‘A Review Like No Other’: Putting love at the heart of the care system

Keynote Address given at the 20th SIRCC Conference, Glasgow, 4-5 June 2019

James P. Anglin

Abstract

In this paper, the Scottish Independent Care Review is set in an historical and international context, presenting a typology of review characteristics and assessing the notion that this is ‘a review like no other’. It is suggested that the evolution of child welfare tends to be cyclical rather than a linear and upward progression, meaning that discoveries or assumptions of one era tend to be lost or ignored, and then re-discovered, thus limiting the potential for ongoing system learning and steady practice improvement. Given the Scottish review goal to ‘put love at the heart of the care system’, the notion of love is examined in terms of its central role, multiple meanings and possible distortions. The article concludes that this review is indeed unique, and that the world will be watching and learning from this inspiring process.

Keywords

Scottish independent care review, transforming the care system, typology of reviews, loving care

Corresponding author:

James P. Anglin, janglin@uvic.ca
When I first learned about the Scottish ‘Independent Care Review’, I discovered how jaded and cynical I have become over 45 years of government reports, investigations, reviews and efforts at ‘transforming’ child welfare, child protection and child care. In fact, the very word ‘transformation’ was virtually banned from workers’ vocabularies in my own province as a result of a particularly unfortunate change process experience.

Some of the first phrases I heard and read in relation to the Scottish review were: ‘a review like no other’, ‘putting love at the heart of the care system’, and its purpose, ‘to have the best care system in the world’. Well, doesn’t every review want those things (even if they dare not say it)? Has any review ever come close to delivering on any of these? Not in my experience. And I have witnessed dozens of reports and reviews, likely well over a hundred across many countries. I have even participated, eagerly and with great hope, in a half dozen and even led one myself, only to end up disillusioned and disappointed every time.

The lowest point for me was after I personally completed an independent (one-person) review of the residential child care system in the Yukon Territory in northern Canada only to see none of my key recommendations acted upon. Governments can change very quickly, and along with them the intentions of the previous politicians, and new governments want to start fresh with their own agendas and experts. Ironically, a colleague of mine was asked to undertake a similar review in 2018, 17 years after mine, and he echoed some of the same themes and recommendations as I had.

Sometimes black humour brings forth a sardonic chuckle, and the ironies of life may cause us to smile ruefully, but if what I am saying is anywhere close to the truth about the vast majority of efforts to change and improve children’s services, this must be considered nothing less than scandalous. After many years of puzzlement about why bureaucracies seem unable to change, or be changed, I wrote an article titled: Transforming government services for children and families,
or ‘Why non-reductionist policy, research and practice are almost too difficult to be tackled but too important to be left alone’ (Anglin, 2008). My conclusions about the necessary conditions for true transformative change included the following:

- ‘We must remain vitally concerned with the human experiences of the whole persons who become enveloped by the institutions in which we work, including fundamentally ourselves (p.76).

- ‘We need to seek first to access and understand the lived experience of those we are there to serve. The most effective way to accomplish this is to participate together in joint ventures so that both parties can develop renewed and transformed understandings of each other and the nature of their mutual involvement. In such an interactive and mutual process, the language of the activity, traditionally quite technical and partial, is shifted in order to refer more accurately to real experiences, problems and aspirations. As Alfred North Whitehead has observed, “We think in generalities but we live in details” (p.76).

- ‘We have to stop doing what we know doesn’t work in order to create a space in which we can discover what can work (p.76).

- ‘In brief, an essential element of a non-reductionist approach is to think, experience and act in full recognition of the integrity of persons and the wholeness of human life’ (p.78).

When I first wrote those words about 20 years ago, while I believed in them deeply, I am not sure I thought I would live long enough to experience a process in human services that actually tried to function according to these principles.

To be and relate as whole persons, to access the lived experience of others, to participate in joint and mutual ventures with young people, to change our language away from the technical and partial, to stop doing what doesn’t work, to create space for discovery, and to act in the recognition of the integrity of persons and the

3
wholeness of human life – is all that just aspirational but unrealistic in practice, or could it be a reality in some form of system renewal process?

**The Scottish Independent Care Review**

Hope indeed springs eternal, and I am prepared to believe that this ‘root and branch’ Scottish care review might just be the fulfilment of my dreams of true transformation in child and family services. It is time to restore the credibility of such concepts as ‘transformation’, ‘the integrity of persons’, ‘the wholeness of life’, and to add a concept championed by the Scottish review – ‘a loving care system’.

But perhaps it would be helpful to take a moment to examine this review in the context of reviews historically and internationally. In Scotland alone, there have been 20 reports on the children’s service system over a recent 15-year period (2001-2016), undertaken by the Scottish Executive, the Scottish Government or the Care Inspectorate (Children and Families Directorate, 2017). There have even been promising titles, such as ‘It’s Everyone’s Job to Make Sure I’m Alright’ (2002) and ‘Getting it Right for Every Child’ (2008). But we are now in 2019, and we certainly have not yet got it right, in Scotland or anywhere. This is indeed worrisome, given that we have had residential group care in the world for almost 1700 years, since at least the year 354 CE (Anglin & Brendtro, 2015). What will it take to get it right?

In order to understand better the potential of the current Scottish Independent Care Review, let us first look at the typical characteristics of other previous reviews, not just in Scotland but in a great many other countries as well. The following typology will allow for some comparison and discussion.

**A typology of typical reviews**

**Auspices** – reviews are almost always government initiated.
Review ethos – typically these include a belief in expert professional opinions and academic research.

System focus – usually one of: child welfare, child protection or children-in-care.

Purposes – modify the system, enhance practice, bring cost-efficiency, or make policy changes.

Precipitating factor(s) – regrettably, usually a death of a child, an abuse scandal, or a system/political crisis.

Reviewers – characteristically judges, lawyers, or senior (ex-) civil servants.

Design of review – single expert or team of professionals with some (often minimal) consultation.

Processes/Activities – select interviews, invited submissions, case record and policy analysis, literature reviews.

Outputs – a final report with findings and recommendations (often poorly implemented, if at all).

Even a quick scan of these characteristics reveals a strong bias towards professional, academic and government perspectives, and the placing of power in the hands of ‘guardians of the system’.

Presumably, reviewers have been chosen to ensure impartiality, independence and rigorous investigatory and decision-making skills, because they often have little or no child care or child welfare practice experience. Reviews and investigations of child welfare and child care are almost invariably undertaken by judges, lawyers, or senior (ex-) civil servants.
How do you think the judiciary or legal profession would react to a child and youth care worker/social pedagogue or social worker undertaking a review of the judicial or legal system?

I am aware of one review in England that was undertaken jointly by a lawyer (Allan Levy, QC) and a social worker, a late colleague Barbara Kahan, who had been the Director of Children’s Services in Oxfordshire, England (Levy & Kahan, 1991). It focussed on the use of isolation rooms, called ‘pin down’ rooms as a result of their purpose to pin down and isolate young people in care exhibiting unacceptable and difficult to control behaviour. I recall Barbara telling me once that a lawyer had criticised her for ‘always taking the side of the child’. She did not see a problem with this, and took it as a compliment. Taking the side of a child does not mean they always get their way; it means someone is championing their experience, their voice, and their rights.

The Levy-Kahan report stated: ‘Training is an essential element in the provision of a service for children in care. It can no longer be regarded as something for the few senior staff who oversee large numbers of untrained staff offer to the children’ (Section 19.10).

And in section 19.12: ‘We recommend that a strategy of training for the next five years is developed as a matter of urgency with a particular aim being to increase the number of trained and qualified staff in residential care without delay’.

Alas, my review of the history of child and family services demonstrates that their evolution tends to be cyclical (see Figure 1).
Figure 1 – Illustrating a cyclical pattern

It is not a linear and upward progression (see Figure 2), meaning that discoveries or assumptions of one era tend to be lost or ignored, and then re-discovered, thus limiting the potential for ongoing system learning and steady practice improvement.

Figure 2 – Illustrating a linear and upward progression

To illustrate the cyclical nature of reports and reviews, let’s jump ahead 26 years from the Levy-Kahan review (1990) to 2016, and the Residential Care in England Report, often called the Narey Report (Department for Education, 2016). A programme director is quoted in Sir Martin Narey’s report as saying:
The low qualifications threshold and low pay... made it difficult to attract people with suitable experience, skills and insight. Other similarly low paid, entry level work, which required no previous qualifications commonly competed for the same candidates but were likely to be substantially easier and more compatible with having a home life and caring responsibilities (p. 60).

The response by Sir Martin Narey: ‘I think that is defeatist...’ Narey goes on to say:

...work in children’s homes is certainly demanding. But it’s also fascinating and rewarding and offers much more variation and stimulation than the relative drudge of retail work for example. Many staff in children’s homes wouldn’t do anything else [...] As the NCB TNS researchers discovered: ‘Younger staff especially were said to be more likely to be ambitious and use children’s homes as work experience and a stepping stone to other careers, typically [in] social work, teaching or psychology’ (p.60).

As for training and qualifications, he says:

We must have a competent and confident workforce, but I’m not at all sure that necessarily means a highly qualified workforce. Although the intention in Scotland is to require staff in children’s homes to be graduates (from 2018), I urge Ministers not to follow that example in England. I’m not aware of evidence which suggests that an entirely graduate workforce would further improve the quality of homes (p.55).

Interestingly, in another section where Narey dismisses social pedagogy as not likely suitable to England (and while not supporting the development of any child
and youth care education, as he notes Scotland is doing), he indicates that in Denmark, where such education is required:

> Outcomes for children living in residential care in Denmark are significantly better than outcomes in England with, in particular, better children’s engagement in education. But it is impossible convincingly to assert that this is as a result of the use of pedagogy (p. 66).

To this I say: It must be their wonderful blue cheese that makes the difference. How sad it is to see the informed and forceful support for education and training clearly asserted by Levy and Kahan two decades earlier being dismissed out of hand.

**How might the current Scottish Independent Care Review be untypical?**

Let us revisit the review characteristics template introduced earlier, and consider how the Scottish review may be untypical, and in fact, may be ‘a review like no other’.

**Auspices** – Instead of this review being initiated by a government department, it was initiated by Scotland’s First Minister, Nicola Sturgeon, personally, and she made it very clear that she and this review would be accountable to young people in and from care. As far as I am aware, this is an absolutely unique situation in the history of reviews internationally.

**Review ethos** – Instead of some political agenda or ideology driving this review, it is values driven, and in particular by the First Minister’s values of compassion, caring, sense of accountability and commitment to the well-being of the young people of Scotland. This too is a unique feature of this care review.
‘A Review Like No Other’: Putting Love at the Heart of the Care System

System – Interestingly, the Chair of the independent review, Fiona Duncan, is quite clear that the review is not focussing on the child care or child welfare system, but rather on the experiences and well-being of the children themselves. It is not about changing a system, but rather creating new and positive experiences for the young people living in foster or residential care.

Purposes – ‘to have the best care system in the world’, period! What else is there to say?

Precipitating factor(s) – In contrast to most other reviews that are initiated in response to a death or other tragedy involving young people, this review resulted from the First Minister of Scotland’s authentic encounter with youth in and from care. She opened her heart and mind to the voices of young people, and was moved to respond with initiating this ambitious process. How refreshing!

Reviewers – As noted earlier, characteristically reviewers selected are judges, lawyers or (ex-) senior civil servants who have little or no experience with child care practice, or with the daily lives of young people in care. The Scottish Independent Care Review is being chaired by a woman with lived experience in care who also brings astute skills of analysis and a fierce sense of accountability to the young people of Scotland. She refers to her role as being a ‘choreographer’, and she is clear that this review must not take her name, and resists any such label. This is most unusual and reflects the ethos she is championing for this process.

Design of review – An emergent approach is being taken to this review, encompassing four stages (orientation, discovery, journey and destination) that will build on each other over three years. A unique feature is the provision of ongoing ‘stop-go’ feedback to those providing care services. The review is not waiting until the end of the process to initiate changes in practices. As well, there is an intention to try ‘mini-tests’ of new approaches to explore innovations while being aware that changes should be tried out and proven before being adopted on a broad scale. It seems these notions were suggested by young people themselves.
Processes – The most fundamental process adopted is to engage a virtual army of people in meaningful conversations (about 2,000 individuals) and in working groups over each stage of the process (involving over 150 people). More than half of those engaged have lived experience in care. In the journey stage, there is extensive communication and collaboration to link together the various working groups and themes being examined. This is certainly unprecedented involvement, and offers a prospect of ongoing change after the formal review process is completed. If hearts and minds are changed, behaviour is likely to follow, and if an army is mobilised, many more people are likely to be inspired to join the cause.

Outputs – As indicated, the review is affecting attitudes and practices as it unfolds, engaging everyone in its purview as whole persons, challenging thinking and action from the perspectives of young people in care. Some ‘stops’ (red lights) have already been initiated (e.g. ending restraints), and some mini-innovations will be tested, meaning services are in the process of change before any final reporting and recommendations.

Some Reflections

Over the course of my life, I have learned that, from time to time, the stars just seem to align as if arranged by some higher power. For example, some of the events that led to the Inkatha Freedom Party joining at the very last moment in the first democratic South African elections in 1994 cannot be rationally explained, and these events averted certain bloodshed on a devastating scale (see Cassidy, 1995). In my personal experience, random events and the chance alignment of particular individuals have led to new opportunities and career directions that forever altered my life and work. Perhaps you can think of such moments and times in your life. This Scottish Independent Care Review, to my mind, carries an aura of such mystery and good fortune.
As I reflect on what I have learned to date about the initiation and unfolding of this unique review process, I cannot help but feel great hope that not only will the lives of Scottish children be transformed, but perhaps lessons will be learned that can be shared more broadly, across services and systems around the world. Virtually every country I know continues to struggle with the burden of inhumane, stigmatising and largely ineffective systems of care for young people. It is painful for all involved, but especially for the young people in care themselves, when the intention of the providers is to create nurturing, loving and healing places.

A note on the ‘L’ word: I think we need to approach the notion of love with some care and caution. For some young people in care, being loved has meant being manipulated and mistreated. For example:

- ‘I beat you because I love you’.
- ‘If you loved me, you would do what I tell you’.
- ‘If you love me, you must keep this secret’.

As carers, we need to be careful about how we express our love, but we also need to help those with whom we work to think critically about what love means in the context of our child care systems.

A Canadian professor of child and youth care tells the story of talking with the head of a juvenile justice institution (youth corrections jail) as part of a residential care review in the province of Ontario a few years ago. When the professor mentioned the children’s need for love, the director said: ‘We don’t want the staff to love the kids; then they will want to have sex with them’ (K. Gharabaghi, August 23, 2016, personal communication). When leaders in our field think like this, we have a lot of work to do in clarifying what love has to do with out-of-home and professional care.

In another conversation, a Deputy Minister of Child Welfare in the Government of Ontario said to the former provincial Advocate for Children and Youth: ‘We can’t
legislate love’. The Advocate replied: ‘No, but you can legislate the conditions in which love can happen’ (I. Elman, April 16, 2016, personal communication).

The Ancient Greeks had many words for love. Perhaps these are better thought of as dimensions of love, rather than pure types, as we may experience a mix of these with the same person. Four dimensions, or types, of love are perhaps most relevant to our work.

- **Agape** – selfless, spiritual love (e.g. God’s love).
- **Philia** – love from shared experience (affiliation).
- **Storge** – friendship love, slowly developed.
- **Eros** – passionate physical love, attraction.

Those who work in a professional or volunteer capacity with young people in the care system need to engage in reflective conversations about these dimensions, or types, of love, and how these might manifest themselves in their day to day practice. Often, those attracted to child and youth work are motivated by a sense of agape, a deep caring for people as persons, perhaps developed in their families or through a people-centred childhood. For example, they may have cared for younger siblings, or been part of an extended family, or close-knit neighbourhood or church community where they formed close relationships. However, even where that may not have been the case, over time through daily engagements with young people and colleagues, shared passions and interests may be discovered (philia) and meaningful friendships (storge) developed over time. Young people need to experience loving relationships between adults (including staff members) as part of learning how to engage themselves in loving relations with others.

While eros can be very problematic if not addressed properly, we cannot pretend that young people in care are never physically attracted to their caregivers. The reverse is also true, and how to respond to such attractions must be part of education, training, ongoing supervision and team discussions in our field.
The Associate Director of the South African Child and Youth Care Association (NACCW), Zeni Thumbadoo, has put it well. ‘Love’, she suggests, ‘is present in powerful CYC moments with another, and must be present when real connections are made between self and other’ (Thumbadoo, 2011, p.197). This is a form of agape, or love of another human being in the Ubuntu sense of: ‘I am because you are’; ‘I am a person because of other persons’. She further asserts that ‘caring and love intermingle in the encounters’ between child and youth care practitioners and others (Thumbadoo, 2011, p.197).

A Canadian First Nations’ author, the late Richard Wagamese, has written powerfully about the primal wound he suffered from being forcibly removed from his mother at a young age: ‘It’s being ripped from love that causes the wound in the first place and its only love in the end that heals it’ (Wagamese, 2009, p. 13).

In a recent study involving conversations with 20 young adults from foster care undertaken by one of my students, Angela Scott, and myself, at the heart of the retrospective reflections shared by the young people was the sense of an elemental or primal loss. As one young woman so poignantly stated:

…that’s what we are missing out on as kids in care, we don’t feel that love, that community, and family connection.

Ever since hearing that statement, the notion ‘we don’t feel that love’ has been etched into my brain. It was this statement, encompassing not just an individual perspective but also a communal experience of youth in care, that revealed once again a deep and profound sense of what has too often been missing from the lives of those living in care.

How tragic. How wrong. How unnecessary. The Scottish Independent Care Review is the first such review I have seen with a working group focusing on the notion of love. Perhaps finally the primal pain of young people in and from the care system is being heard and responded to with care, compassion, and most importantly, action.
Conclusion

Governments and societies around the world must find ways to create loving, nurturing and healing spaces for all our young people, and especially those removed from their families of origin. I know I speak for the international child welfare community as a whole when I say that the world is watching, Scotland – we pray you succeed ‘in putting love at the heart of the care system’ so that you can not only help the young people of Scotland, but help the rest of the world learn how to do this as well.

References

Anglin, J. P. (2008). Transforming government services for children and families: Or ‘why non-reductionist policy, research and practice are almost too difficult to be tackled but too important to be left alone’. In F. Peters (Ed.), Residential child care and its alternatives: International perspectives (pp. 71-78). Stoke on Trent, UK: Trentham Books.


**About the author**

Professor James Anglin began his career as a child and youth care worker in a mental health centre in Vancouver after which he developed a six-bed group home for adolescents in Victoria, Canada. In 1979, he joined the faculty of the School of Child and Youth Care at the University of Victoria, later becoming Director. He also served as the university's Associate Vice President Academic and Director of International Affairs and was appointed Emeritus Professor.

Jim is currently researching the implementation and cultural adaptation of a principle-based approach to residential care (CARE) with colleagues from the Bronfenbrenner Centre for Translational Research at Cornell University. He has published in North American and international journals and child welfare texts on a
variety of child and youth care issues, most recently on understanding and responding to young people's pain and pain-based behaviour and the processes of healing from complex trauma.