies show that the professional and legal demand for participation has yet to be realized in practice.”²

Despite the increasing amount of research devoted to this theme, there still seems to be a need for further clarification of the challenges and methods involved in implementing participation, also in cases involving the endangerment of children. This matter is of general interest, particularly in the scope of the project “Learning from Mistakes – Quality Management in Child Protection,” where there is an emphasis on researching and establishing participation as one of the basic principles of good child-protection practice.

In both the practice and research of child protection, the participation of all persons concerned, i.e., most of

all parents and especially children and adolescents, is still in need of (re)vitalization. To be sure, children (and to a lesser extent adolescents) are often only being seen as victims of abuse and neglect, and there is extensive literature on the many forms and consequences of maltreatment as well as how best to identify endangerment and risks. Yet there remains an extreme lack of research both in Germany and internationally concerning the conceptions of children and adolescents, that is, which concepts of children and childhood play a role in the practice of child protection. Are children and adolescents being properly viewed with all their strengths and weaknesses? And if so, what methods are being employed to do this? How do they experience their own family situation? How do they experience their participation in assessing the existing risks and in finding a role in the helping process? How could one strengthen their participation? In the German- and French-language literature, but especially in the English-language literature, some new approaches have been developed by researchers to address these questions.

Some of the questions introduced here stem from very different theoretical and epistemological corners. From an ontological point of view, a number of studies have grappled with the question of the extent to which children and adolescents are even able to participate (Youf, 2004). Dominique Youf, who is interested in the development of a philosophical conception of children, noted that in the participation process of child protection it is especially important that professionals pay close attention to the similarities as well as to the differences among children. From an ethical perspective one can ask whether children and adolescents should be included not only in the helping process, but also in the research process. Emma Williamson, Trudy Goodenough, Julie Kent and Richard Ashcroft (2005), for example, were interested in exploring the limits of confidentiality in endangerment situations. Alderson (1995) developed a list of questions researchers should apply in their studies on children: “What is the purpose of the research? What are

2 On the other hand, S. Wolff (1983) pointed out quite rightly that researchers shouldn’t expect that their theoretical conceptions could just be found as being simply “transplanted” completely into practice. Rather Wolff is of the opinion that the goal of research should be to discover how practitioners continually renew their practice, how, again and again, they really enact their practice and, e.g., produce “genuine solicitousness or loving care.” In this sense one could also talk of participation in child protection as a practice of (co)production.

the costs and benefits for children? What are the privacy and confidentiality issues? What are the involvements of the children in planning the research? Did the children consent to being involved in the research? What was the impact of the research upon the children?"

Methodologically speaking, it could be asked what circumstances and frameworks, and what creative methods and overall attitudes and approaches are necessary to further participation both in the service system and in research processes. Therefore, it is recommended that researchers and practitioners should approach children and adolescents with transparent communication, sensibility, empathy, respect and honesty (e.g., Thomas, 2005).

When evaluating an endangerment of a child's well-being, the professional must adequately inform the children and adolescents about the on-going process, answer their questions, pay close attention to nonverbal communication, use creative methods (such as playing, drawing, creating time and space for a child to express his or her own opinions) as well as introduce unorthodox methods to allow children to express their feelings, for example, by leaving the office atmosphere and, say, taking a walk together. It is important to remain flexible while conversing with the child and to address the everyday activities of the child as part of the participation process (cf. Archard/Skivenness, 2009). Participating children should be in the position to understand how decisions come to pass and what role their opinion plays in the decision-making process (e.g., Archard/Skivenness, 2009). Anne Bannister (2001, p. 131) similarly makes some suggestions in her book, *Entering the Child's World: Communicating with Children to Assess Their Needs*, for holding confidential conversations with children:

- *Set up the proper framework, in which the child can gain trust, and feel being understood and accepted.*
- *Choose a safe atmosphere in which children can express their feelings.*
- *Make it clear that what the child has to say will be heard and will be taken into account.*
- *Provide information about yourself and make commitments that preserve or limit confidentiality.*
- *Use a method of communication that is familiar to the child and pay attention to the child's nonverbal behavior.*
- *Formulate specific questions and direct such questions to the child.*

- *Include the extended family, friends and the child's social network in the process and ask the child who in the family is the most important person or to whom the child feels most attracted.*
- *Remove yourself from the role of the examiner and develop more of a therapeutic understanding, thereby ensuring that all topics addressed have been sufficiently discussed before a session is concluded.*

The participation of children and adolescents has been studied with both quantitative (e.g., Stötzel/Fegert, 2005) and qualitative (e.g., Abels-Eber, 2010) research approaches. The questions asked have been as different as the disciplines involved: Some studies dealt with how the professional specialists viewed the participation of children (e.g., Healy/Darlington, 2009), whereas others have studied the perspectives of children and adolescents (e.g., Lesson, 2007). Also interesting are those studies that tried to combine both perspectives (e.g., Potin, 2010). Here we will discuss some studies grouped under each of these three types.

THE VANTAGE POINT OF THE PROFESSIONALS

How the professional caseworkers see the subject of participation can be studied with a number of methods. The usual ones use questionnaires, qualitative interviews or case analyses. Studies in which cases from actual child-protection processes were the main research material showed that, in the scope of interventions, children are often conceived of as victims of abuse ("the child at risk") or as objects with specific needs ("the child in need") (cf. Kemshall, 2002; Winter, 2006; Alderson, 2004) and less as actors of their own standing in the helping process. In their study of case histories, Jan Mason and Annette Michaux (2005, p. 5) discovered that children were not necessarily seen by caseworkers as independent actors participating in the helping process, but rather as members of the concerned family: "Our examination of these files indicated that children were not viewed as 'subjects' in the assessment process being more typically seen only as part of the family unit, not as individuals."

Indeed, the children involved in child-protection processes are generally described primarily in their re-

relationship to their parents, with little or nothing known about their own life experiences (Mason/Michaux, 2005; cf. Holland, 2000, 2001). The problems and perspectives of the parents are sometimes brought to the forefront of attention to such an extent that the children effectively “disappear” (“invisibility of the child”). The professionals involved apparently find it easier to communicate with the adults, which may explain observations such as the following: “It was evident from the files and in the data from worker interviews that the assessment process was adult dominated. [...] The views of parents and issues around engaging them were also given significant space. [...] They considered that engaging children and obtaining their opinions would take more time and require different skills than those needed engaging adults” (Mason/Michaux, 2005, p. 6). Even when the perspectives of the (usually older) children and adolescents are mentioned, they subsequently often play no role in the decision-making process: “Older children’s view were at times recorded in the files. However, there was no indication that the input of these children was actually taken into account in the final assessment” (ibid., p. 5).

Mason and Michaux discovered that children are primarily seen as problem owners. In these cases the professionals involved tend to use the strategy of setting limits and trying to (re)establish normality: “The construction of children which prevailed in the files was as objects of concern with perceived behavior problems with all attention focused on the ‘normality’ of the behavior and/or the need for boundaries around this behavior” (Mason/Michaux, 2005, p. 5). Leeson (2007), on the other hand, emphasizes that the violence and disturbing behavior these children exhibit is often the only means they have of making their voices heard.

The survey carried out by Mason and Michaux in 2005 in Australia reveals that professionals explain their lack of consideration of the children’s perspectives with the fact that children are just not yet completely developed people and thus do not have the ability to participate: “Workers in their interviews acknowledged the invisibility of children in the assessment process. They explained it as a result of their understanding that children are still developing the capacity for participation and until they reach certain developmental stages it is difficult for them to participate effectively” (Mason/Michaux, 2005, p. 5). Professional caseworkers,

as other studies show as well, in accordance with social mores, do not see children as socially and emotionally mature (cf. Trinder, 1997). In addition, they are afraid that allowing children and adolescents to participate in the helping process might lead to even greater vulnerability: “Workers expressed concern that children’s participation may increase their vulnerability in contexts where they are at risk of abuse” (Mason/Michaux, 2005, p. 5).

English studies reveal similar results. Healy and Darlington (2009), for example, interviewed 53 professionals in order to understand how they viewed participation. These caseworkers were, on the one hand, convinced that participation was a good and necessary thing; on the other hand, they reported that they only rarely were allowing children to participate, especially in cases involving child abuse, sexual or domestic violence. Thomas and O’Kane (1998) even reported that in child-protection cases decisions were made about children the caseworkers had never actually been able to meet personally. Katz (1995), Parton et al. (1997) and Holland (2001) called such instances the “ongoing silencing of the voices of children.” Participation in cases where the welfare of a child is endangered is seen more as a mere obligation to inform rather than as an obligation to let children participate in the helping process (cf. Healy/Darlington, 2009). Participation is meant more to motivate the child to accept the aid offered – not to allow the child to be part of the process or have a say in things. The caseworkers use the opinions of the children to support and not to modify their own opinions: They seriously cannot imagine that the children could think differently than they do (cf. Healy/Darlington, 2009).

Roose et al. (2009) did a study as part of the project *Looking after Children* in Flanders, Belgium, concerning the role of participation in how case reports are written. They came to similar conclusions: Direct statements of the children are rare in the case records, and when they do appear, they tend to represent the perspective of the adults involved or are mixed with the perspectives of the parents and the professionals. This is particularly the case when the caseworkers use the child’s perspective to garner support for their own decisions (cf. also Munro, 1999). This observation highlights the fact that this form of participation does not and cannot change

the power relations, but rather serves to cement the position of the powerful professional agents in the helping process and thus also strengthen the status quo of the existing power relationships.

German studies reveal that many caseworkers cannot even imagine consistently applying a participation-oriented approach: They simply do not believe that participation would work in such processes (Pluto, 2007). The DJI project “Youth Welfare and Social Change – Accomplishments and Structures” did a qualitative study of the participation of clients in educational interventions. The results are not directly relevant to child protection, but it is important that they be mentioned at this point. There, too, it became clear that the idea of generally allowing children and adolescents to participate is not widely accepted in the practice of child and adolescent welfare. The study singled out a number of typologies that represent how caseworkers view participation: Some are generally positive toward participation but see clear limits to its implementation (e.g., regarding the age of those involved or the sphere of influence they command), whereas others clearly see participation as a direct threat to their professional judgment. Accordingly, such caseworkers who follow such an understanding of participation end up in conflictuous situations when clients suggest or follow their own paths – and may even completely withdraw their support if they feel uneasy or threatened. A third approach says that “participation is doomed to failure,” and then the pressure to quickly produce results is set against by the demand to promote participation. In this scenario participation is transformed into a utopian vision that cannot be realized under real conditions, especially those of child protection. Common to all three types is that none of them approaches the situation positively, why participation could be important even for the professionals themselves. The fourth pattern to emerge was that of “participation as a positive utopia,” where the caseworkers understand participation as a permanent challenge in professional practice. Here, the claim to implement participation does not curtail such professionals in their actions, but rather is experienced as a positive pushing to work for its realization.

According to Pluto (2007) the goal of having children participate means reconsidering one’s professional identity. For this reason alone the principle of partic-

ipation, as discussed by Healy/Darlington (2009), has been implemented very differently depending on the respective standpoints of the caseworkers involved. Pluto notes that the skepticism toward the concept of participation “has led participation to being channeled into specific interventions and treated as a sort of technical demand” (2007, p. 109). One may indeed ask whether child-protection institutions are in fact places for children that are properly adapted to their needs and that invite children and adolescents to cooperate in person in an active role. The danger is that participation is expounded externally in order to legitimize one’s work without actually allowing the children and adolescents to participate. And at the same time the individual understanding of what the respective actors need may also get lost in this process (cf. Ackermann, 2010). In addition, when the practice of participation is introduced as a mere tool, there is a danger that it will be forgotten that the practice in child development is always fraught with uncertainty and carries with it the risk of failure: “In this sense, participation leads to the difficulty of creating an environment that is tolerant of mistakes and that can provide enough chances for learning” (Pluto, 2009, p. 199). Implementing participation always means facing the possibility of making “wrong” decisions.

Yet some studies on the participation of children and adolescents even go one step further and formulate the goal that answering the question of what in a particular helping process had been a “correct” or a “wrong” decision can no longer be exclusively left to professionals or other adults. These studies, therefore, look further at the perspectives of children and adolescents.

THE VANTAGE POINT OF THE CHILDREN AND ADOLESCENTS

The studies mentioned above show that, in practice, children and adolescents involved in child protection are more likely to be seen and treated as victims of abuse and less likely to be considered actively concerned subjects in the helping process. Some studies, on the other hand, have in fact been concerned with the question of how children and adolescents have experienced their familial situation. In contrast, others have been concerned with the partic-

ipation of children and adolescents in the process of assessing how endangered a child's well-being actually had been. The question of participation in residential home care has received relatively broad attention in the literature. Furthermore, there are also a number of biographically oriented studies that deal with problem of how children and adolescents experience the helping process.

HOW DO CHILDREN AND ADOLESCENTS EXPERIENCE THEIR FAMILIAL SITUATION?

Jude Irwin, Fran Waugh and Michelle Bonner (2006) did a study in New South Wales in Australia on the question of how children and adolescents who have experienced domestic violence see and judge their familial situation (cf. also Mullender, 2002). In their preface Irwin et al. make the comment that researchers are generally very reticent about allowing abused children and adolescents to participate in the research. This reticence then leads to the situation that the experiences and representations of the children and adolescents are only minimally picked out as a central theme in the research process and are receiving even less attention in the field of child protection politics (cf. *ibid.*; also Brown, 2005). In the study by Irwin et al. 17 children and adolescents from 8 to 18 years of age were interviewed. They did not see themselves primarily as victims of abuse, but rather as actors in conflictual situations. They reported that they chose to take part in these conflictuous situations in order to retain some influence. It was important to the children and adolescents interviewed not only to be listened to by the social workers involved, but also that the professionals *believed* their side of the story. Irwin et al. do report, however, that it is not easy for children to ask for help and support on their own since they often do not know whom to ask or who could be of help to them.

PARTICIPATION IN THE HELPING PROCESS

In an English study by Bannister (2001) the author noted that abused children have great difficulty trusting adults in the helping process; this may also be related to the fact that children find it difficult to organize help for themselves when they need it. This makes it all the more important, as the research by Neale (2002) shows, that the participation of children be taken seriously and ap-

proached sensitively while the endangerment to a child's well-being is simultaneously assessed (cf. *ibid.*). Especially when children find it difficult to trust adults should the efforts to gain their trust by means of successful participation be emphasized and proper help offered.

The results of the Australian study by Mason and Michaux (2005) point in a similar direction. In their study, as in that of Irwin et al. (2006), the children and adolescents have difficulty obtaining help on their own and do not know who they can turn to confidentially.

Münder/Mutke/Schone (2000), Pluto (2007) and Robin (2009) obtained similar results in their studies on the perspectives of children and adolescents in Germany as well as in France. It turns out that, in many cases, children and adolescents strive primarily for an emotional recognition that enables self-confidence. Their position toward the provision of helping services is positively influenced when they have had previous contact with the welfare service or when they themselves had initiated the contact with the welfare service. How children and adolescents view the helping process depends on the quality of the contact with the specific professionals involved, who can have a positive influence on them – or cause them to reject interventions and offers of help outright. According to these studies, children and adolescents like having their options explained to them and becoming part of the common solution to their problems. They find it burdensome, on the other hand, when they are forced to speak about a difficult familial situation and when the attending professionals fail to try to determine together with them the proper solution to the problem (cf. Münder/Mutke/Schone, 2000; Pluto, 2007; Robin, 2010b). Generally speaking, on the topic of the participation of children and adolescents, the challenge remains for the professional caseworkers to adhere to both institutional procedures and case-oriented necessities (cf. Ackermann, 2010). The behavior of children and adolescents is a continual warning against the danger of “formalization” or using “technocratic” approaches to the process of participation: Children and adolescents see no sense in signing off on contracts they did not help design or contribute to (cf. Münder/Mutke/Schone, 2000; Pluto, 2007; Robin, 2009).

Limiting the participation of children and adolescents in child-welfare processes to the planning phase of the helping process does not seem to be advisable since

such planning conferences are often merely bureaucratic necessities determined by the legally required procedures and that are deemed necessary by the caseworkers themselves. The children and adolescents involved rarely can specify the time, place or content of the discussions in these conferences, and generally honest and unbiased negotiations do not ensue. Rather, the discussions tend to circle around obtaining the agreement of the children and adolescents in order to legitimize the professional workers' proposition in question (cf. Pluto, 2007).

A number of other studies address the point that children and adolescents involved in child-protection interventions experience themselves as being in the weaker position and that the welfare service professionals (and indeed all other adults involved) are remaining in the dominant position (cf. Schofield/Thorburn, 1996). The children and adolescents interviewed in the course of these studies complain that their parents always seem to be at the forefront of the discussions of how to assess and evaluate the existing endangerments and risks for the well-being of children. How offers of participation are being made during this process is often deemed inappropriate by the children – they either fail to fit their needs or fail to contain their wishes at all. In light of these structural disadvantages and the general tendency to ignore their perspective, children and adolescents think it helpful to have someone at their side to take up their position when entering a discussion in an administrative/institutional context in the midst of adults (Stötzel/Fegert, 2005). In their study on how interventions are carried out, Stötzel and Fegert (ibid.) determined that children were more pleased with the work of their guardians ad litem (GAL) the more they felt that this person was supportive of them at the family court hearing and made their views known to the court.

PARTICIPATION IN RESIDENTIAL HOME CARE

In residential homes, too, participation may not correspond to the actual needs of the children and adolescents. Hallett, Murray and Punch (2003) report on interviews done with 86 adolescents from 13 to 14 years of age in residential homes in Scotland. It turns out that they only marginally trust their caretakers. Their greatest fear is that the adults in the care unit will react negatively or judgmentally toward their concerns and impose sanc-

tions. For that reason they tend not to speak openly with adults, and especially with their caretakers, about problematic situations or their predicaments in life, and are turning rather to their friends for comfort and advice. The adolescents would prefer more advice and less control. This study is in a way typical of the entire international discussion and agrees with the results of our study that also emphasizes that only *individual* participation is sometimes occurring and that the perspective of *collective* participation of children and adolescents in the context of residential care is usually neglected.

In Germany a quantitative survey was done in the scope of the DJI project "Youth Welfare and Social Change – Accomplishments and Structures," yielding similar results. In practice, it turns out, participation tends to be implemented mostly on an individual and not on a collective level – and this largely in the bigger facilities of residential care. The gaps between theoretical demands and their practical application, as Pluto (2007) stresses, are based on the fact that in Germany (as opposed to other European countries) there are only few legal stipulations concerning direct participation in residential care. In addition, the "conditions in Germany are not conducive to the implementation of institutional forms of participation because of the extremely pluralistic and diverse organizational structures of the non government child welfare agencies and the many locally diverse municipal youth welfare offices" (Pluto, 2007, p. 177). Still, the participation of children and adolescents on a collective level in, for example, the form of residential home councils or general assemblies, is found more in residential agencies. "Especially in nonresidential educational service provisions do we find a nearly complete lack of institutional participation practices" (ibid.).

The tendency to deny the participation of children and adolescents rather than foster it may also be found in France, even though collective participation in residential care units serving child and adolescent welfare is in fact mandated by law. Héléne Milova (2004) wrote a comparative study concerning participation in residential care and noted that the demands for the participation of children and adolescents were in fact being implemented more in Germany than in France. This contradictory situation arose because the statutory regulations in France allow institutions to sidestep the collective participation of children and adolescents despite the clear legal requirements.

Yet in Germany too, as Pluto (2007) discovered, professionals working in residential care tend to place little emphasis on establishing residential home councils. Also, the concerned children and adolescents do not experience the existing councils or similar participatory bodies as providing them with a true voice. The reason may lie in the fact that these instances of participation, despite the proper rhetoric, “often do not really allow the children and adolescents to speak their mind since the goals of the caretakers determine the course of action” (Pluto, 2007, p. 205). In another publication on the same matter, Kriener (2007) described a group meeting in a residential home for adolescents as an event that effectively is controlled by the official representatives. The professional caretakers introduced the themes, moderated the group meetings and used the situation as an opportunity to discuss ongoing problems. The residents, on the one hand, bemoaned “that everyone had to sit still at the table, that the meeting went on for a long time, that they weren’t allowed to say what they thought, and that they weren’t allowed to discuss the rules concerning, for example, how often particular tasks had to be carried out and how the cafeteria was to be used” (Kriener, 2007, p. 64). If, on the other hand, important matters were to be discussed and if the meeting place had been chosen in accordance with the needs of the children and adolescents, then they would soon discover that “participation had less to do with only expressing their wishes and desires but more with discussing their own various interests and how to assume responsibility” (*ibid.*).

PARTICIPATION IN THE WELFARE SYSTEM

Most studies on participation are concerned more with the formal processes of participation, such as take place during risk evaluation, intervention planning and intervention implementation. Only a small number of studies deals with the way children and adolescents actually experience the welfare system and in what way they can influence this system, that is, actively participate in the decision-making process (cf. Hofgesang, 2006; Leeson, 2007; Abels-Eber, 2010). The reason for this may lie in the fact that children and adolescents are not seen as experts about their own biography (Cairns/Davis, 2003). However, a number of biographically oriented German

studies on children and adolescents in child protection have looked at the relationship between life history and the helping process and whether the services were appropriate. It turned out that children and adolescents were listened to more closely while reconstructing their life histories than in the context of their participatory involvement in the service planning and in the action processes.

Yet, at the same time, Hofgesang (2006) noted a mixture of “coherence and voicelessness, meaning and meaninglessness in the telling of life histories.” Hofgesang was concerned with understanding the survival strategies of children and adolescents and described their desire for a “normal biography.” In addition, Hofgesang mentioned that children and adolescents see professional help as something positive as long as the professionals providing it are willing to get involved with the common sense world wishes of these actors, for example, respecting their locational preferences. Here, the important thing for children and adolescents is to experience that the professionals involved are truly interested in them and are not seeking and maintaining contact with them solely for formal reasons. The success factor the researchers discovered is the availability of new learning environments that allow children and adolescents to (re)experience their own lives and to articulate their thoughts. Finkel (2006) used the example of residential care in a biographically oriented study to show that children and adolescents find it helpful when they can establish individual relationships to a caregiver, when they are provided with opportunities to take action, and when they can influence the decisions that affect them.

Such studies are still rare in the world of French child-protection research. One biographical study carried out in Drôme in France (Robin, 2009, 2010a) did, however, come to similar results: It turned out that the children thought it important to establish trust in a caretaker. In addition, they said that it was decisive to discover new environments and to have the experience of being able to cope with their own life as they see fit. Yet many children and adolescents described the feeling of not participating in the important decisions being made in their life – they felt being ignored. According to these studies, this leads to their developing a longing for meaning and coherence³ in life (Robin, 2009).

Christine Abels-Eber (2010), in her study of children in child-protection, also described this search for a place and a meaning in life (“une quête de place et de sens”) as well as the feeling children have of having been robbed by their caretakers of their own path in life: “Le sentiment de dépossession de sa propre trajectoire de vie” (Abels-Eber, 2010, p. 73).

In her article entitled “My Life in Care: Experiences of Non-Participation in Decision-Making Processes,” Caroline Leeson (2007) highlighted the fact that children and adolescents who are excluded from their own lives tend to lose their self-confidence and sacrifice their own visions of self-fulfillment. Later in life they often have difficulty making decisions relevant to their own life. They are afraid of making the wrong decision and cannot imagine truly determining their own fate. Or they assume that others could better make such decisions, since they believe they themselves are incapable of knowing what is in their best interest. In this sense they are unable to plan their own future or even to entertain a vision of what it could look like. This indicates that the absence of participation, also in child-protection processes, may lead to an even greater vulnerability of the children and adolescents involved.

The experience of not being included at the crucial points of one’s own life can in the end lead to children and adolescents no longer being willing or able to participate in political life or civil society (Stecklina/Stiehler, 2006). Stecklina and Stiehler (2006) noted that, in the research literature, participation is generally limited to discussing participation only in child welfare agencies and in the planning of service provisions. They further indicated that the researchers rarely were interested in thematizing the social and legal status and rights of girls and boys in child protection and in the discussions about developing the quality of child welfare services and about how to strengthen the participation of children and adolescents (cf. *ibid.*, 2006). The poor financial means as well as the negative experiences of the original family when receiving support services and in interactions with institutions

would often lead to children and adolescents developing poor self-confidence and communicative skills. Moreover, they were badly suited to standing up for their own interests. They had no confidence in their own abilities and mistrusted all institutions. But this study also reported on some children and adolescents who were early on placed in residential homes and enjoyed long-term contacts with a caretaker. Such an experience helped them to strengthen their self-confidence and feelings of self-efficacy.

CONNECTING THE PERSPECTIVES OF THE PROFESSIONALS AND THE CHILDREN AND ADOLESCENTS IN DIALOGUE

Studies that try to bring together the perspectives of the professional caseworkers and those of the children and adolescents are interesting in many ways. The first thing to stand out is that the two viewpoints often do not line up very well or they emphasize very different aspects. The professional specialists, for example, note that children and adolescents often are not interested or able to participate (Mason/Michaux, 2005), whereas the children and adolescents report not being properly queried (Leeson, 2007). Further, there is a discrepancy between the observations of the professionals and how the adolescents view the situation: The caseworkers are afraid that the children will develop an even greater vulnerability if they are questioned about their problems directly and openly by adults, especially by caseworkers (cf. Mason/Michaux, 2005). They are of the opinion that one cannot generally trust the statements of children because they may have been influenced by their parents (cf. *ibid.*). Many caseworkers are also afraid that allowing the child to participate might damage their own relationship to the parents, or that the parents might view the professionals’ cooperation with their minor children as a disadvantage for themselves and their children (cf. *ibid.*). The children and adolescents, in

3 According to Stumpp (2006) the feeling of coherence develops during childhood and becomes stronger throughout the course of life. Antonovsky, in his concept of salutogenesis, identifies three central components necessary to the creation of feelings of coherence: comprehension of one’s internal and external world; a feeling of manageability, that is, trust in one’s own abilities to cope with the various demands of life; and finally meaningfulness as a way of judging how sensible one sees one’s own life history

contrast, often wish the caseworkers would try to talk to them openly and honestly and approach problems directly (cf. *ibid.*). Their goal is not to talk about their feelings at length, but rather to discuss the problematic situation at hand as well as possible solutions (cf. *ibid.*). Yet the children and adolescents are wary of having their sentiments misunderstood or improperly used, their fear being that their statements may lead to misunderstandings with their parents. Rather, they wish that the caseworkers would provide the parents with a feedback after a session, to ensure them that they are not joining forces with the caseworkers against the parents. “Children generally wanted to avoid any parental misunderstanding about aspects of their sessions. They considered this could be done by having the worker feed back information on the session to the parent or to have the parent present at the session” (Mason/Michaux, 2005, p. 6).

4

**EMPIRICAL FINDINGS FROM
THE CASE RECORD ANALYSIS**

As part of our empirical analysis of a selection of child-protection case records we first looked at the theoretical background of this subject and did a literature study to assess the present state of research, in particular the question of the participation of children and adolescents in child protection. Studying such records can in particular provide insights into the perspective of the professionals concerned. Such a study is necessarily limited in scope inasmuch as any assessment of the perspectives of children and adolescents and of the face-to-face practice is based solely on the documentation of such professionals. This study should thus be seen only as a first step toward a broader investigation of the participation of children and adolescents in child protection.

CONSIDERING RESEARCH METHODOLOGICAL PROBLEMS

Modern qualitative social research is increasingly putting emphasis on research that does not depend solely on oral sources, that is, on interviews, but rather on research that looks at professional day-to-day practices by way of participatory observations and refers to written documents prepared by practitioners. The goal is not only to study the reflections, knowledge and values of the actors involved, but also to gain a glimpse of their transactions. Case studies represent one way of approaching and reviewing such professional behavior (cf. Boutanquoi/Minary, 2008).

Nevertheless, the records prepared as part of the organizational practices of welfare offices still remain the “standard artefacts” or “fictions” produced by organizations to legitimize their actions (cf. Wolff, S., 2004, p. 503, as well as Luhmann, 2001). Case histories are above all communicative documents. The notes and comments entered in the record are directed toward others: They send messages to a variety of addressees; they are meant to be read by supervisors, by the court and sometimes, in the form of intervention plans and developmental reports, by the clients themselves (cf. Rousseau, 2007).

In such case records the professional caseworkers deposit “institutionalized clues” to their actions; they allow the reader to draw legitimate “conclusions about the activities, goals and contemplations” of the authors (cf. Wolff, S., 2004). But the records also attempt to create the

“semblance of legitimacy, rationality and efficiency” as a parallel reality of the case in question (Wolff, S., 2004, p. 505). In child protection, however, a growing trend can be observed that the importance of establishing a data base of the helping process in the form case records is underlined to better allow for observing and reconstructing what had happened in the case process and how child protection workers and their agencies had delivered their services (cf. Ackermann, 2010); this trend was emphasized by a growing interest in serious case reviews not only by the courts but also by the child welfare agencies themselves that developed a tendency to use case records as a means of self-protection to legitimize one’s own practice (cf. Biesel, 2009a, 2009b). Obviously the case records serve as one of the central means of safeguarding the reputation as well as securing the legal position of caseworkers and their organizations. The legitimizing character of case records, this we can reveal already, was present in the data we are studying here; it was discernible in the presented lines of argument, in the efforts to enhance the objectification and the self-protecting legitimization of the professional practice.

Nevertheless, the last few decades have witnessed a number of studies based on the analysis of case records. For example, the Jule Study (of the German Federal Ministry for Family Affairs, Senior Citizens, Women and Youth, BMFSFJ, 2002) investigated 284 case records using predefined “standards of professional behavior” (ibid., p. 4) and reconstructed the courses of the helping process and their results (cf. as well the studies of Hansen, 2011; Fröhlich-Gildhoff, 2003; Kindler et al., 2008; Müller, 1980). The researchers involved in the Jule Study noted that case records provide only a cross-section of the social work practice, which is moreover marked by many traces of self-legitimization and self-serving explanations of the decision-making process (cf. BMFSFJ, 2002, p. 8). On the other hand, they also highlighted the fact that case materials do document “practice-relevant knowledge” and suggested that it is legitimate to use such materials in research especially since the strengthening of the participation rights of clients stipulated in para. 36 of the German Child Welfare Act, Social Act, Book VIII, has led to a qualitative improvement in the documentation practices of welfare agencies (cf. ibid., p. 8).

Not the least because of the paradigm shift sparked by ethnomethodological research, which has taken place in

qualitative research, case records as well as all other documents from this field of study should no longer be viewed as second-rate materials, but rather as valuable and important linchpins in the analysis of “socially organized practices” (Wolff, S., 2004, p. 505).

Our objective in analyzing case histories is to gain insight into how children and adolescents are seen and understood in child protection practice and how and to what extent they participate in the helping process. Against the background of the above discussion of research methodologies, we do not presume to employ case records, as it were, as windows on the day-to-day practice of child protection (cf. Wolff, S. 2004). Yet the case materials do allow us to analyze what sorts of self-representations and other-representations in child protection were deemed by the professional caseworkers as worthy of being shared. Such a case record analysis can provide information on how professionals characterize children and adolescents in child protection and to what extent they document how much they allow these clients to participate in child protection processes. We can also discover how much they actually interview the children and adolescents concerning their interests and whether or not they see it as legitimate to have them participate.

DATA BASE, RESEARCH QUESTIONS AND PROCEDURES

In the scope of the research and quality-development project “Learning from Mistakes – Quality Management in Child Protection” we requested from the participating municipal authorities that they grant us access to their case records concerning both successful and problematic cases of child-protection interventions. In total five of the six communities contacted provided 16 case histories. In addition, we requested that the persons responsible in the respective agencies provide a statement delineating the reasons for their choosing those particular cases and their own assessment of the course of action. The case histories chosen by the caseworkers, in many instances based on a team decision, and accompanied by a short explanation concerning the choice, were then divided into the categories “successful” or “problematic,” though some records were handed over without any explanation. Because of time restraints we limited our study to ten case records.

For our sampling we chose those records so that we had a fairly balanced number of “successful,” “problematic,” “no evaluation” cases, with an eye toward an equal inclusion of the participating municipal child welfare departments. This strategy did not aim at creating a representative sample, but rather as great a variance as possible in the material – which would in turn permit comparative analyses that reflect the complete breadth of the municipal departments concerned and the practice differences contained within the records (cf. Kelle/Kluge, 2010, pp. 41ff.). In other words, our choice of records to be analyzed was concerned less with the statistical representativeness than with the “heterogeneity so relevant to such a research question” (ibid., p. 109). Figure 1 (see next page) gives an overview of the case records we chose (the respective locations have been anonymized to protect their identity).

Our analysis of the selected case histories was based on a heuristic grid oriented toward sociological, psychological and socio-pedagogical categories (cf. Kelle/Kluge, 2010, pp. 63ff.; cf. below). We were primarily interested in studying the context of the respective case; the methods employed and the assessment of the respective case; the need for actions identified by the caseworkers as well as any changes in those opinions; the suggested helping process and the cooperative partners involved in the process. In addition, we saw it as our goal to understand exactly how the case in question, its dynamics and its crisis developments evolved. Yet our focus remained especially on the following questions: How do the children and adolescents come across in the records? What role are they given by the professional caseworkers? How are they judged and characterized by the caseworkers? We also analyzed how the participation of children and adolescents is described in the records in the course of the process – from the first report of a presumed child maltreatment case, the assessment of the situation and the planning of the safeguarding service to its conclusion.

Our analysis addresses the following research questions:

- To what extent are children (in danger of being abused or neglected) actually being seen or discussed? Are they being listened to? Do they have a voice?
- What practice goals for children and adolescents are pursued in cooperation with them?
- To what extent are the children and adolescents in child-protection processes (from the first report, over the planning and the implementation, to the end of

Figure 1

CASE RECORDS STUDIED

Case record no.	Location	Successful	Problematic	With Explanation	Without
1	MS 1	■		■	
2	MS 1		■	■	
3	MS 2		■	■	
4	MS 3	■			■
5	MS 4	■		■	
6	MS 1	■			■
7	MS 3		■	■	
8	MS 5		■		■
9	MS 5	■		■	
10	MS 2		■		■

the helping process) being methodically involved in order to successfully protect them and foster their development?

- Are the children and adolescents being involved in the evaluations of the results emerging from child-protection interventions?
- How are the children and adolescents in child protection characterized and what are the ramifications of these descriptions for their participation in the intervention process?

INTRODUCTION TO THE ANALYSIS: THE CASE RECORD AS A “DOCUMENTARY (CASE) REALITY” WITH ITS OWN SPECIFIC DYNAMICS

A quick look at the materials reveals that the case records in question differ greatly and contain very different aspects, not only among the various municipal child welfare departments, but also within a single agency. Even a particular case record may contain various different forms reflecting the fact that different professionals were at work and used or deposited their own documents.

The following and understanding any one course of the helping process based on the contents of the respective case record has not always been an easy task. Sometimes the sources of information were missing or the goals were not clearly delineated – even the clients in the helping process were not always clearly designat-

ed in the documents. As a means of documentation such records reveal only snippets from the life histories and intervention histories of the respective actors. As mentioned above, they provide only partial insight into the helping process and its reception by the actors and clients involved – always colored of course by the perspective of the professionals assigned to the case. And the dynamics of the respective case are not always present in the record; certain gaps become noticeable during reading that give cause for the concern that some important events may not have found their way into the record, or that some things in the lives of the protagonists had not been registered in the official documents. Insofar one can say that with case records we may be dealing with a “documentary (case) reality” (Wolff, S., 2004, p. 505) that differs from the actual reality of the children and adolescents in question.

If nothing else, the view offered in the case records is necessarily a very focused one containing one or more “blindspots.” The records show what the professional caseworkers considered to be important – or what they think potential readers of the record (examiners or auditors of some nature, perhaps a supervisor) would consider important. They reveal what the caseworkers observed and what they eventually recorded from these observations. What we find less in the records are notes about which events the parents considered important and how they viewed the helping process. And, this much can already be disclosed, very little is revealed about the perspectives of the children and adolescents in the helping

process. When their concerns are mentioned, they are mostly in the form of notes by the responsible caseworker or some other professional, that is, always couched in a specific professional perspective.

Apart from this attempt to unravel the developments and realities of the case, one gets the impression from the case records that they create their own dynamics. They have a special logic that emerges from the descriptions and interpretations provided in the records. In this sense, a record tells its own self-referential story where the differentiations, characterizations and motives that at one time had been presented are picked up again and again.

In addition, the texts written by the caseworkers and introduced into the records are then often reproduced at some other juncture of the helping process — recycled as it were. The professional caseworkers, we found, tended to (re)use text passages from past reports of voluntary organizations or other agencies or even from their own reports. Or they repeat standard text blocks or templates in part or in toto. When a passage is literally taken over, for example, from a report on the planning of an intervention describing the familial situation, the story seems to come to a halt or repeats itself: The case history effectively stagnates. This creates a sort of Sisyphus situation: The efforts of the professionals as well as the clients involved seem to be nothing but fruitless work, while at the same time important events and challenges in the lives of the children and adolescents go unnoticed.

But the case record, with its own dynamics, also represents the link to future decisions of the specialists involved: “Once a documentary (case) reality has developed its own dynamics, it is extremely difficult for the categorized person(s) as well as the authorities involved to extract themselves from this maelstrom” (Wolff, S., 2004, p. 505). The written version – not the personal memories of those involved – becomes the central fulcrum for all future events. This may be why the professionals, when working on a case record, particularly one concerning child protection, again and again introduce and follow up on the original concerns. For example, following the original report of problematic living arrangements (“The apartment is a complete mess,” Case 4, p. 4), the apartment became the central concern of the caseworkers: They observed the living conditions of the family during all visits and discussions with the family, and later discussed and documented their findings (cf. Case 4 and Case 1).

This creates a sort of path down which the helping process proceeds and which both the professionals and the clients tend never to leave. The records suggest that the course of the intervention highly seems to depend on where that path had commenced, that is, who had reported the child abuse case, how it originally had been depicted, etc. We were unable to follow up more on this set of problems, but it would seem that the case records play a major role in (or at least provide the proof for) how such intervention processes in child protection create their own inner logic. This is particularly true for the initial actions. When reading the case records one can even get the impression that the records depict the case as a drama whose finale can already be foreseen – that the ending is already contained in and known from the beginning.

THE ASSESSMENT OF CHILD-PROTECTION CASES: BETWEEN COLLECTING INFORMATION AND PRODUCING “OBJECTIVE GROUNDS”

Not unlike the intervention process in general, the case records provide only excerpts reflecting the participation of children and adolescents in child protection, filtered through the standpoints of the professionals involved. Nevertheless, for the research carried out on such participation, these assessments or reports emerging in the course of the helping process are of extreme importance for the appraisal of the quality of child protection. Thus, we were interested in discovering how professional caseworkers documented their findings in the records, how they came to their opinions in child-protection cases, and to what extent the children and adolescents were included in their assessments.

One general tendency in the records investigated was for professionals to put great emphasis on attesting to their own activities. For example, one record contained a long list of proofs of all faxes and phone calls regarding a particular case, even when one had not been able to reach a certain contact person by telephone. It was apparent that the goal of the practitioners was to only document what they had done in their practice and not what relevance their failed attempt to reach a client finally would have had to the case (cf. Case 10).

Generally speaking, in the records of the cases examined, “quality” was determined by a pattern of checking, argumentation and confirmation, that is, the professional caseworkers were intent on producing transparency and reproducibility in their record keeping. They were always on the outlook for objective features and criteria to confirm their assessments. This self-protective and self-justifying way of doing documentation is not surprising in light of the fact that the keeping of case records does have a legitimizing role to play in such organizations. Yet we also noticed that the motives of such self-protective and rationalizing behavior (cf. Biesel, 2008, 2009; Ackermann, 2010) were particularly conspicuous, since by recording their own activities the caseworkers produced assessments that were less concerned with substantive justification and directed more toward establishing a legal and administrative legitimacy. However, it should also be noted that an orientation toward a presumed objectivity in one’s own assessment does not in fact guarantee that the professional caseworker is free of prejudices and projections. Case 9, for example, contains a mixture of psychiatric criteria (“emotionally unstable personality disorder with impulsivity,” p. 27) and a projective comparison of the violent father to the figure of “Dr. Jekyll and Mr. Hyde” (p. 6). Sometimes the assessments found in the records tell more about the reactions of the professionals that they do about the families, parents, children or adolescents in question (cf. Sellenet, 2007).

Our analysis of the case records gives the impression that the caseworkers see themselves during the process of assessing the cases especially as “collectors” or “arrangers” of data and perspectives. Their notes often include references to medical diagnoses, which they employ as a means of backing up their view of whether or not a child should be considered to be in danger (cf. Case 10, pp. 2 and 7). The caseworkers also include comments on the parenting skills of the parents and repeat medical assessments on diagnosed diseases of the parents (“Alcohol dependency syndrome acc. to ICD-10,” “Emotionally unstable personality disorder with impulsivity,” Case 9, p. 27) to support their judgment of the need for protecting the children from danger. The perspectives of the professionals from nursery schools and the school system as well as the school performance of the children and adolescents in question (and generally their problems in life) often serve in the records as proof of their behavioral disorders and as signals

for the needs of providing services. The desire to objectify the argumentation becomes clear when documents such as a “Checklist of Behavioral Disorders” (cf. Case 7) are included in the simple form of a list proposing to document a child’s presumed abnormalities. Other supposedly objective data, such as truanting from school, are presented in meticulous detail, with all dates, classes and times listed. The numeric nature of such lists is meant to give the impression of documenting hard facts. Also information stemming from police actions, for example, in the form of logs and reports about deployments because of domestic violence and disorderly conduct (cf. Case 3), are deemed relevant and sometimes complemented by pictures of the living arrangements of the families affected. Proof in such cases may also be found in materials provided by the parents: In Case 5, for example, in preparing an assessment of whether the child could or should live with the father, the caseworker included copies of employment contracts and pay slips.

The personnel in Child Welfare Offices often record the information gathered by other professionals, by teachers, physicians, neighbors, caretakers and parents in order to legitimize the case assessments. In addition to the presumed objective evidence mentioned above, caseworkers also record the subjective perspectives of both the concerned clients and professionals. Direct interviews with the children and adolescents are rarely present, however, at least not in the case records we looked at, where conversations with the children and adolescents are mentioned only parenthetically. Of all the records we studied, there was only one that mentioned a professional who did have a conversation solely with an adolescent – even though this conversation also had not been a good example of participation. Often the record rather contains notes about nonverbal signals emitted by the children or adolescents, for example, during home visits or appointments in the agency. Sometimes these impressions had been passed on by colleagues.

Our analysis of the records shows that they also contain information garnered during home visits carried out by the caseworkers (cf. Cases 1, 3 and 4). The ostensible reason for such visits is to assess the living arrangements of the family in question. This is discussed with the family and then serves as a reason to repeat such visits. In their documentation of such home visits the caseworkers put their focus on determining the state of affairs and espe-

cially of the hygienic conditions in the home; direct contact with the concerned children and adolescents tends to be neglected in the records. In Case 4, for example, there is a description of “the living conditions” (p. 8). The caseworker remarks in this regard that “the apartment was sufficiently furnished” (p. 10), but then also notes that “the apartment could be cleaner” (p. 37). From the home visits recorded in this case record, which took place over a period of several years, the assessments vary considerably: “The apartment appears to be well kept, if not completely clean” (p. 38), whereas at a later point in time “the apartment is rather dirty: The floors are unmopped, and in one child’s room you could see the dried remains of vomit on the floor. The undersigned brought up the subject of cleanliness in the apartment (...)” (p. 55). Assessments about the living arrangements also include the state of the furniture: “The kitchen consists of a kitchen unit, whereby not all cabinets have been installed” (p. 98). They also include comments on the cleanliness: “The floor had been mopped but was not clean” (p. 100; see also similar passages on pages 44, 45, 50, 100). However, similarly detailed descriptions of the familial situation – the conflicts between the parents, the repercussions for the children – or even an appraisal of how the children look and express themselves are missing and noted nowhere in the case record.

It would surely be wrong to declare such practices of home visits, – which in modern times, where child welfare agencies are being seen more and more as service facilities, seem antiquated and recall the almost forgotten welfare practices of the past, – as serving only control functions or social concerns about maintaining order in the family (cf. Donzelot, 1979). A combination of assistance and control by sympathetic and well-meaning caseworkers can indeed be employed to help parents take up or return to a better way of life (cf. Hellmann, 2005, p. 55; cf. also Case 2).

In addition, concerns about the living arrangements may serve as a sort of “door opener” that allows professionals to come into contact – and maintain contact – with the families in question. A home visit, the case records show, represents the opportunity for professional caseworkers to meet with their clients face to face. There they can get a realistic impression of the family and its general situation. The caseworkers from welfare agencies seem to value this and meet with their clients only rarely outside of the home and otherwise are dependent on information

flowing from other professionals (cf. the lecture presented by Nigel Parton at the Kickoff Meeting of the project “Learning from Mistakes – Quality Management in Child Protection,” *ibid.*, 2009).

In the records we studied, the caseworkers fail to document or only reluctantly provide information about their own assessments of the case. Only rarely do we find an explicit assessment of all collected information and perspectives, for example, with respect to their coherence or to the question of how to view the information when judging whether a child’s welfare is in danger. Some records contain no notes whatsoever on how the caseworkers had seen the case at hand (cf. Case 10).

The caseworkers often express their caution through the use of passive constructions that depersonalize their comments. Their own standpoint disappears behind the wording, leaving the impression of objectivity. In her comments on “situated knowledge,” Haraway (1995) described these processes of objectification in the academic community. In the case records studied this desire for objective knowledge sounds like the following: “Ms. K. is having a bad phase. The impression arises that she is shirking her responsibility (...) Presently she seems to be taking up more responsibility. The impression is that she’s an occasional drinker” (Case 5, p. 48). Later a caseworker writes the following, clearly showing the striving for objectification: “There is a clear opinion that H. needs more self-control” (Case 5, p. 102). This statement, however, does not reveal whether we are dealing with the opinion of the teacher, the parents or the professionals involved. The subjective standpoint of the specialists disappears and becomes objectified. This is seen in the wording in the case record: “There is a clear opinion ...” Such projection of clarity in the assessment of life circumstances and the degree of endangerment is understandable against the background of the present situation in child protection and in light of the medium under scrutiny, the case record. Our analysis of the case records shows that the assessments provided in child-protection practice are based on the desire to create an unambiguous result by collecting the perspectives and opinions of others. This practice is supported by carrying out home visits as a means of collecting further information, maintaining contact and exerting control. Only rarely do we read clear and independent opinions of the professionals involved concerning the case and the level of endangerment present; rather, they must often be

inferred from the materials, for example, by looking at the choice of assistance measures, where the child continues to live, whether or not the child is removed from the family as well as any number of other measures taken or not taken. Thus, how the social workers and caseworkers in the respective institutions actually view the case is documented rather implicitly than explicitly. Our argument is that the information collected and documented in the case records serves, on the one hand, as a basis for decisions as well as, on the other hand, to create legitimacy for the implicitly expressed assessments of endangerment.

Our observations do not imply whether such practices are in fact good or bad. Yet it should be clear that such methods of assessing and documenting cases are fostered – if not encouraged – by the organizational and social frameworks in place (cf. Ackermann, 2010). In light of such practices, which are guided by the desire for objective rationales and concerned with presenting “proof” and “confirmation,” the question is legitimate whether children and adolescents are properly being consulted and heard in this context. After all, it is especially the minors in child protection who are often very much able to provide “objective” clues to what is going on. All they need is a culture of dialogue that would include them in the process.

Now we want to look closer at how children and adolescents are characterized in the case records, how their perspectives are documented, and how this effects their possibilities to participate.

CHILDREN AND ADOLESCENTS IN THE CASE RECORDS: FROM THE ABSENT CHILD TO THE IDEALIZED PROTAGONIST

In our analysis of the case records we were primarily interested in discovering how the professionals describe

the children and adolescents involved as well as how they then analyze and characterize them. First, we may conclude that the case records, not the least because of the anonymizing done as well as the very general nature of the case documentation, do not always reveal even how many children were affected or their sex and their age at the time. In some cases, only after reading half the record does one recognize that a child was even involved or that there was a sibling in the family in addition to the child under discussion. According to the notations of the caseworkers, the case records we looked at concerned a total of 18 children and adolescents from the age of 1 month to 20 years.

The reason for the interest by professionals in the characterization of children and adolescents is the assumption that the images of childhood the practitioners are following will reveal the forms of children’s participation they intend to promote. That social work contexts are shaped by the fact that both the workers’ and clients’ identity profiles are continually being reconstructed in the practice process has been shown in conversation-analytical studies under the heading of “constructing clienthood” (cf. Hall et al., 2003). Here, it is assumed that there is no such thing as a “universal client,” but rather that clienthood has to be continually reinvented in the organizational practice of child protection (cf. Juhila et al., 2003, pp. 11ff.). The identity profiles that are developed are linked to both actions and omissions. At the same time, all good social work must be oriented toward the needs of the clients, viz. those of the children (ibid.). This forms the basis for our pursuit of the constructions of childhood.

In our analysis of the data from the selected case records we employed a theoretical heuristic frame for organizing the characterizations of children. We assume that a “theoretical previous knowledge is not necessarily an obstacle to the analysis of qualitative data” (Kelle/Kluge, 2010, p. 108). Rather, one could say “that it provides the

Figure 2 AGE OF THE CHILDREN AT THE BEGINNING OF THE RESPECTIVE INTERVENTION

Case 1	Case 2	Case 3	Case 4	Case 5	Case 6	Case 7	Case 8	Case 9	Case 10
F, 6 years F, 8 years F, 9 years	F, 11 years F, 14 years	M, 1 month	F, 2 years	F, 7 years M, 15 years F, 18 years	M, n. s., a newborn	M, 2 years	M, 2 years	M, 1,5 years	F, 20 years M, 14 years M, 8 years F, 6 years

F=female; M=male; n.s.=not specified

researcher with the spectacles necessary for discovering the sociological contours of empirical phenomena” (ibid.). By embedding the material in a theoretical grid it becomes tied to a scientific discussion and thus gains “sociological import” (ibid.). In accordance with this assumption we searched the statistical data for various types of children and adolescents that correspond to the categories found in research on child protection (e.g., “the child as object,” “the child as subject” or “the child as victim of abuse/neglect,” etc.).

However, such a heuristic frame should not be applied too strictly, as this might severely limit the perspective of the researcher(s) (cf. ibid., p. 109): “Formulating the terms of reference too narrowly may rob the researcher of the ability to discover new and previously unknown relationships in the qualitative material.” Kelle and Kluge argue that a sociological frame of understanding is able to support such a grid since abstract theoretical definitions generally are not rich in empirical content. Yet, adding empirical facts to a grid remains possible, especially since it cannot be assumed that researchers would be able to completely block out their previous knowledge while establishing types and categories they use in their analysis (cf. Flick, 1995, p. 165). Rather, we employ a “fairly classic set of analytic moves” (Miles/Huberman, 1994, p. 9), beginning with the first encoding of the material, to the production of personally annotated “memos” and the identification of patterns, including the construction of generalizations concerning the consistent peculiarities found in the data – which in turn form the basis for theoretical constructs (cf. as well Robson, 2001, p. 459).

In order not to neglect the “advantages of an open, inquisitive and hypothesis-generating methodology” in the context of the present investigation, we adapted and reworked the category grid to fit the material. During the analysis it became clear that in some records the children and adolescents were not depicted as either objects or subjects. Rather, there were few or no comments made on them at all, creating the need for a whole new category. This process of first preparing a theoretical model for analysis and then adapting it to the actual material resulted in three main types that can be differentiated according to their respective nuances and figures:

1. **The absent child**
2. **The child as object of concern**
3. **The child as agent**

These types represent basic theoretical frames or ideal types inasmuch as they are linked together as a recurring “set” in the process of such typing of characteristic features in the material (cf. Kelle/Kluge, 2010, pp. 83ff.). The characterizations of children and adolescents found in the records, however, sometimes run opposite to these types: The descriptions of children vary even within a single case record or correspond to very different types than the ones quoted here. Thus, the analysis attempts to delineate the characterizations as defined by the caseworkers, whereas in the case records themselves they intersect and sometimes superimpose each other. It is our assumption that the characterizations found in a case record may also be assigned to several types. That is the method we used when we analyzed and tallied the information from the records. In the following section we look more closely at exactly which types of children and adolescents may be assigned to the respective categories. Our goal is to gain insight into what types of children and adolescents are affected by child-protection measures, how they are viewed and described and kept involved, and what overall characterization patterns may be discovered.

THE ABSENT CHILD

The first category that emerges from the analysis of the material is that of the absent child. That may seem surprising in light of the material studied, since we are dealing with records stemming from cases of child-protection interventions, and one might assume that the children would be at the focal point of interest. We discovered this category in two of the ten case records we studied, where we found that the children and adolescents go more or less unmentioned. Rather, the caseworkers involved dealt primarily with the problems of the parents and the ramifications thereof, for example, alcohol dependency, mental health problems or domestic violence, here in particular on the part of the fathers (cf. Case 3 and Case 6). One may assume that, in these particular cases, the caseworkers were so concerned with the parents and were so emotionally involved themselves that they considered the problems of the parents to be of a pressing nature. This practice of focusing one’s attention elsewhere leads to the abused child becoming virtually invisible (cf. also Holland, 2000, 2001; Mason/Michaux, 2005). The behavior of the parents, who with their conflicts may not be able to pay proper attention to their children, is mirrored in the behavior of the professionals involved, who also

are oriented toward the conflicts between the parents and lose track of the child. Often the child is mentioned in the records only when the parents themselves make mention of them (cf. Case 6). The child or adolescent is considered simply to be part of the family or the family problem (cf. Mason/Michaux, 2005).

The comments studied in such cases include information about the difficulties present in the family, but they reveal little about how these difficulties affect the child. For example, in one case it was documented that the parents had had a violent argument while the child was sleeping (cf. Case 10). The caseworker went on to describe the conflict between the parents in great detail, assuming that the child was not involved since it had not experienced the argument first hand: Because the child had been asleep, no further impact was expected for the child (“Anna was not involved, sleeping at the time”) (Case 10, p. 9). This quote shows clearly how the caseworker had been so concentrated on the parents’ conflict as to assume the child was not affected. Other records do present the effects of the parental conflicts on the children, but do not go any further into the consequences. In Case 8 the caseworker noted that “the children are often present during such disputes” (Case 8, p. 44). There is evidence that the caseworker assumed that the repeated experience of such violent arguments between the parents would indeed endanger the child, but no consequences were drawn from this observation – or at least they were not noted in the record (cf. Case 8). Here, the caseworker sees the child less as an individual and more as a member of the family, whose major problems (stemming from the violent conflicts between the parents) chiefly have to be resolved. The interests of the child as an independent agent (cf. chapter 4.5.3 The Child as Agent) are not perceived and thus fail to gain entry into the case documentation. In the picture drawn of the family the child becomes “invisible.”

In light of the question surrounding the participation of children and adolescents in child-protection interventions, such “invisibility” of minor children and adolescents is a problematic matter indeed. It points to the fact that children and adolescents may not be receiving the proper attention in child protection, or that they are being relegated to the sidelines where they have little chance to be embraced as partners in

the intervention, e.g., in the assessment of the dangers present or by participating in the course of the helping process, whether verbally or nonverbally, directly or indirectly. To be sure, this is a tendency that, as previously mentioned, is present in only two of ten cases, whereby our sample of ten case records cannot be seen as a representative analysis. Nevertheless, it does allow us to point to certain typical tendencies present in the data.

But the type found most in the material at our disposal was the child as object of concern to the professional caseworkers – indeed, to all adults concerned.

THE CHILD AS OBJECT OF CONCERN

The child as an object of professional concern was found in nine of the ten case records we looked at, whether in part or more extensively. When we speak of the child as object we mean that children and adolescents become the object of a diagnosis or concern of adults, particularly of the professionals involved. Alternatively, we pose the concept of children as agents who can determine their own situation, are concerned about their own safety and protection, and can at least contribute to how that protection is deployed.

From our analysis of the case records we have the impression that, in contrast to such a construction, children and adolescents generally are treated as passive by the professional caseworkers and not perceived as actively involved agents. In some instances they even seem to belong to the world of objects, as the following quote clearly demonstrates: “In the living room there was further the common daughter. (...) During the interview she was present on the sofa and was watching TV” (Case 9, p. 3). The presence of the child is reported, and it is also noted that she was watching TV, but the record says nothing about the child’s reaction to the caseworker, whether she participated in the “interview” – or indeed whether she had any reaction whatsoever or said anything about her view of the situation.

We want to look closer at the phenomenon of characterizing the child as an object of adult concern. We delineate three different types, reflecting a change in the concepts of childhood in connection with discussions of child protection: (1) the self-damaging child or the child as a victim of accidents, (2) the child as a victim of abuse and neglect (“at-risk child”), (3) the child with needs.

The Child as a Victim of Accidents

An example of this may be found in Case 10, where the child's injuries ("numerous bruises," "skull fracture," "cerebral hemorrhage"), which were so severe that the child had to be put in an artificial coma, were depicted as a string of unfortunate circumstances and actions. From our analysis of the case record we cannot determine definitively whether or not this was a case of abuse. What we can say is that here the child is definitely characterized as a victim. The events leading up to the injury of the child are described in the record as follows: One early evening the child "slid off the chair in the kitchen and hit her head on the floor"; she sustained "two bruises to the face (...), since she hit her face against the drawer knob of the changing table"; later in the same night the mother's partner accidentally turned over the "defective" bed the child was lying in (Case 10, p. 32). Despite some objective indications and contradictory statements on the part of the mother, any suspicion of abuse on the part of the mother was excluded by the caseworker. The record contains no evidence that an effort was made to clear up the details of the accident or to further understand the child's situation.

In defense of her assessment the caseworker refers to a report from the emergency room at the hospital. The letter she refers to says that it was not completely clear whether the injuries sustained by the girl were due to foul play or stemmed from an accident. Further, the caseworker supports her decision, which is not explicitly documented but apparent implicitly determined the further course of the intervention, by quoting the statement of a social worker from a nursery school: "When the social worker was asked whether she saw a danger to the child if remaining in the home together with the mother, she emphasized that this was not the case since Ms. X was such a loving mother" (Case 10, p. 34). On the one hand, this is further evidence of how perspectives are gathered to legitimize decisions and to support the taking or omission of actions. On the other hand lies the thought that any abuse of children could have been caused by a want of love on the part of the parents. Yet, the author of the case record did not follow up on this argument. On the contrary: such a "loving mother" (ibid.), so the argumentation, would not be in a position to abuse her own child – and certainly not to this extent.

A further tendency that we were able to observe in

other case records can be also shown in the exemplary analysis of this case. The assessment of the professional caseworker, sometimes made even during the very first meeting, often is being kept up in the documentation in the whole course of the helping process. The phenomenon that someone subsequently perceives particularly those pieces of information that confirm an already existing assessment is known in psychology as "selective perception" (cf. Ellis/Newton, 2005). The terms "confirmation bias" or "groupthink" (Janis, 1982; Janis/Mann, 1977) are also used to illustrate how important information can be blocked out or dismissed in such a process of self-confirming perception – or how such processes are oriented toward upholding the majority opinion of a group. In the case at hand, the responsible caseworker tends to want to garner support for her own first impression and reject any developments contrary to that assessment. She writes: "Child Welfare Services has no information at its disposal that Anna has been exposed to any danger of direct trauma" (Case 10, p. 32). Therefore, this author sticks to the position to further lend credence to the accident version of the events.

But Case 10 may also reflect a well-known pattern of explanation for injuries in children going back to the beginnings of research on child protection (Tardieu, 1857). The opinion that children get broken bones by accident or even on purpose to put pressure on their parents (Sellenet, 2006) was replaced in the further development of child-protection research by other means of explanation – especially about 100 years later as part of the "rediscovery" of child abuse in the 1970s (cf. Wolff, R., 2010b). In the case record in question, the suspicion of abuse is not followed up on; the matter is laid to rest, and instead the caseworker goes back to the question of which parent is best suited to have custody of the child. The clearly violent conflicts in the family or of members of the family remain undiscussed and unaddressed.

The Child as Victim of Abuse and Neglect

The characterization of children as victims of abuse and neglect was found in three of the ten case records examined. This characterization is based on an orientation toward deficits: The caseworker concentrates on the absence of medical care or of other obvious signs of disturbances of the child. This approach is combined with

a number of corresponding observations such as “weak bladder,” “infection,” “encopresis,” “anal retention,” “temperature deviations,” “pseudocroup,” “small head” – “microcephaly,” “weighed only 5.8 kg at 8 months” (Case 8, p. 50). On the other hand, the view of the child as a victim of neglect concerns observation of hygienic circumstances: “The employees at the daycare center report that both girls wore yellow and brown discolored rather than fresh underwear. Ms. K. noticed that B.’s hair was greasy and unwashed. Ms. K. would like the children to be clean and picked up on time” (Case 1, p. 28). Common to both approaches is a focus on deviations from the norm, whether medically or hygienically.

The concern about a child being or becoming a victim of abuse and neglect is connected to the emphasis put on the living quarters of the families. The caseworkers often make notes about how clean or unclean an apartment is. They provide detailed descriptions (“mopped,” “swept”) as well as photos of the housing situation that are meant to be objective proof of problematic circumstances (cf. Case 1). “According to the landlady the children cannot be properly taken care of in the apartment” (Case 8, p. 2) is found in one case record. In another (Case 5, p. 4) we read: “The apartment is a complete mess.”

The concern for the welfare of children in living arrangements that deviate from the norm is employed by social workers to support the case for interventions into the family system. In three of the ten cases looked at there is a clear willingness on the part of the caseworkers to consign children, especially young children, quickly and “preventively,” to a care facility when they consider the living situation and the hygienic conditions to be questionable (cf. Cases 2, 3 and 8). The documentation of the further course of action shows that the children were first removed from the family and later the substantiating assessment was added. The following quote documents this decision-making process: “The living quarters seemed to me to be squalid, in part full of garbage (among other things, moldy glasses from some liquid on the living-room table). For this reason, I decided to take the children into custody” (Case 1, p. 3; cf. also Cases 2 and 8).

The characterization of children and adolescents as victims thus addresses various forms of neglect and abuse as well as deficits in the care and the hygiene of the respective children. In the case records we studied such observations often led to rapid actions on the part

of caseworkers, be it removing the children from their home or instituting regular home visits or family welfare measures.

When the caseworkers try to come to a conclusion about a suspicion of abuse or neglect, they tend to proceed very carefully (see above Part 3, 4). The case records contain few comments by the responsible persons as to exactly *how* they determined whether or not a case of abuse was present and whether or not future abuse might be expected. Whenever the main concern in the records is that the children and adolescents may become victims of abuse and neglect, it seems that the practitioners are mainly interested in finding evidence for an endangerment of the well-being of the children in question, both in the professional and in the family contexts. Beyond gathering simple facts, some of the case records give the impression that the social work assessment process has somehow taken up features of a court hearing where circumstantial evidence is brought forward and discussed in order to confirm or repudiate the suspicion of an endangerment of a child’s well-being. In Case 10, for example, the parents as well as the employees of a daycare school are called as “witnesses” in a suit concerning the assessment of child endangerment: “According to the parents and the daycare school, the child’s well-being is ensured” (Case 10, p. 72). In another case, where in fact a court hearing later addressed whether or not the child was a victim of sexual abuse, the judge and the caseworker relied on the statement of the girl, who told the judge that she had been misunderstood: The suspicion that her father had sexually molested her was not true. Thus, the child became a witness for a situation she was deeply involved in. In the case record there are indications that the girl had a conflict of loyalty since she wanted to protect her father and her whole family, while at the same time she had difficulty speaking about the suspicion of sexual contacts (or even rape) on the part of her father in front of the court.

In this particular case the professional caseworkers depended on a medical report concerning the girl’s physical condition. The report said that the girl’s hymen was still intact – which would seem to rebut the suspicion of sexual abuse (cf. Case 2). This example shows just how oriented everyone was toward apparent physical evidence – and toward determining the truth of the case based on presumed objective evidence. This, however, overlooks,

as recent medical studies have shown (Hermann et al., 2008), that an intact hymen is not solid proof of the absence of sexual abuse. In the material we studied there is often evidence of a struggle to find the proper interpretation, the attempt to objectively document and investigate a suspicion of abuse or sexual maltreatment. The danger in this procedure, however, is that the children and adolescents involved, with all their feelings, perspectives and needs, may all too lightly be left out of the picture (cf. Case 2).

This example also demonstrates the ambivalent situation the professionals involved are faced with and must deal with on a daily basis. They often have to make decisions solely on the basis of the statements or opinions of others and less so on the basis of their own observations. They often deal with information received indirectly, which can produce new insecurities about the reliability of the sources. And yet even in the midst of such uncertainty they have to make far-reaching decisions. The constant danger is that they will overlook or overestimate something, regarding a serious case of abuse as an accident or unjustly citing abuse where there is none.

That professional caseworkers shy away from “diagnosing” abuse need not be a sign of a lack of professional competence or self-confidence; rather, it may also be seen as the expression of “horror and disbelief” that parents can do such violent and neglectful things to their children. Steele/Pollock (1978) noted that, during their own investigations of child abuse, they often had difficulty imagining that a mother, for example, “would really have inflicted a skull fracture on her own 3-month-old daughter” (ibid., p. 161).

Up to now we’ve spoken only about cases in which there was the suspicion of physical abuse or abusive actions. If emotional suffering is mentioned in the records at all, it is usually as a result of physical violence, for example, when the caseworkers wonder what the impact of physical abuse might be on the children. In the material studied, the body, the external representation of the child’s world, appears to lie at the center of attention. Here’s a quote from one of the case records to support this observation: “It is furthermore correct that F. is now physically healed. The child’s daycare center, however, feels that F. has not yet recovered completely psychologically and is apparently still very anxious” (Case 10, p. 68). This observation of the caseworker refers primarily to the physical health

and only secondarily to the child’s emotional state. The emotional situation, the anxiety, is seen as the result of a physical injury the child suffered from an accident or from abuse on the part of the parents – which is not cleared up in the record. The statement quoted by the employee at the daycare center concerning the child’s anxiety almost appears to be simply an incidental fact. The observation concerning the child’s emotional state – this much can be culled from the case record – is given no further attention in the course of the intervention. The Child Welfare Office withdraws from the case until the next family crisis occurs, despite the fact that F. appears to be “anxious.”

Because of the complexity of deciding whether or not abuse is present in an individual case, which seems to be the product of a communicative process of negotiation (Wolff, R., 2008) that may not provide final certainty, and which is seen in the three case records we studied on this matter, the caseworkers tend to remain cautious in their argumentation as well as in their decisions. They try above all to avoid making wrong decisions, especially with respect to expressing suspicions toward the parents. This in turn means being willing to accept that they may be misinterpreting or downplaying abuse and neglect in situations where these behaviors are only hinted at – and then failing to follow up on the leads. Of course, in cases in which their concern about the children and adolescents as victims of abuse and neglect dominates, the parents still enjoy protection through the legal principle of “innocent until proven guilty,” something both the caseworkers and all other professionals involved as well as the parents themselves greatly respect.

In summary, if the children were depicted in the case records as victims of abuse and neglect, we can be assured that the responsible caseworkers did describe the family situation and especially the living arrangements. The records give the impression that in such cases the caseworkers did strive to collect reliable information to confirm or disprove the suspicion of abuse. This information is present in the records, in the form of one’s own observations and assessments, but often also in the form of statements of others (neighbors, teachers, doctors). It also becomes clear that the statements of the parents are given more credibility than those of the children in the documentation.

Based on the documentation of their own assessments, however, the caseworkers were overall restrained

and noncommittal. Their classifications were in part only implicitly distinguishable (for example, in the positions communicated to the courts or in the type of intervention chosen). Explicit statements are rare or absent altogether from the documentation found in the case records.

Characterizing children and adolescents as victims of maltreatment, abuse and neglect is but one aspect emerging from our analysis of the case records. In the next section we summarize the characterizations of children and adolescents in which the caseworkers put the central needs of the children and adolescents at the forefront of their considerations.

The Child with Needs

In five of the ten case records we studied we determined on the basis of the documentation that the caseworkers were particularly interested in the needs of the children and adolescents. In these cases we speak of a characterization of children and adolescents as the “child with needs.” The caseworkers refer to concepts and interpretive models from developmental psychology. One of the central motifs is the proper and sustained development of the child. In one case record, for example, it is noted that the child has “age-appropriate development with language deficits” (Case 10, p. 31). In another case record concerning a 2-year-old girl we read: “She was properly clothed and could express herself age-appropriately” (Case 9, p. 3). In Case 5 there is the following statement: “During the contacts with the Child Welfare Agency the undersigned noticed that daughter Y. had not changed since the last contact. Ms. X. told the undersigned that her daughter had gained weight and was progressing quite well. The undersigned had the impression that this was not the case” (Case 5, p. 40). These notes reflect an age-specific (ideal) image of childhood defined by certain stages that must be reached in the proper order (cf. the overview in Trautner, 2003). Attachment theory in turn seems to play a less important role as a conceptual approach. An exception to this rule in the case records studied may be found in one intervention planning where the caseworker does refer to concepts from attachment theory when discussing the planned measure: “to protect emotional relationships,” “to establish a positive attachment,” or “to enable regular contact for cultivating relationships.”

The characterization of children as “children with needs” has, on the one hand, the goal of accompany-

ing minors through their developmental phases; on the other hand, it serves to sensitize parents to the needs of their children. One caseworker made a note of this nature: “The parents recognize the needs of the three daughters” (Case 1, p. 58) and learn to perceive them directly (cf. Case 7). In the cases we studied the emphasis lies more on the short-term assurance of the child’s needs. What we see less of in the documentation is the goal of acting upon the life situation or milieu of the children to ensure a long-term fulfillment of their needs. Sometimes it would appear that the caseworkers are concerned only to prevent “the children from getting in the line of fire” (Case 9, p. 36) or to remove them completely from such danger.

In addition, attention is paid to the needs that are conspicuous and visible for all to see. In the cases studied, the caseworkers are apparently concerned more with ensuring the basic needs of the children and adolescents and less with enabling their more comprehensive psychosocial necessities (cf. Otto/Ziegler, 2008b). For example, in the assessment of whether a 2-year-old child should live with her father, the criterion discussed is that the father has a crib as well as a car seat for the child, and that the father is in the position to care for the child and take her to her doctor appointments (Case 10, p. 54). Those are basic needs at the level of physical integrity and development. In other cases, a certain proof for the assurance of physical and healthcare needs lies in doctor visits: “The daughter is seen regularly by a pediatrician” (Case 4, p. 40). In another case the physical integrity of the child is monitored through regular visits to the family by another professional: “Ms. O. (the midwife) will be visiting Ms. X. twice a week and examining the child” (Case 5, p. 40).

Above and beyond the physical needs, in one case the living arrangements were described as part of the setting for fulfilling the child’s needs: “The present apartment is not suited for the birth of a further child.” This passage hints at the idea that, from the vantage point of the caseworker, there are certain criteria that need to be fulfilled for an apartment to meet a child’s needs. This is even more explicit in the example in which a caseworker stipulates that the living situation be of a certain nature for the child to remain living in the family: “Household organization, cleanliness and hygiene must be practiced daily. The child’s mother must adapt her daily schedule

to fit the needs of the child” (Case 3, p. 21). The house-keeping situation was also seen as part of the regular daily routine, which was important to the child’s development. Both were considered prerequisites for meeting the needs of the child.

But the view of what constitutes the needs of children can also lead to ambivalent positions concerning the role and actions of the respective caseworker. In light of the challenges of modern child-welfare routines, it is certainly not easy for the responsible person(s) to ensure that the needs of children and adolescents are fulfilled despite unfavorable circumstances. The caseworker involved in Case 6 openly questions whether the child is not missing out on something, and the caseworkers responsible for Case 2 express their doubts when writing the assessment whether they have in fact been able to adequately meet the children’s needs.

If we compare the two types, the *child as victim* and the *child with needs*, we can clearly see that the pattern of concern for abused or neglected children and the pattern of concern for the needs of children cannot always clearly be distinguished from each other. There are many overlaps in the two types. What is common to both types is that children and adolescents are considered to be objects of adult concern, even if the characterization of these needs often remains very general in nature. Providing more concrete descriptions, as suggested by English and American researchers (Department of Health, 2000; Brazelton/Greenspan, 2008), seems to be a more difficult task. What’s more important: The view of minors as actors does not (or only rarely) chime very well with this sort of characterization. Children are not described as persons who are in the position of reflecting on their own situation and acting in a self-determined manner. Rather, they are always dependent on the “care” of adults who protect them from abuse and neglect and provide for their needs. The opposite thereof is the child as actor.

THE CHILD AS ACTOR

In the following we describe the characterizations of children and adolescents with which minors can be included in child-welfare processes as actors, as distilled from the case records studied. Here children and adolescents are seen to be active agents who move within their own life and family circumstances and can very well judge and

assess them from their own viewpoint. In this characterization, children and adolescents become the effective framers and protagonists of their own lives, albeit from a different perspective than adults. We divide this type into three forms: *the child as deviant actor*, *the child as resilient actor*, and *the child as protagonist*.

The Child as Deviant Actor

When children and adolescents were described in the case records studied as actors, in three cases this occurred in the form of a description of their demonstrating disruptive actions or behaviors, in particular with respect to their behaviors in school. Case 7, for example, contains such a characterization: The child is depicted as demonstrating disruptive behavior in school, suffering from a lack of structure and classified as having “attention deficit disorder.” In a checklist, the child’s behavior is described as making “uncontrolled, compulsive noises,” “not sitting still in his chair,” not properly doing his homework, attacking “other pupils with bad language,” “abusing” others, “hitting” others, and initiating “sexual attacks and assaults” (cf. Checklist of Behavioral Abnormalities, Case 7, Appendix 1). In another case, the caseworker noted that an adolescent girl had insulted her teacher and was otherwise acting brashly. The impression of the teacher is also noted: “The older sister is insubordinate, she blocks all cooperation in school” (Case 2, p. 8). In Case 1 it is noted that the girl in question was “trying to get attention” by taking a cellphone from one of her fellow pupils. Quite different from the previous characterizations, here at least the actions of the children and adolescents are addressed directly, though the focus lies squarely on the undesirable, “disruptive” behavior.

After the mention of the disruptive behavior, however, there quickly follows the demand for an intervention in order to stop such disruptive behavior: “All three children require close and consistent control to ensure their completion of school tasks as well as an orderly daily routine” (Case 5, p. 9). The clear call here for “normalization” is aimed squarely at the further development of the children and adolescents, but also at reducing behavior that bothers adults in the school or family. The helplessness caused by this behavior becomes clear in the following quote: “J.’s behavior continues to be problematic, and Ms. H. is overtaxed and unable to adapt” (Case 5, p. 8). A similar observation is made by Mason and Michaux (2005)

in their study of case records. They note that the children and adolescents in the case records in question are depicted by the professionals involved as “rabble-rousers” who, because the focus is on pedagogical work, need someone to (re)establish limits and normality. Liebel (2010) points out that the idea of a child as a “troublemaker” is in effect a sort of age discrimination, the goal of such a characterization being that the behavior of the children or adolescents be adapted to a system based on the normality concept of adults.

The Child as Resilient Actor

A further characterization of the child as actor is that of the resilient child. We discovered this characterization in one of the ten case records studied. Resilience-based approaches are concerned with the question of how children can succeed in living successful lives in the light of (or despite) adverse circumstances: “Resilience designates a form of hardiness that enables people to successfully cope with demanding situations in life” (Metzger, 2010, p. 97). Children, however, do not spontaneously develop resilience, but rather need impetuses from their environment, for example, in the form of interactions with supportive “resilience tutors” (Cyrulnik, 2001). “Resilience is thus the result of a dynamic process that takes place between children and their environment” (Metzger, 2010, p. 97). Yet such processes resulting in resilience do not occur continually and steadily, and they only rarely affect all spheres of life equally (Manciaux, 2001). In the secondary literature, however, there is the criticism that the concept of resilience may lead to shifting the socio-political responsibility to the actors by raising the expectation that vulnerable persons should help themselves by developing resilience (cf. Ebersold, 2001; also Rose, 2000). According to this train of thought, resilience then becomes something that can be *expected* of another person, which in turn blinds people to the fact that resilience doesn’t just “happen,” but rather develops and grows as part of relationships, most effectively in triads (cf. Wolff, 2010a). In one of our case records behavior that could have been interpreted as resilient behavior was in fact construed by the caseworker as problematic behavior. The child’s behavior did not conform to that demanded in Western society, where childhood is considered a period in which the child has little responsibility and serves to prepare the child to enter the separate sphere of adulthood. This idea of two different

spheres spanning childhood and adulthood may also be found in systemic-normative conceptions of family life, where functional familial constellations demand a clear generationally based distribution of roles, and where children and their parents remain in their respective spheres of action and influence (cf. as well Minuchin, 1978).

In the case at hand the behavior of an 11-year-old girl who is trying to support her sister in a difficult family situation is seen as problematic: “It is conspicuous that she shows very nurturing and adult actions” (Case 9, p. 33). Her caring attitude toward her sister is interpreted as an adult-like – an unchild-like – behavior. In another note we read: “She’s like a little teacher who, for example, supports her sister in play situations. (...) She’s very grown up. She bears the responsibility for her younger sibling as well as for her mother. Especially X. should be allowed to return to the role of being just a child” (ibid., p. 45). This latter passage again clearly demonstrates the delineation demanded between child and adult behavior. When children, through such actions, enter the sphere of the adults, the parents and the caseworkers, they lose their status as children and have “to return to the role of being just a child” (ibid.). From the perspective of the caseworker the child is also a victim of the familial circumstances that force the child into inadequate behavior. The latter is known under the term “parentalism” or “parentification”: The children are forced into assuming the role of parents and burdened with such an immoderate amount of responsibility that they are overwhelmed and endangered. One could, of course, on the contrary, see the girl in our example as a resilient actor who actively copes with the life situation she is confronted with by dealing with the adverse situation, by showing resilient behavior and by assuming responsibility for herself and her sister.

The ambivalence is clear: On the one hand, the caseworkers involved in child protection must protect children and adolescents from actual or potentially damaging familial constellations in which they are overwhelmed by having to replace (or be misused as) their own mother or father. On the other hand, they run the danger of discriminating and regulating the resilient behavior of minor actors as “age-inappropriate.” Thus, caseworkers have to develop a tolerance toward ambivalence (cf. Bauriedl, 1984) as well as the ability to cope with a paradox (ibid.) – to protect children and adolescents while also supporting their resilient behavior.

In the passage quoted above there are also signs that the resilient behavior of children and adolescents may prove to compromise the expertise and decision-making powers of the professionals involved – something they do not want to share (cf. Davis, 2004). Pluto (2008) wrote in this regard that social workers see the competence of children and adolescents as a danger to their own competence. This tendency is present in Case 9 of our study: The child in question should remain in the intended role as child and not become an adult or a “little teacher.”

In contrast to the idea of childhood in which the worlds of children and adults are separate entities with their own characteristics and expectations (cf. Lawy/Biesta, 2006; Liebel, 2010), there is in the secondary literature an emphasis on human development progressing along a continuous line, from birth to death. Classifying people as “children” or “adults” is in effect a radical simplification of things. Thus, the “demarcation line” between children and adults should be given less weight, not the least in order to guarantee greater participation (cf. Hill et al., 2004).

The Child as Actor in the Family

As described above, when children and adolescents are considered subjects in the material studied, the child is often considered a “troublemaker” but also as an agent assuming too much responsibility. Yet there is also a third pattern that we call “the child as actor in the family.” This characterization occurs particularly often in the case records of an external welfare organization that works only in the homes. Yet, also the responsible caseworker from the Youth Welfare Department then repeats verbatim excerpts of the reports of this organization in her own notes and uses the concept of the child as an actor to characterize the adolescent we describe below.

In Case 5 we read about a 16-year-old male adolescent: “He is happy to have a good relationship with his mother and enjoys her attention, though if need be he does take risks to assert his short-term, spontaneous interests. However, he can be reached through conversations and can maneuver his way through a muddled situation quite adeptly” (Ibid., p. 31). This passage contains a number of references to children and adolescents being actors, something not found in the other case records. In this description, the author, a social worker from a private charitable organization, points to the de-

isions and interests of the adolescent, who is depicted as an actor interested, on the one hand, in receiving his mother’s positive attention, but is also willing to assert his own interests and be drawn into a conflict with his mother if he is aware of the risks involved. The caseworker thus characterizes the adolescent as an actor who weighs risks and interests against each other and then makes his own decision. He wants his mother’s praise but also wants his needs fulfilled. The second sentence quoted above suggests that the adolescent is being described as an actor not only able to decide for himself, but also to actively control social situations.

In the same case record we see, however, that this characterization is not necessarily attached to any particular age of the children and adolescents in question. There the 8-year-old sister of the adolescent described above is portrayed as an actor within her family: “She has learned how to judge J.’s behavior and likes to pique him. This gives her control of the situation and makes her feel superior and strong. She in turn makes demands on her mother’s attention through negative behavior such as shouting and crying!” (Case 5, p. 32).

In the description provided by the caseworker the sister would seem to be an equally self-confident actor with the ability to participate in situations (as here is the case) by using her insight into her brother’s behavior to goad him and to be strong in her interactions with her brother. Her shouting and crying are not simply child-like expressions, but part of her social behavior. In both cases the characterization, however, is limited to the context of the family. This observation agrees with the results from international research describing how children are often depicted in child-protection processes as reacting only within their relationship to their parents, with little information provided about their overall life experiences and coping strategies (cf. Holland, 2000, 2001; Mason/Michaux, 2005). In the case in question here, the caseworker preparing the documentation concludes with a comment very typical for this pattern, to the effect that the girl only “wants to find her place in the family” (Case 5, p. 32).

We interpret the fact that children and adolescents are seen as actors only with respect to their own family as a confirmation of the conception that children and adolescents by nature always “belong” to their families. But we are of the opinion that it is a positive move to

deal with children and adolescents as actors of their own accord in families: We think that this approach better allows the interests of such minors to be brought to the forefront than other characterizations. Here children and adolescents are not judged solely as victims, but are also seen as active players, providing them with a better basis for being expected to participate in the intervention process. But we also think that such a characterization must extend to beyond the family proper. The next section is devoted to such a characterization as we found it at least partially in the case records.

The Child as Protagonist

In the newest literature on childhood it is assumed that children and adolescents are actors not only within their own families or at school, but that they can effectively participate in all parts of society. Participation is not limited to those areas created by adults, but also extends to other forms of social inclusion that children and adolescents may develop on their own. When we speak of children as “protagonists,” we are attributing to them the capability of taking up the initiative on their own, of changing their own life circumstances either individually or collectively in a process of self-organization (cf. Liebel, 2009). Within child protection such a figuration means that children and adolescents must have the possibility not only to become active on their own, to get help and to participate in that help, but also that they be in the position to collectively organize such assistance (cf. Robin, 2010).

In the material we studied only one case record contained aspects of such a characterization of the child as an active agent toward the professional caseworkers and toward the helping process itself. None of the other case records contained any references to the children and adolescents participating in the process at all from the very first report and the planning of the helping process to its conclusion. Indeed, it would appear that often the children and adolescents in the case records in question participated in the service planning conferences but that they had no say in how the case was reported or how the helping process and its termination came about.

One case record does describe how a girl, Z., became active on her own: Z. went to her class teacher and told her of certain actions of her father which she didn't like.

She described molestation that could be understood as sexual abuse and said she would like her father to stop doing this. But she also said she wanted the father to stay in the family, and that the teacher shouldn't pass on the information to anyone.

The analysis of the case provides hints that a particular dynamic developed during this intervention which stymied the girl from structuring the further course of the process. The worried teacher informed a colleague and the Regional Social Services Office of the local Child Welfare Department – without informing the girl of her actions. The caseworkers of the Child Welfare Department were also very worried, especially that the presumed molestation on the part of the father might continue unabated. Contrary to the original position of the caseworkers toward the girl (“nothing will be done without your approval,” Case 2, p. 28), in the end they decided that it was urgently necessary to act even without the girl's permission. Following many consultations with teachers, social workers and other persons from a counseling service for sexual abuse – without inviting the girl – they determined what form of abuse was present. According to the case record, the decision was then made by the responsible person from the Child Welfare Department to “confront” the mother and father with the accusation of abuse – against the expressed will of the child.

Another event heightened the concern of the caseworkers: The mother of one of the girl's girlfriends called the Child Welfare Department and said that Z. had told her daughter that she was being “raped” by the father. At this juncture those responsible at the Department commenced official legal proceedings at the Family Court with the goal of withdrawing parental custody of the girl. During the subsequent legal proceedings, however, the girl testified that her father had indeed touched her in an “unpleasant manner,” but that he had in fact never “raped” her. To prove the latter statement, she agreed to a gynecological examination, which showed that at the time of the exam her hymen was still intact. This fact was taken into consideration in the negotiations on excluding the possibility of rape.

In summary, from our study of the case record we have the impression that the girl was initially treated as a protagonist. This is, in any event, the only case of all the cases we looked at which describes how a child or an adolescent actively turned to a professional or an

institution for help. Z. confided in her teacher and very clearly formulated her wishes and needs with respect to further actions or interventions.

In the course of the intervention, however, Z. became a “misunderstood protagonist”: Her expressed wish that the teacher not pass on her cry for help was not heeded by the teacher and the other professionals involved. Quite in contrast, only a few weeks later the responsible caseworker in the Child Welfare Department made two teachers – in addition to two principals, someone from a counseling service for sexual abuse and later a translator as well – “insiders” and concerned adults of the case. In the scope of their possibilities, the caseworkers failed to provide the girl with an adequate answer to her call for help, that the father should stop his unpleasant approaches and actions. In the subsequent legal proceedings, the highpoint of the entire process, the father’s behavior, his unpleasant touching, described by the girl as “unusual,” was no longer addressed. At the girl’s school, however, the rumor soon cropped up about her having been raped by her father, which led to her being mobbed by other pupils and her expressing the desire to leave the school. There is no hint in the case record that Z. received any further support in coping with the actions of her father, the mobbing going on at school or the court experiences.

In the end the description of the case in the case record gives the impression that the adults involved removed the whole process from the young protagonist’s hands – despite their good intentions. Their efforts to find proper help for the girl confronted her with a result she couldn’t have been very happy with. The caseworkers, too, come to this conclusion, to judge from the record at our disposal: They describe the case as problematic since they were not sure whether they in fact had been able “to permanently lower the girl’s burden” (Case 2)⁴.

We may assume that such a scenario even if present only in a single case of our material, plays a greater role in everyday child-protection practices: The efforts of children to get help on their own and to be involved in how that help is being provided is not (or cannot be) always adequately addressed by the professional case-

workers. This is certainly due to the means and structures under which the caseworkers have to work, which make it difficult for both parties to shape the helping process to allow for equal participation. The figure of the misunderstood child or adolescent is also a topic in the secondary literature, where it is emphasized that children and adolescents have the impression that their intentions and goals are being misunderstood or misinterpreted by the professionals involved (cf. for example Leeson, 2007).

THE PARTICIPATION OF CHILDREN AND ADOLESCENTS IN CHILD PROTECTION: THE ACTORS’ VOICE

Our analysis of the case records revealed a number of instances in which the professional caseworkers were willing to include the children and adolescents in the helping process. In the scope of the program “Looking after Children,” Roose et al. (2009) made similar observations and reported on a paradigm shift taking place in the composition of child-protection case records: More emphasis is being placed on writing reports in a participatory style (cf. *ibid.*). This tendency is also present in the records studied as part of our project, where a number of phrases, sometimes used rather formulaically, point to the efforts of the caseworkers concerned with child protection to reach mutually agreeable decisions. In any case, they describe their own actions as participative: “The agreement was made with Ms. P. to make regular visits to her home” is stated in Case 4 (p. 39). This wording would seem to demonstrate that a decision was made and an accord was struck with which both parties were satisfied. In the following passage, however, it would seem that the caseworker still retained the upper hand by asking the questions and laying out the future path of the process: “Ms. P. could not explain why the certification (...) had not yet been delivered to the nursery school” (Case 4, p. 39). On the one hand, there are some references in the researched material that seem to point to the fact that the participation of children and adolescents has become normative in child-protection work. Yet, the characterizations of the

4 The family in question here had another adolescent girl whose perspective we could not take up here.

children in the material we studied also clearly reveal images of them that are not consistent with the notion of participation. Whenever minors are depicted as victims or as objects of adult concern – or when they are construed solely as actors within their families – then their chance of participating fully in child-protection processes is small indeed.

PARTICIPATION IN LIGHT OF THE DOCUMENTS ON INTERVENTION PLANNING

The data material at our disposal also shows that the emphasis in the description of participation lies in the organizational practices of planning the helping process. Pluto (2007) also noted that planning conferences as administrative procedures only allow for rather limited opportunities for participation. The rules of the processes, with respect to the place, time and content, are all controlled by the professionals involved. When participation is mentioned, the literature shows that it does not serve the purpose of including and emancipating the actors, but rather often ends up rejecting further efforts at participation or is even counterproductive (cf. Cruikshank, 1994; Baistow, 1995). In a newer study, the researchers of the German Institute of Social Work – ISA (Institut für soziale Arbeit e. V.) analyzed the discussions in the Helping Services Planning Conferences and revealed that in such a setting participation cannot easily be realized. On the contrary, such planning meetings reveal clear tendencies toward pseudoparticipation and self-legitimizing behavior on the part of the professionals (cf. ISA, 2010, pp. 75ff.; Hünersdorf, 2009).

Yet the planning process does offer both the caseworkers and the clients the possibility of implementing participation – even in child-protection cases. And both sides stand to profit from a better cooperation and a richer mutual understanding. In the documents and forms we studied on intervention planning we found major differences in what the documents demand of the caseworkers. Some documents reserve much space for depicting the position of the respective participants. The viewpoints of the parents, the children and the professionals are sought, as well as further differentiations of the various perspectives. Other documents are concerned only with very general goals and assessments, without concern for the standpoints of the individuals. Yet there were also forms that differenti-

ate between the different perspectives at all levels of the intervention process. For example, they may demand that the views of the participants on the familial situation and on the needs to receive help be noted, even supplying a table where the perspectives of all participants (parents, children, caseworkers, other professionals) can be filled in.

Different municipalities of course have very different practices. Even within a single municipal agency different documents may be used to plan an intervention. At least in one agency the caseworkers even developed or adapted their own forms. The case records also show that changes take place over time: In one record a form was used at the beginning which included space for noting the viewpoints of the children and adolescents, whereas by the end of the process this sheet had been replaced by another one that no longer asked for the child's opinion.

There are also major differences in the documents used to plan the intervention. Some assistance plans call for “general” and “precise” goals or “long-term” and “short-term” goals, whereas in other records the goals are differentiated according to the perspectives of the professionals involved, the parents, the children and adolescents. Often the more differentiated sheets remain empty or the various standpoints are not in fact differentiated. When the documents do request the notation of the standpoints of all concerned and the caseworker does include the various perspectives in the documentation, then that of the parents tends to take up more space in the caseworker's notes than the perspectives of the children and adolescents.

In the case records we studied we find indications that participation in child-protection measures is implemented very differently by the different actors. The reports of the caseworkers from charitable and nonprofit organizations tend to present the perspectives of the children and adolescents in greater detail, reporting on the needs, experiences, wishes and resources as well as the weaknesses of the children and adolescents. This method of directly addressing the experiences of the young actors in question can be interpreted as a sort of participation in the assistance process, albeit a weak one. It depends, of course, on how the children's voices are heard and what influence they have in the end on the entire process. The differences between the presentations of the caseworkers from municipal Child Welfare Offices and those from charitable or nonprofit organizations noted in our analysis must be

seen against the background of the very different organizational practices and contexts. The official documents for intervention measures by caseworkers in the Child Welfare Offices generally provide less leeway to record the perspectives of the children and adolescents. Sometimes only two pages are reserved for this information. Also, the amount of time allotted to the professionals in the public agencies to meet with the minor actors is strictly limited compared with that of their colleagues outside the official channels. This gives them fewer occasions to come to understand how the children and adolescents experience their surroundings and then to provide differentiated reports on their lives and the intervention processes.

The idea of participation is implemented very differently by the various actors involved, depending on their respective standpoint (cf. Healy/Darlington, 2009). One reason may lie in the fact that the caseworkers both within and outside of the public agencies who are concerned with the welfare of children and adolescents do not always have the knowledge and methods at their disposal to properly realize the participation of children and adolescents. “Participation is dependent on the strength of the professionals” (Pluto, 2008, p. 200). The material we looked at, in any case, includes no references that would have allowed methodologically or conceptually structured approaches (cf. for example Delfos, 2004) – beyond the existing intervention planning procedures – to discover the perspective of the children and adolescents and to enable their participation. Here, we agree with Kriener that, with respect to participation, there is “a clear discrepancy between aspiration and practice” (2007, p. 65).

THE INFLUENCE OF THE PERSPECTIVE OF CHILDREN AND ADOLESCENTS ON THE INTERVENTION PROCESS

Overall, our reading of the case records shows that children and adolescents have only a little influence in the course of the helping process, from the planning stage to its conclusion. This stands in opposition to the legal obligation of the professionals involved in child protection cases to enable the participation of the children and adolescents in all decisions that affect them. In Germany this may be found in Section 5 SGB (Child Welfare Law) – Social Law, Book VIII “Wish and Option,” Section 36 SGB, Book VIII “Participation” and the specifications of Sec-

tion 8a SGB, Book VIII. Internationally, this obligation is anchored in Article 12 of the UN Convention on the Rights of the Child. The obligation to allow children and adolescents to participate in accordance with these legal statutes represents a challenge to social work in general as it means questioning and reorganizing all practices – as well as reshuffling professional identities and attitudes (cf. Krappmann, 2006; Pluto, e.g., 2001, 2004). It is not only a matter of rights, but also of determining the legal, professional and practical means of implementation (cf. Cashmore, 2002).

Only one of the ten case records in the materials we looked at describes how a child sought help from a teacher who then reported the endangerment of the child directly to the Child Welfare Office. In all other cases contact to the Child Welfare Office was initiated by adults (in two cases by the police, in one by a landlady, in another by the father’s attorney, in two cases by the father of the child, in one case by the child’s paternal grandmother, in one case by a youth emergency service).

The perspective of the children and adolescents played a very minor role in the *assessment of the situation and in the planning of the helping process*. The reason for this lies in a view of childhood that strictly delineates the worlds of children and adults. As noted above, in such an approach children tend to be seen more as objects of adult concern than as independent actors who can take responsibility for the intervention process. And when children and adolescents are included, with all their needs, they are often seen by the professionals involved more as emotional than as rational beings (“he was sad,” “he cried”; Case 9, p. 32). They are questioned more about their *feelings* and less about their *assessments* of the problem at hand – although research clearly shows that in fact children and adolescents do want to be asked about how they view the situation, the problems and possible solutions (cf. Mason/Michaux, 2005).

In a number of cases, however, we did discover a form of *nonverbal participation*. This is evident in the description of the children’s behaviors, which are noted by other professionals and echoed by the caseworkers from the Child Welfare Offices. This form of participation is suggested particularly often by persons from schools and daycare facilities, as the following statement clearly shows: “The child did not want to go with the mother when she was being picked up by her” (Case 10, p. 12).

Overall, we rarely find *verbatim notations of statements by the children and adolescents*. Rather, they are reproduced indirectly, together with the perspective of the adults, the professionals and the parents (cf. Rose, 2009, with similar results). An example may be found in one record where it is stated that the child was questioned about the nature of the problem: “She said that Papa had gotten a warning from Mama. Her father uses bad words and drinks too much beer. (...) The father said to her ‘I’ll rip you apart.’ (...) She reports grave humiliations at the hand of Mr. X toward her. (...) She talks like an adult about how she sees her father” (Case 9, p. 33). This passage reveals a mixture of child-like and adult (caseworker) vocabulary. On the other hand, we discover the image of a child who stops being a child when she talks about her familial situation. Some research results, for example, by Mason/Michaux (2005), emphasize that children do not always want to thoroughly relate their feelings, but would rather talk more directly and concretely about the situation and possible solutions (cf. Robin, 2010).

The *desires of the children and adolescents with respect to intervention planning* are rarely discussed in the case records. When they are noted, it is usually in reference to the desires of the children and adolescents for their future or their leisure activities (cf. Case 4 and Case 5), but not concerning how the assistance measures could be crafted. This corresponds to a form of participation Pluto studied and labeled “participation has its limits.” This means that children are allowed to participate only in conjunction with certain matters. And even if the child does express a clear wish for how the helping process could proceed, the caseworkers may – and this is found in at least one case in our material – choose not to correspond to that wish (Case 2). There, the girl in question had expressed her desire that the mother not be informed about the father’s touching her, which she had thought was “strange” and might in fact be considered sexual abuse: “F’s position is clear: She says she doesn’t want it” (Case 2, p. 6). That the caseworkers nevertheless considered it necessary to pass on the suspicion to the mother may, even in light of the possible breach of the girl’s right to self-determination, seem understandable. What is problematic is the fact that the girl did not actually receive any direct assistance in asserting her wish to have the father stop his advances, which she considered unpleasant. Even in the subsequent legal proceedings it was never made clear that the father

should desist from touching his daughter in a way she did not want.

In one of the case records studied there is a hint that the child’s voice did have some influence in the decision of the caseworker, even though the child did not agree with how the caseworker had interpreted her statements. Originally, we read that “following a conversation [at which the child was present] it became clear that it was not feasible for the child to continue to live with the father” (Case 9, p. 45). Although the later removal of the child was justified by quoting the child’s statements, there are indications in the documentation that the child actually opposed the decision of the caseworker, felt sad about what had happened and suspected a “conspiracy” (Case 9, p. 39). Thus, the child is nominally included in the process but has no further way of following up on the decision of the caseworker and determining how her statements are employed. Archard and Skivenes (2009) emphasize that it is extremely important that children and adolescents be able to track the decisions and comprehend how their opinions will effect the decision-making process (cf. *ibid.*). If that is not the case, it can even lead to a greater vulnerability of the children and adolescents in question: It can frustrate them and rob them of their motivation to even want to participate in subsequent situations. One caseworker describes her impression of an intervention planning procedure that did not succeed in respecting the needs of a child: “This resulted in X. withdrawing from things and trying to get attention by screaming and shouting” (Case 6). Further, having the experience of not being allowed to participate can cause existing feelings of helplessness and vulnerability to be hardened: “The repeated experience of uncontrolled events in the absence of social support can lead to the feeling of helplessness in a Seligmann-like sense. Such children have a much higher risk of generalizing this helplessness to other areas of their lives and in the end experiencing previously mastered challenges now as insurmountable burdens” (Metzger, 2010, p. 98).

The cases studied make no mention of the *participation of children and adolescents in concluding or evaluating the helping measures*. In none of the case records was there a note about what the children and adolescents thought about the course of the helping process. Overall, the participation of children and adolescents, whether direct or indirect, whether verbal or nonverbal, plays a very minor

role in the case records studied. And when participation does occur – through the observation of the behavior of the children and adolescents by other professionals, through third-party statements or sometimes through their own statements – even then the effects on the overall process are minimal (cf. as well Archard/Skivenes, 2009). This points to a discrepancy between the observations and the opinions expressed in the case assessment, and in the intervention planning. In the latter, power and control play major roles. The statements that occur during the intervention process are weighted very differently, and the process as such is dominated by the adults, that is, by the professionals involved and by the parents (cf. Robin, 2010).

PARTICIPATION AS PARENT PARTICIPATION

The focal point of participation in child-protection measures seems to lie squarely on the participation of parents, not the least because of the legal situation, which plays such a major role in matters of child and adolescent welfare. After all, the parents represent the ones making the requests and signing the application forms, the ones accepting or refusing assistance, the ones providing the legitimization for an intervention measure – inasmuch as they have custody of the children.

The case records reveal that direct conversations are held primarily with the parents. There are also extensive descriptions of their perspective on the familial and support context: “She [the mother of the child] reports that it is true that she presently has no contact with the school, and that she hasn’t always been very attentive to such matters. It’s also true that she’s been drinking more lately. Life has been rough for her recently, having had to bring the children along to the shelter. But it’s not like she’s about to kill herself” (Case 5, p. 181). A few days later the caseworker speaks with the mother at more length: “She says she’s not doing very well right now. Recently she’s been just sticking her head in the sand and doing nothing. She’s aware of the fact that this is not good behavior, but nothing else was possible. She says she feels bad about her children and thinks she’s a bad mother. She doesn’t know how she’ll get out of her situation on her own. She needs to search for a new place to live, presumably in O.” (ibid., p. 181). In the record, the caseworker documenting the case takes up the perspective of the mother and

reproduces her emotional situation. She describes the mother’s ambivalences, for example, with respect to her own behavior and the consequences thereof for her children. However, the perspective of the children and adolescents living in the family plays only a minor role in the description provided by the caseworker. In fact, they exist only in the story told by the mother. That we learn nothing directly of the perspective of the children shows that the caseworker is prioritizing the parental perspective, leaving empathy for the perspective of the children and adolescents to the professionals from out patient or home-care services that are generally more attentive to describing the perspectives of the children and adolescents. However, in our case records we do not find other descriptions by a caseworker outlining the perspective of a minor as a client similar to the one given above.

Presumably, it is easier for the professional caseworkers to talk to adults and to understand their perspectives. But adults and children may have very different priorities and interests, and they also register the events in their surroundings differently. Since the field interviews in child-protection cases are generally held with adults, either parents or professionals, the viewpoints of children and adolescents hold lower communicative relevance (cf. as well Delfos, 2001).

Sometimes we even had the impression that the caseworkers were overwhelmed by the information coming their way from the parents when recording them verbatim. This seems to be a proof for a kind of “dismantling of high barriers between the professional institutions and the environment” (Otto/Olk, 1987, p. 14) or a reduced “preselection of possible articulations of the problem” (ibid.). Even just a few decades ago how the problems were defined was the exclusive domain of the professionals involved, who held communicative “sovereignty” over the case. Today, however, the opinions and views of the parents together with those of the professionals are taken into account to reach a common problem construction or diagnosis (cf. Wolff, R., 2010a). Yet, the vantage point of the children still remains largely ignored. This may be seen in one case in which the parents were pushed to agree among themselves which of them should assume the custodial responsibility for the child. For the caseworker the matter was settled once the agreement with the parents had been struck – the situation of the children in this family, their needs and expectations, apparently were

of no further concern: “The parents alone would like to speak for the perspective of their child. Their willingness to assume responsibility is considered by the Child Welfare Office to be a positive move. Joint custody should remain in force. We spoke with Mr. L. about the possibility of his withdrawing his application to the family court” (Case 10, p. 72).

Participation in child protection is thus in the end also a matter of dealing with existing intergenerational power relations, reflected in the preference for the parents’ viewpoint. This aspect must be taken into account in child-protection cases because children, who are inherently in a disparate power position (cf. Pluto, 2007; Münder/Mutke/Schone, 2000), must be protected and strengthened in their role as actors (cf. Metzger, 2010).

A REVIEW OF THE EMPIRICAL FINDINGS

Despite the widespread orientation in child-protection practices to the principle of participation, our study has unearthed many indications that, in the cases we looked at, very little weight was being given to the voice of the children and adolescents. From the perspective of the children and adolescents, this fails to lead to truly decisive changes in the helping process. This circumstance results from the characterizations of children and adolescents as objects of adult concern, as victims of abuse and neglect, and as children and adolescents with needs. Characterizations of the children and adolescents as independent actors or protagonists were rare in the materials we looked at. One exception was the view of the child with disruptive or problematic behavior, which is how the caseworkers describe active children and adolescents. Our study shows that the existing conceptualizations of children and adolescents reflect the standpoint that children and adults live separate lives and have different spheres of influence. These profiles of childhood and adolescence leave little room for the children and adolescents themselves to assess the situation or to enter the spheres otherwise occupied by adults. This is particularly the case concerning what type of assistance is offered in a specific case, and how and by whom and in what form that assistance should be implemented. This matter – this much can be culled from the notes included in the case records – re-

mains squarely in the hands of the adults. Participation is always realized in conflictuous tensions of professional and generational power relationships. In these contexts, the children and adolescents have the weaker position, and their perspective is given little attention, whereas the standpoints of the parents, in conversations among adults, are broadly considered. It also becomes clear that where meetings take place, how they are conducted and who is present lies mainly in the domain of the responsible professional workers.

The results of our study are supported by a recent evaluation study from England. The English Office for Standards in Education, Children’s Services and Skills (Ofsted) did a follow-up examination of 67 so-called “serious case reviews” that occurred in England from April 1 to September 30, 2010. It discovered that overall the children and adolescents were not being heard enough in matters of child protection. This study (Ofsted, 2011, p. 4) concludes the following:

“There are five main messages with regard to the voice of the child. In too many cases:

- the child was not seen frequently enough by the professionals involved, or was not asked about their views and feelings
- agencies did not listen to adults who tried to speak on behalf of the child and who had important information to contribute
- parents and carers prevented professionals from seeing and listening to the child
- practitioners focused too much on the needs of the parents, especially on vulnerable parents, and overlooked the implications for the child
- agencies did not interpret their findings well enough to protect the child.” (Ofsted 2011, p. 4)

In the materials we studied we also found that the focus of attention drifts from one actor to the next: First, one of the parents may be of interest, then later the perspective of the other parent takes center stage – or that of other professionals involved become important for the assessment of the case. Thus, we see that, when managing the case, the caseworkers find it difficult to keep all the contributing perspectives aligned. This is true particularly because alliances are often made during an intervention process which threaten to suck in the professionals in-

volved. How a certain case is viewed may then become colored by the interpretations of the respective dominant alliance, causing all other perspectives to simply disappear. Especially the perspectives of the children, but also those of the fathers (cf. Case 9 and Case 10), are lost or receive little regard in the light of such shifts in attention.

But our study of the materials also shows the following: Participation in situations of persistent inequality inevitably leads to a hardening of one-sided opinions. Participation then comes to be understood as only taking into account the parents' perspective or the perspective of one parent. This form of turning to the parents sometimes even pushes aside the assessments of the professionals involved. In light of the normative and legal pressure to implement participation, because of these contradictions and ambivalences role ambiguities often develop in child protection. The professionals involved, as our analysis shows, no longer know whether they should take the role as observing and assessing experts or whether they should understand themselves as "gatherers of perspectives" who – without having established a reliable relationship as a basis for mutual understanding and trust with the family members – would only be responsible for collecting and documenting the various standpoints of the involved actors but not for reflectively comparing, connecting or otherwise judging these standpoints.

The participation of children and adolescent in child protection thus introduces a number of questions about professional approaches, actions and identities. Enabling the participation of children and adolescents means initiating a mutual learning process: Especially the professionals have to learn to share power with others (cf. Frankford, 2007). On the other hand, increasing the participation of minors does not necessarily mean a loss of power of the professionals; rather, participation in matters of child protection carries the potential of strengthening both sides – the professionals and the minors (cf. Davis/Edwards, 2004). In the end, what is important is whether participation leads to the reproduction of inequality or to transformation processes (so-called "transformative transactions"), which provide children and adolescents the space they need to act, and also empower them in situations that expose them to danger and/or abuse.

Not the least, our analysis revealed organizational problems in child-protection systems and their settings. It would not only be misguided, but also wrong,

to ascribe the passive characterizations of children and adolescents to professional or personal failings on the part of the specialists involved. Rather, organizational research can show that the systemic culture is tintured with organizational sensemaking and that this is the main steering force in the practice (cf. Luhmann, 2000; Weick, 2001). What we can say is that the organizational frame is co-determining how parents, children and adolescents are observed and seen within that organization. Thus, in their conversation study of conversational interactions, Messmer/Hitzler (2007) have shown how in interactions initial "identities" are being ascribed to clients and come to be characterized in correspondence with the demands of the respective institution. In this sense clients are being made "to fit into the special needs of a particular helping service setting" (ibid., p. 60).

This context also played a role in our study of the characterizations of children and adolescents in the case records. Equally, Garfinkel (1987) remarks that case records must be understood against the background of the organizational contexts in which they had been produced. Insofar, "bad" records may only exist for "good" organizational reasons (cf. ibid.). In the light of our study, we may draw the conclusion to ask how institutional and organizational contexts could be given the necessary support that they would be able to create other characterizations and new identity profiles of children and adolescents in their care. Thus, it is also and above all of major importance whether we can change the sensemaking processes in organizational contexts so that children and adolescents can be seen and addressed as self-determined, independent actors within child protection.

5**INDICATIONS FOR A
PRACTICE OF BETTER INVOLVING
CHILDREN AND ADOLESCENTS IN
CHILD-PROTECTION PROCESSES**

The most important findings from the research literature on child protection show that children and adolescents are not completely (and sometimes not at all) allowed to participate in the assessment of child endangerment (Münder/Mutke/Schone, 2000). Also, children and adolescents are not (or only marginally) included in research on child abuse and child protection as well (cf. Irwin/Waugh/Bonner, 2003).

But the research results also suggest that it is not at all easy to implement the participation of children and adolescents in child protection. A high level of dedication is demanded of all persons involved if this goal is to be reached: “[Participation] is a principle that is associated with special demands, ambivalences and insecurities for the professionals involved [...] And because it confronts children and adolescents with demands that may have not been present in their lives up to that point, and that they have not previously learned to cope with, participation remains difficult to implement” (Meysen, 2008, p. 194).

Participation can be realized only in a bilateral process of adaptation: On the one hand, the children and adolescents must accept the strains inherent in participating in an intervention process; they must be willing to adapt, take part, and be actively constructive on their own behalf. On the other hand, the professional personnel involved in child protection must assume the responsibility and the demands necessary in order to adapt the intervention processes to the needs and potentials of children and adolescents. They also have to create the ways and means of enabling participation (Jaffé, 2000), among other things creating organizational settings amenable to participation. Not just the competences of the children, but also of the adults involved must be strengthened so that they are better in the position to enable the participation of children and adolescents in child protection. The professionals must learn to perceive the perspectives of children and adolescents (Smith/Taylor, 2003) – and above all they must learn to share their power with them (Frankford, 2007). If the adults do take the time and develop the competences necessary to including minors, then the children and adolescents will be in a better position to explain their problems and needs to the adults and to take part in the intervention processes (Bannister, 2001).

Against the background of these results, a number of concrete suggestions emerge in regard to how chil-

dren and adolescents can be given a voice in the process of child protection. First, we make some methodological suggestions drawn from this explorative study, which are also supported by other research studies as well as by the experiences of practitioners of child protection:

1. Respect the children and adolescents and treat them as equals.
2. Reflect on your own experiences when you were a child.
3. Adapt all support avenues to the needs of children and adolescents.
4. Create a child- and adolescent-friendly atmosphere.
5. Make contact with children and adolescents; observe them and speak with them directly.
6. Explore together with the children and adolescents their development as well as their personal situation and perspective.
7. Allow children and adolescents to participate in the planning of an intervention and in the further course of the assistance measure.
8. Evaluate together with the children and adolescents the results of the intervention process.
9. Regard the participation of children and adolescents as a key management task.
10. Implement the study of the participation of children and adolescents in child protection during academic studies and further education and training.

More experiments and research are necessary to make these activities more concrete. Yet, in the scope of this research report, it is already possible to sketch out a number of steps that can be taken for better involving children and adolescents in the helping process. (cf. as well Chaskin/Rosenfeld, 2008).

1. Respect the children and adolescents and treat them as equals

Since the early days of modern child-protection efforts the primary attitude toward an abused or neglected child was that of the child as victim, the object of compassion or pity, coupled with the impulse to protect or save him or her. Often professionals who deal with cases involving abuse experience a crippling fear and deep concerns for the child in the form of sadness, and also anger and outrage toward the perpetrator(s). Such emotional reactions

often cause the professional personnel involved to emphasize (or act on) their own emotional problems, even to the extent of no longer actually perceiving the needs of the children and adolescents, who are overshadowed by the efforts of the professionals and relegated to the status of object. The perpetrators are also heavily involved in this process, since they tend to marginalize the children and adolescents or limit access to them so that they cannot be treated as witnesses to their abuse or neglect. On the other hand, we also observe that abused or neglected children, especially adolescents, are torn between identifying with the aggressors and acknowledging their own experiences of anger at the abusive and neglectful parents. They may in reaction withdraw from events or take flight in order to somehow escape the existing conflicts in their familial environment or in secondary fields of socialization.

For this reason, it is of utmost importance that the children and adolescents in question be observed first hand and treated as equals and not as objects with few (or no) rights. This is an important prerequisite to including children and adolescents in child-protection measures. Such a basic approach, however, must be implemented from the very beginning, optimally in the form of a one-day seminar in which basic human as well as child-welfare rights are discussed using case examples, short articles and pictures. Also useful are self-questionnaires such as those suggested by the Child-Protection Centre in Berlin in earlier editions of the handbook “*Kindesmisshandlung. Erkennen und Helfen*” (Recognizing Child Abuse and Helping), which relies on the well-known introduction to child protection prepared by the Open University (cf. Roberts/Carver, 1978).

2. Reflect on your own experiences when you were a child

Critical, particularly psychoanalytical works have made us aware of the fact that risks of endangerment to child welfare can very quickly trigger so-called transferences on the part of the professionals involved: The caseworkers often experience themselves during their confrontation with endangered children and adolescents “as a child” again (Bernfeld, 1967) – they become the child they are dealing with. People who have not yet become cognizant of their own attitudes toward themselves as a child – toward their “inner child” and toward their own childhood

experiences – may have difficulty in establishing an open and emotionally clear relationship to a child threatened by abuse or neglect.

The reconstruction of one’s own childhood biography, particularly when there was any level of abuse in the past, therefore belongs to the basic themes in any psychological or psychoanalytic support or supervision of child-protection personnel. Such reconstructions may turn out to be just as important as diagnostic exercises. The first rule when providing support is this: “First comes self-diagnosis, then the diagnosis of others” (cf. Wolff, R., 2010c).

3. Adapt all support avenues to the needs of children and adolescents

Only in the last decades has the field of child protection come to recognize how important it is to children and adolescents seeking voluntary and timely contact with child-protection operations that all available avenues be open to them, so that they can cross bridges to the support system of their own accord. Hotlines as well as emergency services for children and adolescents were established in accordance with this principle, allowing them to seek out help themselves. Unfortunately, only a small percentage of the children and adolescents in need actually utilize these services.

Thus, it is important that child-protection operations approach children and adolescents – in the public arena, on the radio and television, as part of early intervention programs (an example are the “welcoming visits” in Dormagen), in kindergarten or at school. Further practical experiments could provide impetus in this regard.

4. Create a child- and adolescent-friendly atmosphere

Open access to assistance can be realized in case-based child protection only by ensuring a setting appropriate to children and adolescents. Two approaches have proved to be effective: (1) Always observe the children and adolescents, regardless of their age, in their respective context (in the family or natural surroundings) and (2) soon thereafter also interact with the children and adolescents individually (double setting). Such a framework and timeframe are more important than providing them with the proper ambience in the child-welfare agencies (which should not be disregarded completely, however). Expe-

rienced child-protection specialists know that the double setting cannot simply be forced upon the family, but rather must be promoted and “advertised” as something positive, especially to the parents. Newcomers to the profession, on the other hand, must often first learn how best to approach children and adolescents by taking seminars on professional practices, which sometimes also invite adolescents and school children to speak as “counselors.”

5. Make contact with children and adolescents; observe them and speak with them directly

Psychological and social-scientific research has a long tradition of not just observing children and adolescents, but also of coming directly into contact with them and speaking with them. Child-protection practices have only partially utilized these experiences, in particular in conjunction with cases involving sexual abuse. For this reason, it is important that child protection make new initiatives: by preparing an overview of those methods that have proved to be successful for coming into contact and speaking directly with children and adolescents during conflict and crisis situations; by critically looking at methodological contributions that have been made in the empirical research on children and adolescents, with the expressed goal of determining how these approaches can be implemented in the practice of child protection. In addition, it would be helpful to evaluate experiences from actual practice concerning how to set up and maintain dialogues with children and adolescents, in the form of so-called case laboratories. There is an urgent need to develop and make available a methodological handbook, to the effect, “Speaking with Children and Adolescents in the Practice of Child Protection.”

6. Explore together with the children and adolescents their development as well as their personal situation and perspective

In residential home care there have been attempts in the last few years to get children and above all adolescents involved in the reconstruction of their own life stories. Such methods are only just beginning to take hold in child protection. Here one could refer to the many methods available from child and adolescent psychotherapy, in particular ethnographic research approaches using cameras which are already being employed in child day-care (cf. Mohn/Hebenstreit-Müller, 2007/2010). The two

programs of the Kronberg Group for Dialogical Quality Development, entitled “The Book of My Child’s Development” and “Paths to Life,” could be used and expanded to include participation research and the study of the development, situation and perspective of abused children and adolescents. There is a bright future for children and adolescents, being actors with a broad experience in development and problems, to become participants in research. This path could provide important impetus for quality development in child-protection work.

7. Allow children and adolescents to participate in the planning of an intervention and in the further course of the assistance measure

A number of experiences already exist in this respect, particularly in the context of residential care. However, they must be adapted and further expanded explicitly for the everyday practice of child protection. In planning meetings a lot is discussed *about* children and adolescents (even when they are physically present), but much too little is discussed *with* children and adolescents. Here it would be appropriate to use a double setting (i.e., with and without the presence of minors). There is presently no quality standard for this.

8. Evaluate together with the children and adolescents the results of the intervention process

The same is true for the participation of children in the evaluation of the intervention processes in child protection (cf. Robin, 2010). A new approach is necessary here, although that is indeed not an easy task since there has been little research done on the themes of process and evaluation in child protection (cf. some newer studies by Aföldi, 2008; Thorpe, 1994; Projekt eXe, 2006; Laforcade/Meyer, 2008).

9. Regard the participation of children and adolescents as a key management task

As important as the professional specialists are in the casework of child protection, their supervisors are just as important, and without their initiative no office can succeed in changing the emphasis from the adults to the children and adolescents. Redirecting the emphasis and appealing to everyone involved to view the children and adolescents as welcome partners (especially in Child and

Youth Welfare Agencies) is a major task. There is no need to (re)invent the methods necessary to this end – they only need be implemented in due time, e.g., by instituting consultation times and representatives for children and adolescents, and by including children and adolescents in case conferences and case reviews. Here, too, there are presently no quality standards.

10. Implement the study of the participation of children and adolescents in child protection in academic studies and further education and training

This demand can be carried out immediately: All of the other nine suggested levels of participation should be included in the basic study of child protection as well as in all forms of continuing education – not the least in the qualification of experienced specialists in child protection. New curriculum concepts should be developed in the form of an expertise outlining new approaches.

6

SUGGESTIONS FOR FURTHER RESEARCH

As we reach the end of our study, we would like to address some concrete research perspectives concerning the role of the participation of children and adolescents which have emerged from the results of our literature review as well as our own empirical studies. We sketch a possible research project that could contribute to the clarification of the problem of how abused and neglected children and adolescents, especially, can successfully be integrated into child-protection processes.

CONCEPTUAL PRIORITIES IN RESEARCH ON THE PARTICIPATION OF ABUSED AND NEGLECTED CHILDREN AND ADOLESCENTS

(1) Discussion-Splittings vs. Reciprocal Dialogues in Participation Discourses

Our literature review has shown that much research on the participation of children and adolescents is concerned with isolated questions with little or no connection to each other. The answers to these questions remain specific only to a particular field and are not brought together with the data collected in other areas. This is true also of Germany, where child protection from the perspective of participation is still seen (if at all) as an isolated concern and is not integrated into existing central conceptual approaches (cf. Bitzan/Bolay/Thiersch, 2009). A dialogue between the various researchers on participation from different countries and disciplines (social work, healthcare, education) has yet to commence.

For this reason Hinton (2006) correctly recommends that the data accumulated in the various fields concerned with the participation of children and adolescents be combined in a cross-border effort. Hinton looked first at the ideas of teachers from Nicaragua and England about the possibilities and difficulties of the participation of children to show how much we could learn by merging the different perspectives in understanding the problem. In Nicaragua, for example, much more trust is put in the abilities of children and adolescents to achieve participation, whereas teachers and educators in England are more inclined to use certain methodological instruments, specifically

trained personnel or specific organizational settings to enable participation projects. It would be better if there were more openness toward the potential that children and adolescents possess in such situations – it would certainly help to implement participation processes in practice and to further the inclusion of children and adolescents in research on child protection, a fallow field to date.

(2) Allowing Children and Adolescents to Participate in Research: Adapting methods to children and adolescents, or how to create research projects that – in cooperation with all actors concerned – would look at the continuum of both the living conditions and the professional practices.

Our literature analysis shows that the voice of children and adolescents rarely appears in research, particularly if they are endangered or have already been abused and neglected. In addition, in most researches, when they are allowed to speak, their utterances are generally being passed on by adults. Only in few instances were the children directly included and taken seriously as true research partners. For this reason a growing number of researchers have suggested that future research with or about children be done in a manner that the children and adolescents are given the possibility of participating directly in the exploration of their own circumstances (cf. Uprichard, 2010). New research approaches of this nature have now been developed, inspired by methods drawn from anthropological and socio-scientific field research which attempt to have children and adolescents participate at all levels of the research process. They are included in the preparation of the empirical instruments (such as questionnaires) as well as in the construction of empirical research methods that are appropriate for understanding their world and that allow children and adolescents to study and query each other (cf. Niuwenhuys, 1997). These studies show that it is indeed possible to include children in the research process – even when they are endangered or have been or are being abused or neglected. The important thing is to remain aware and attentive to whether the children and adolescents are being exploited and to ensure that they are in fact prof-

iting from their participation (Mayall, 1996). It is also important that new research approaches in the field of participation, which conceptualize children and adolescents as social actors, do not see them as competent only for their own (limited) world – their own special environment of childhood and adolescence. Rather, children and adolescents should be included in research processes that look beyond childhood and adolescence. It could indeed be of interest not to segregate – to see that childhood and adolescence are of major importance for the adult world as well, and that children and adolescents can make important contributions to themes other than childhood and adolescence (cf. Uprichard, 2010). Punch (2000) suggests something similar, namely that the research methods not be adapted solely to the age of the children. Research with children and adolescents belongs in a continuum up to and including research concerned with older persons. For this reason it is essential to triangulate the methods in order to get closer to the reality of children and adolescents and to grasp the context of their life circumstances. But above all it is requisite to appreciate the space between reality and fantasy, not the least in order to allow research to get ever closer to the real experiences of children and adolescents with their specific interests – while of course maintaining the necessary scientific rigor.

(3) Children and Adolescents as Bearers of Risk or as Engineers of Their Own Life History

One important reason why there is a need for a new concept in child-protection research for working *with* and *for* children and adolescents who have been abused or neglected in their life is that this is an ideal way to avoid having them viewed negatively only as actors with “symptoms” or “problems” – which happens again and again in child-protection practice and research. Children and adolescents are reduced to playing the role of “risk bearers” and objects of professional practices. Such a problematization of the child from the viewpoint of experts (“the battered child,” “the delinquent child,” “the traumatized and sick child,” “the child whose social bonding and development has been upended”) is often a source of mystifications in which real children and adolescents are no longer to be

recognized. Such “expertocratic” viewpoints lead those practicing in the field and those doing research in the laboratory to create a normative evaluation that may easily turn into corrective approaches. Javeau (2006, p. 230) said the following in this regard:

“These very different forms of problematization, to which primarily ‘experts’ react with their very diverse but always ‘correct’ evaluations, paint the picture of a child-like universe that the children themselves, if they were asked about it, doubtlessly would not even recognize.”

Instead, allowing children and adolescents to participate in the entire intervention process leads to very adept anamnestic and diagnostic constructions as well as to successful courses of action, as a number of newer participation evaluation projects have revealed (cf. Wolf, 2007; Jaffé, 2002). But the goal is also to allow children to participate in the construction of their own childhood through participation in research.

A TWO-PART RESEARCH STUDY “PARTICIPATION OF CHILDREN AND ADOLESCENTS IN CHILD PROTECTION – AN EMPIRICAL PROCESS AND EVALUATION STUDY” (A CONCEPTUAL DRAFT)

(1) Fundamental Question

The fundamental research questions addressed by this study should be theoretically and systematically studied in depth and should be evaluated in a pilot study in cooperation with practitioners. Thereby, the main question to be addressed should be: *How can children and adolescents be included in child protection and what work methods have proved of value to best allow and ensure their participation?* In particular, the following research questions should be posed:

1. How are abused children and neglected children and adolescents viewed and understood by the professionals who work in child protection and what role do their basic attitudes play?
2. Have the child protection specialists processed

their own childhood experiences (and perhaps any abuse they experienced as children)? How do they judge the role of such autobiographical reflections on the performance of their professional tasks?

3. How can access to the child protection service system best be set up for children and adolescents? What ways of building such “bridges” have proved to be effective in practice?
4. How can child- and adolescent-appropriate settings be created and employed? Which approaches have proved to be best suited?
5. How can the specialists in child protection best make contact with children and adolescents? How can they get into a conversation and enter a dialogue with them? How can they best summarize their experiences from the encounters they had with children and adolescents? What do they emphasize in their reports?
6. To what extent are children and adolescents invited during child-protection processes to describe their own development, situation and perspective and then, together with the professional personnel or other family members, to reflect on this? What approaches have proved to be advantageous in this regard?
7. To what extent – and with what result – have children and adolescents been included in the planning stage as well as in the further course of a child-protection processes?
8. How are children and adolescents participating in the evaluation of the helping process in child protection? What approaches have proved to be advantageous in this regard?
9. Do local child protection systems recognize the participation of children and adolescents as a leadership task or is this only marginally or never the case and what approaches have proved to be successful in this context?
10. What role does the subject of participation of children and adolescents in child protection play in academic studies and in further education and training of professionals in this field? And what consequences could be drawn from experiences that could be used for planning further qualification programs for the professional personnel in child protection?

(2) Research Setting

The optimal research setting would be four local child-protection systems with different forms (child welfare agencies in an interorganizational network in cities and counties) in Germany and perhaps also, in order to make an international comparison possible, in France or another European country. This would enable an exemplary intensive study with multilateral participation (caseworkers, supervisors, children, adolescents and parents).

(3) Design and Methods

The first step is to explore the fundamental questions for the research study together with selected specialists from child protection, the affected children and adolescents, and the experienced researchers in the field of participation,. The next step would be to draw up a systematic methodological research review and to develop an appropriate research design (permitting self-, other- and joint observations) for the investigation in the four selected research fields that are characterized by a multilateral structure (namely, of children, adolescents and caseworkers as well as perhaps other family members).

The ethnographically oriented data collection should combine participant observations as well as different interview methods and should allow for group-based feedback loops on the part of the research partners. The study should at least have a time frame of two years so that it would be possible to evaluate the courses and results of the helping process.

(4) Resources and Timeframe

A researcher should be employed for each of the four research fields for a period of two years, carrying out the research for the most part directly on-site but also at the participating research institution, at least during the first six months and during the final 12 months.

For the management of this project at least two experienced social scientists (each with a half-time post) will be necessary. The project should take at least 42 months (3.5 years) and consist of a preparatory phase (6 months), a field-research phase (24 months), and an evaluation and final phase (12 months). Besides the usual material expenses there would be travel and lodging costs, the costs associated with having the

children and adolescents participate and any costs for caseworkers in the field. Should an international comparison be carried out, for example, with partners in France, England, Norway or Finland, then the associated costs would have to be provided by the respective country or applied for in the context of the European Research Promotion Programs.

7

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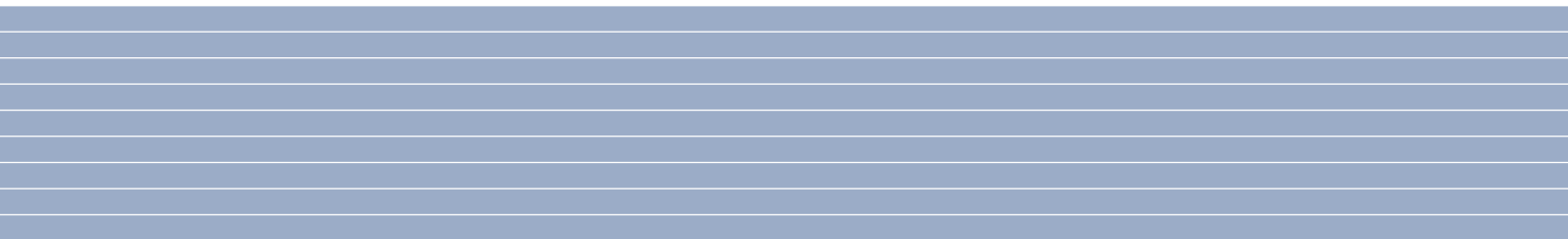
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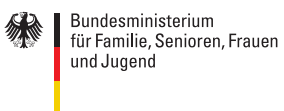
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