

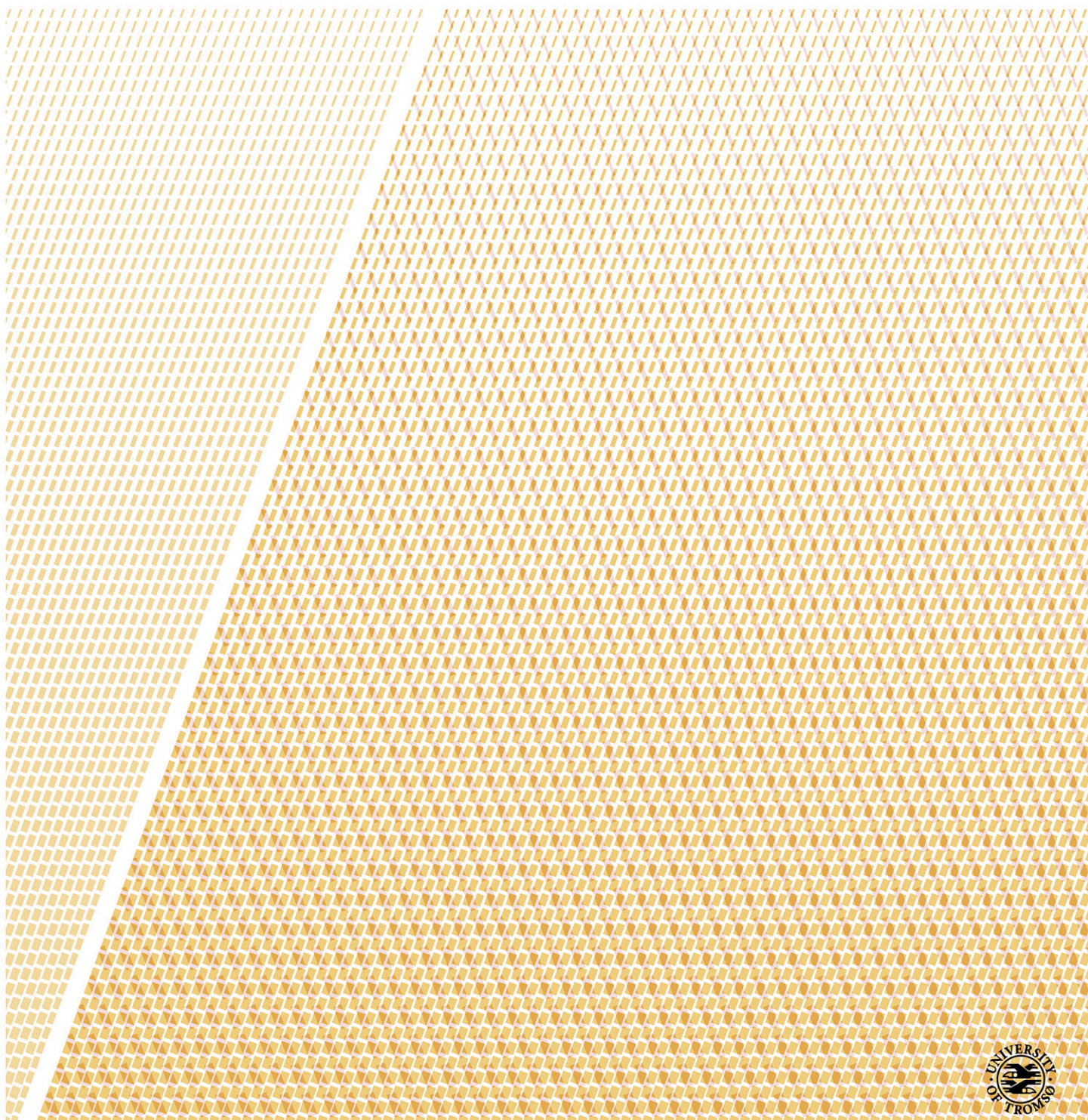
Faculty of Health Sciences

# **Factors that determine children's participation in child welfare decision making**

*From consultation to collaboration*

—  
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*A dissertation for the degree of Philosophiae Doctor – September 2014*



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## II. LIST OF PAPERS

**Paper 1:** Vis, S. A., Thomas, N. (2009). Beyond talking-children's participation in Norwegian care and protection cases. *European Journal of Social Work*, 12(2), 155-168

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**Paper 4:** Vis, S.A., Fossum, S. (2013). Representation of children's views in court hearings about custody and parental visitations — A comparison between what children wanted and what the courts ruled. *Children and Youth Services Review*, 35(12), 2101–2109.

### **III Abstract**

**Aims:** The purpose of this thesis is to study factors that determine whether children participate in decision making in the processing of child protection cases. The overall aim is to identify variables related to organizations, decision makers and cases that determine consultative and collaborative participation.

**Theory:** Two definitions of participation are used. Consultative participation is when social workers talk with the child and solicit his or her views before a decision is made. Collaborative participation is when children's views carry such weight that they have an impact upon the decision made.

**Methods:** The thesis uses a quantitative research approach. Three observational studies were conducted using cross-sectional design. Data were collected through questionnaires to social workers and judges. Chi square tests and t-tests were used to compare group differences. Logistic regression was used to identify predictors for collaborative participation.

**Participants:** The analysis was based upon two samples of social workers (N = 86; N = 87) and two samples of child protection cases (N = 43; N = 151).

**Results:** Consultative participation is determined by decision-maker factors and organizational factors. Social workers who think participation might be harmful for children are less likely to facilitate consultative participation. The amount of participation obstacles that social workers recognize is determined by organizational factors. Social workers from local child protection agencies consider participation less problematic as compared to social workers from agencies that deliver more specialized services. How important social workers consider child participation is negatively related to years of work experience.

In about half the cases where the child had been consulted, participation was identified as collaborative. Collaborative participation is determined by case factors. The weight that is given to a child's view varies depending on what the decision is about. It is also dependent upon the wishes of the child. The highest accordance between a child's view and the decision was found in custody rulings where the child agreed with child protection services. The way in which participation is facilitated matters. When a child attends a case conference or a review meeting this is associated with increased likelihood of collaborative participation.

There are some indications that younger children are less likely to be consulted. Child age, however, was not a good predictor for collaborative participation.

**Conclusion:** Consultative participation is a prerequisite for collaborative participation. The decision to consult with a child is determined by factors related to the social worker and the organization. A decision about the weight that is given to a child's views is determined by characteristics of the case and the decision-making process.

It is mandatory for social workers to facilitate consultative participation. More specific guidance should be issued in order to ensure that all children have the opportunity to express their views through consultations.

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## 1. Introduction

A change in the Norwegian Child Welfare Act occurred in 2004. The new legislation set forth that children from the age of seven should receive information and be given an opportunity to state their opinion before any decision is made in a child protection case. The process had begun in 1989 with the ratification of United Nations Convention on the Rights of the Child (UNCRC), thus leading to its subsequent incorporation into Norwegian legislation.

The increased attention that has been given to child participation since the inception of UNCRC is not specific to child protection services. Studies have looked at children's participation at home (Andenes, 1997; Sandbæk, 2002), in schools and local community planning (Kjørholt, 2004; Matthews, Limb & Taylor, 1999), in planning and evaluation of services (McTernan & Godfrey, 2006), in health and social work assessment and therapy (Day, 2008; LeFrancois, 2008; Reading et al., 2009; Webb, Horrocks, Crowley & Lesson, 2009) and in the processing of child protection cases (Christiansen, 2011; Gulbrandsen, Seim & Ulvik, 2012; Seim & Slettebø, 2007; Skivenes, 2002; Strandbu 2007). Participation holds different meanings in these diverse situations.

As described by Näsman (1994), giving children individual rights is one more step in the development process that started in the 19<sup>th</sup> century. This development has led to recognition of individual rights for increasing number of groups based on age, sex and/or ethnicity. The development of children's rights coincides with changes in how children are viewed in society. Most important in this development is perhaps the emergence of social theories that see children as social actors and not merely as objects of socialisation. This is often referred to as a paradigmatic change in how children are perceived (Beazley et al., 2009; Mayall, 2002; Prout & James, 1997). This reminds us that our perception of children and child participation is not a universal given but that it changes through time (Aries, 1962; De Mause, 1974).

Before the new child welfare legislation was put into effect in 2004 a few Norwegian studies had investigated how often children were participating in child protection cases. Næss, Havik, Offerdal and Værness (1988) investigated whether or not children were

given access to consultations with their social worker. Oppedal (1997) investigated case files to identify the representation of children's views. The results indicated that many children were consulted but that their views were not often represented in case archives. This illustrates that attendance at consultations and influence in decision making are two different aspects of participation in the child welfare context. It was, therefore, considered important to further investigate the circumstances that determine children's participation in child protection decision making (Norges Offentlige Utredninger, 2000). Denying a child the opportunity to express his or her views, or failing to take those views into account, is not in accordance with child welfare legislation.

It is difficult to assess how frequently children participate in case processing by Child Protection Services (CPS). One reason for this is that children and social workers do not always agree what participation means. McLeod (2006) compared answers from a postal survey and interviews with social workers to the responses from children. She found that, although social workers had described making significant efforts 'to listen to children', the children had not experienced that their voices were heard. A contradiction arises when the adults and the children have different understandings of what participation means. Adults may view participation more as a way of paying respectful attention to what the young people have to say. Children, in contrast, may think that participation is demonstrated by delivering services that are in accordance with their expressed wishes. Therefore, discrepancies between the reporting of children and social workers can be expected. Social workers may think they have made participation possible through listening to children with the 'proper attitude'. Children may not agree that they participated if the social worker did not act on what they wanted.

Children possess little power in the processing of child welfare cases. There are no formal requirements in the Norwegian child welfare act regarding how child participation should be implemented. Therefore, the ways in which social workers decide to include the child in the decision-making process vary. When and how a child is included in the decision-making process is controlled by the social worker. Approval of the social worker in charge is, therefore, a crucial factor that helps determine if a participation process will be initiated. Organizational policy is also likely to influence this decision.

Children's right to participation is a procedural right. This means that children have the

right to be informed and consulted in the procedure of decision making. It is not a right for children to decide for themselves. Previous research conducted within a children's rights framework has concentrated largely on participation processes (Thomas, 2002). As a consequence, research has paid relatively little attention to the result of children's participation in child welfare case processing. Therefore, little is known about the impact children's participation has upon decisions made by child protection services.

The Norwegian municipal CPS is responsible for investigating cases and providing social services to children and their families. If CPS decides that a child needs to be placed in out-of-home care, the case has to be petitioned to the regional social welfare board. A judge then leads a board hearing and negotiations are conducted in the same manner as in an ordinary court. Subsequently, regional CPS agencies provide foster or residential care accommodation. This process is described in more detail in article four (Vis & Fossum, 2013).

According to Statistics Norway (2011), 29,897 investigations were carried out in 2009. Almost half (44.9 %) of the cases were unsubstantiated after investigation and the rest resulted in service being provided. During that same year, a total of 46,487 children aged 0-22, representing 3,75 % of the population in this age group, were directly or indirectly receiving some form of child welfare service. In the age group 6-12 years, which is the main focus of this study, 4,201 (24.5 %) children were placed in out-of-home care and 76.5 % were living with parents. In this age group, the most common service provided directly for children living at home was respite care (32 %) or support for leisure activities (10 %). In addition, 54 % of families received financial support directly from CPS, either to pay for after-school care or leisure activities or as short-term support for general purposes.

A decision to provide or discontinue child welfare support, or to place a child in state custody, has huge implications for a family and the child. It determines the social and material conditions under which the child will grow up. This in turn has implications for the child's health, development and well-being. A review of the research literature (Vis, Standbu, Holtan & Thomas, 2011) found that a child's participation in the decision-making process could lead to decisions that allow for the formulation of plans that are better tailored to the needs of both the child and the family. Denial of the opportunity to participate in child welfare planning (Holland & Rivett 2008; Leeson, 2007) or child

nursing (Coyne, 2006; Kelsey, Abelson-Mitchell & Skirton, 2007; Runesson, Hallstrom, Elander & Hermeren, 2002) is associated with feelings of helplessness, low self-esteem and lack of confidence. These studies indicate that a lack of child participation may have health consequences.

As a researcher at the Child Protection Research Centre at University of Tromsø, I was commissioned to develop a training program for social workers in 2004. The aim of the program was to train social workers in how to communicate with children and how to include children in decision making through participatory processes. The program was based on the “Children and Decision-making Toolbox” developed by Claire O’Kane and Nigel Thomas for use in the UK (Thomas, 2002). With help from social workers from five different municipal child protection agencies, the material was translated to Norwegian and adapted for use in a Norwegian context. There was a sense of enthusiasm and pioneering spirit among those who were part of that process. It did, however, become apparent that not all social workers were equally strong advocates for child participation. When the training program was introduced on a larger scale in 2005, it provided a possibility to quantitatively study how social workers prioritize participation and which obstacles they perceive for children’s participation.

### **1.1 Thesis structure**

This thesis consists of three separate studies on child participation in child protection decision making. These studies investigate social workers’ views on participation and the results of CPS decision-making processes. Social workers’ views are studied because it is believed that this helps determine if children are consulted. The outcomes of decision-making processes are studied in order to see if children’s views have an impact upon the ultimate decision.

This thesis identifies two types of participation: (1) Consultative participation in which children are asked about their opinions, meaning that they have the opportunity to express their views; and (2) Collaborative participation in which a child’s opinion affects the outcome of the decision, meaning that the child has some influence. The background for these two definitions of participation is explained in chapter two. See also article one (Vis, Holtan & Thomas, 2012) for a discussion of the different definitions of participation.

Child participation is studied under the context of formal CPS decision making, where the contingency theory of decision making is applied. This theory implies that decisions about children's participation are affected by variables that are categorized as external factor, organizational factor, decision maker factor or case factor. This is explained in chapter three.

A systematic review of what is known from the research literature on contingencies that affect child participation is presented in chapter four.

The general purpose of this thesis is to study how social workers view participation and to study factors that determine whether children's views have an impact in CPS decisions about home-based services, custody and visitations. With a foundation based on what is known from previous research, five specific research aims for the thesis are formulated in chapter five.

A realist approach is employed in the study of these aims and carried out using observational studies. In an observational study, data about the natural occurrence of a phenomenon are collected. There is no experimentation involved. For this thesis, data were collected through questionnaires sent to social workers and through data collection using case files with the ultimate purpose of identifying variables that may predict whether children become participants. These predictions are in the form of generalizations about events through statistical regularities. The methods that were used are presented in chapter six and the results are laid out in chapter seven.

In chapter eight, the results are discussed with reference to each of the five research aims. Limitations are presented as part of the methodological discussions in chapter eight.

## 1.2 Key definitions

The term **child protection** is used with reference to investigations or planning and provision of services for children and families, carried out by child protection services under the mandate of the Child Welfare Act. Norway has a family service system approach to child welfare and protection. This means that child protection services are responsible for investigating cases of suspected abuse or neglect as well as providing guidance and support for families.

**Child protection services (CPS)** refers to the organizations that carry out investigations and provide services under the Child Welfare Act. In Norway, services are organized in two tiers. The first tier is made up of child protection agencies within local municipalities. These agencies are responsible for investigating cases and providing services for children living with their birth families. Second tier regional child protection agencies are responsible for providing foster care and residential care facilities as well as more specialized therapy for children living with birth families.

**Social worker** is used with reference to a person employed by child protection services. A social worker usually holds a bachelor or master's degree in social work, child protection, teaching or nursing.

**Case manager** is used with reference to a social worker who is in charge of the processing of a specific case.

**Consultative participation** means that a child has access to express his or her views. This refers to an opportunity for the child to talk with a social worker or a child advocate about what he or she wants, or to attend a meeting where the case is discussed.

**Collaborative participation** refers to a situation in which the opinion expressed by the child had an impact on the ultimate decision. This means that the decision coincides, to some degree, with what the child wanted or that the child contributed some information that was decisive in the case.

For convenience, the term **participation** is used in reference to both consultative and collaborative participation.

A **strategic decision** is a key decision that cannot easily be reversed. In child protection, formal decisions about service delivery, custody and parental visitations are considered strategic. Decisions about children’s consultative and collaborative participation are also seen as strategic.

Variables that are contingent upon child participation are categorized in four groups of **context factors**: decision-maker factors, case factors, organizational factors and external factors. **Decision-maker factors** refer to characteristics of the decision maker. **Organizational factors** refer to characteristics of the child protection agency. **Case factors** refer to characteristics of the child protection case. **External factors** refer to characteristics of the child protection system.

**Decision type** refers to what the decision is regarding. Child participation is studied in three main types of decisions. These are decisions about home based support for families and children, decisions about child custody and decisions about family visitations for children in state custody.

This thesis is limited to the investigation of participation for **children** aged 6-14 years. For the sake of convenience, when the term ‘child’ is used throughout the text, it refers to a child in the above-mentioned age range.

### 1.3 Abbreviations

Abbreviation	Definition
CPS	Child protection services
OR	Odds ratio
SD	Standard deviation
UNCRC	United Nations Convention on the Rights of the Child

## 2. Consultative and collaborative participation

What follows is a brief review that describes the origin and premise of consultative and collaborative participation. This distinction is relevant to this thesis because it is considered essential to understand the special meaning that participation has in decision making within a child protection context.

In their Handbook of Children and Young People's Participation, Percy-Smith and Thomas (2010) conclude that people working towards children's participation have markedly different agendas and that no grand theory of child participation exists today. Two ways of legitimizing child participation can be identified. First, being able to express views freely is a fundamental right in and of its own. Second, it is a way for children to assert influence. Both of these aspects of participation are embedded in the Norwegian Child Welfare Act. The act states:

A child who has reached the age of 7, and younger children who are capable of forming their own opinions, shall receive information and be given an opportunity to state his or her opinion before a decision is made in a case affecting him or her. Importance shall be attached to the opinion of the child in accordance with his or her age and maturity. (*Child Welfare Act, Section 6.3*)

This means that children have an unconditional right to be consulted. This includes having access to information and expressing opinions. However, there is no absolute right to influence. Influence is conditional, depending on the child's age and maturity. Having access and having influence represent two different approaches to what participation is.

These two aspects are identified by Landsdown (2010) as consultative and collaborative participation. **Consultative participation** is when adults seek children's views in order to gain knowledge and understanding about the children. Consultative participation is conducted by adults and does not involve sharing of power with the children themselves. This form of participation is particularly common when children take part in child protection investigations or are witnesses in judicial administrative proceedings.



**Collaborative participation**, on the other hand, provides a greater degree of partnership between adults and children. It allows the opportunity for shared decision making with adults. Collaborative participation means that children may influence outcomes in addition to setting agendas.

Consultative participation may or may not translate into collaborative participation. Collaborative participation is seen as a process that involves information sharing and discussions that aim to balance children’s views with those of others. This is in contrast to consultative participation, which is primarily seen as a process that aims to record children’s views (Landsdown, 2010).

A summary of some key differences between consultative and collaborative participation is shown in Table 1.

*Table 1: Key differences between consultative and collaborative participation*

	<b>Consultative participation</b>	<b>Collaborative participation</b>
The meaning of participation	Participation means having access to information and presenting one’s views	Participation means being able to influence decisions
The rationale for child participation	It is a legal obligation	It helps empower the child and leads to better decisions
Challenges to implementation in social work practice	Eliciting children’s views	Balancing children’s views
How it can be determined that participation occurred	Assessment of whether the child had the opportunity to consult with a social worker or advocate and/or to attend conferences, reviews or court hearings	Assessment of whether the child influences the decision and of whether the decision coincides with what the child wanted

**2.1 Consultative participation**

The children’s rights movement in the 1970s started with claims for libertarian participation rights for children in schools (Neill & Fromm, 1960) and later shifted to the social and welfare arena. The process culminated in 1989 with the declaration of the UNCRC. In the UNCRC, the child is recognized as having individual rights. The three fundamental rights within the convention are commonly recognized as provision,

protection and participation. The participation rights are expressed in Article 12 which state that:

1. States Parties shall assure to the child who is capable of forming his or her own views the right to express those views freely in all matters affecting the child, the views of the child being given due weight in accordance with the age and maturity of the child.

2. For this purpose, the child shall in particular be provided the opportunity to be heard in any judicial and administrative proceedings affecting the child, either directly, or through a representative or an appropriate body, in a manner consistent with the procedural rules of national law. (United Nations, 1989)

The convention enjoys widespread support for the rights claims embodied in it. However, tension still exists today surrounding the importance and merit of participation. In particular, if it is considered in conflict with the protection of children (James, Haugen, Rantalaiho & Marples, 2010), which is sometimes the situation in child abuse cases. For example, if social workers conclude that it is not safe for a child to stay at home, they may not find it appropriate to involve the child in any further discussion. Therefore, the view of children as holders of individual rights to participation in a child protection context has posed some challenges. The right to participate is not the same as the right to decide. When participation is divided into the four levels of (1) being informed, (2) being able to express an informed view, (3) having the view taken into account and (4) being the main or joint decision maker, the rights entitled through UNCRC Article 12 include only the first three levels. Alderson (2010) notes that participation rights according to UNCRC primarily refer to sharing but not deciding. Consultative participation is seen as a way to ensure fairness in decision making (Landsdown, 2010).

This is a goal in and of its own. If children feel respected and understood, it follows that:

children and adolescents should therefore see decisions as fairer, be happier with them and more likely to comply with them if they have had some involvement, at least in terms of being heard or consulted—by having a ‘voice’, if not ‘choice’.  
(Cashmore, 2011, p. 515)

## 2.2 Collaborative participation

The view that participation leads to empowerment developed in the late sixties when young people started to protest against authority. Empowerment is based on the assumption that, once members of a community feel empowered, they can advocate for themselves in claiming their rights. The same is not necessarily true for children. Landsdown (2010) holds that:

although children can be powerful and effective advocates for their own rights, given appropriate access to information, space and opportunity, their youth and their relatively powerless status mean that they can only sustain this role where there are adults to facilitate the process. (location 786)

Arnstein saw participation as a struggle for power. In this context, having power is equated with having influence in decision making. The opening phrases in one of her seminal articles on participation (Arnstein, 1969, p. 216) states that “the idea of citizen participation is a little like eating spinach: no one is against it in principle because it is good for you”. She further writes that, “the applause is reduced to polite handclaps, however, when this principle is advocated by the have-nots”. Whether the have-nots of the late sixties were ethnic minorities or any other group of disadvantaged people, citizen participation was to be the means through which empowerment occurred because “citizen participation is a categorical term for citizen power. It is the redistribution of power that enables the have-not citizens, presently excluded from the political and economic processes, to be deliberately included in the future.” (Arnstein, 1969, p. 216).

With the understanding of participation as power, Arnstein considered information

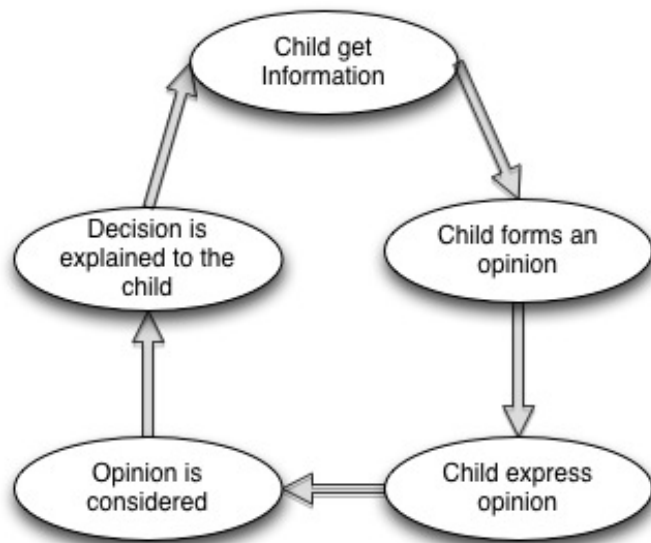
sharing and consultations to be tokenistic forms of participation. Authentic participation had to involve partnership and delegation of power and control. Arnstein's model has later been adapted to describe different levels of child participation (Hart, 1992). The logic behind these models is that greater power equals more authentic participation. Shier (2001) put emphasis on the influence children have in decision-making when determining whether children participate.

The rationale for seeing participation in CPS decision making as a means to empowerment is that children can influence decisions. This may in turn result in improved tailoring of services (Vis, Strandbu, Holtan & Thomas, 2011).

### **2.3. An integrated model of consultative and collaborative participation**

In a recent review of children's involvement in social work decision making, the authors (Gallagher, Smith, Hardy & Wilkinson, 2012) argued that social workers need to make sure children's views are not merely recorded but also acted upon whenever possible. Strandbu (2007) identified the conflict between protection and participation as an inherent dilemma in CPS decision making. Skivenes and Strandbu (2006) have attempted to make a synthesis of consultative and collaborative participation. They proposed that, if consultative participation is to translate into collaborative participation, a deliberative process is needed. This process is characterized by five steps (Skivenes & Strandbu 2006; Strandbu 2007, Strandbu & Vis, 2008), as illustrated in Figure 1. The model allows for different types of participation, i.e consultative or collaborative. The type of participation achieved is dependent upon the power and influence the child has in the process.

**Figure 1: Integrated model of consultative and collaborative participation**  
(Strandbu & Vis, 2008)



The child (1) is given information that is necessary in order (2) to form an opinion that (3) has to be expressed in the appropriate setting in order for it (4) to be taken into consideration when a decision is reached, following which (5) the outcome is explained to the child (see also Lundy, 2007, for a similar analysis). In CPS case processing, some questions are addressed in a more formal part of the process and others are dealt with in a more informal manner. Formal decisions in a care and protection case usually relate to the extent and type of services or orders. These are strategic decisions. In these types of decisions, collaborative participation may be more difficult. One important reason for this is that legislation and guidance govern both the provision of services and the case processing procedures.

#### **2.4 Implementation of child participation in CPS services**

As Landsdown (2010) highlights, the last twenty years since the Convention on the rights of the child was adopted by the UN has been a period of advocacy to promote the concept of participation and to find ways of translating it into practice. The UN committee that oversees the signatory parties' implementation of UNCRC notes that:

A widespread practice has emerged in recent years, which has been broadly conceptualized as “participation”, although this term itself does not appear in the text of Article 12. This term has evolved and is now widely used to

describe on-going processes, which include information-sharing and dialogue between children and adults based on mutual respect, and in which children can learn how their views and those of adults are taken into account and shape the outcome of such processes. (United Nations Committee On the Rights of the Child 2009, p.5)

The process of implementing child participation in CPS varies from country to country. This has contributed to considerable differences with respect to how child participation is anchored in social work practice and legislation.

Norwegian reports point to children's participation as one of the most challenging areas of child protection (Barne, Ungdoms og Familiedirektoratet, 2010; Helsetilsynet, 2012). In Norway, no specific official guidance has been provided on how and when social workers should consult with a child. In contrast, the guidance attached to the Children Act in the UK provides for mandatory meetings to be arranged. In the UK these procedures have, in effect, closely linked participation for children with attendance at such meetings. Williams (2007) argues that the law of England and Wales poses fewer problems for effective implementation of children's participation rights as compared to rights of protection. It is possible that differences that exist between countries on how child participation is practiced reflect differences in legal regulations. However, it is also possible that culture plays a role within the CPS system. Cross-cultural studies on child participation (Mason & Bolzan, 2010; Twum-Danso, 2010) have pointed out that culture changes the way child participation is framed and understood in different societies.

## **2.5 Critique of how child participation is practiced**

Participation in government decision-making processes has been viewed by some (Davies, 2007; Hennem, 2010) as a managerial technique that could serve the purpose of silencing and oppressing. In particular, when participatory government or civic engagement places more emphasis on process than outcome there may be the danger that participation becomes just another tool for adults to wield invisible power over children. Hennem (2010) argues that invisible power is difficult to defend against. She considers participation to be a new form of discipline. One example of this is when the hidden agenda behind consultations is to improve the child rather than the service (Alderson, 2010). When consultative processes reflect white middle-class norms of

communication, they may tend to provide more privileges for the already privileged (Vandenbroeck & De Bie, 2006). This means that a child's voice may be less likely to be heard if the child does not behave and communicate in ways considered appropriate by those white middle-class norms.

### **3. Contingency theory of decision making**

When children participate through consultations and collaboration, it is the result of a decision made by social workers and judges. Two decisions are made, the first of which pertains to whether or not the child should be consulted. A second decision is then made about how much weight will be given to the child's view. The analysis of children's participation in this thesis is based on the assumption that those decisions are dependent upon the type of decision and the circumstances of the case. The circumstances of the case are referred to as context factors.

Nutt and Wilson (2010) separate between strategic decision making and choices. Individuals make choices. Strategic decision making is the social practice of making key decisions within an organization (March, 1994). This practice is carried out among and between individuals. Social workers' decisions on child participation cannot be fully understood by merely studying the cognitive processes of decision makers. Social workers are not considered autonomous decision makers when child protection cases are determined. This is because their decisions are constricted by legislation, resources, organizational factors and case factors in an interactive ecology. Therefore, the context of the decision making should be studied. In decision-making theory, the analysis of how context influences decision making is labelled as a contingency approach (Nutt & Wilson 2010).

#### **3.2 The contingency approach to the study of decision making**

In science, the contingency approach involves the study of how the effect of one variable on another depends upon a third variable (Donaldson, 2001). Decisions may be influenced by contingencies related to the case, the decision maker, the social work organization and society.

Studies that use a contingency approach in studying decisions aim to assess situational factors that may influence a main effect, e.g. decisions on child participation. According to Beach and Michell (1978), developing a contingency model involves several steps. First, the decision that is studied must be identified. Second, the characteristics that account for the variance in decisions must be identified. Third, explanations that connect decisions to their contingencies must be constructed.

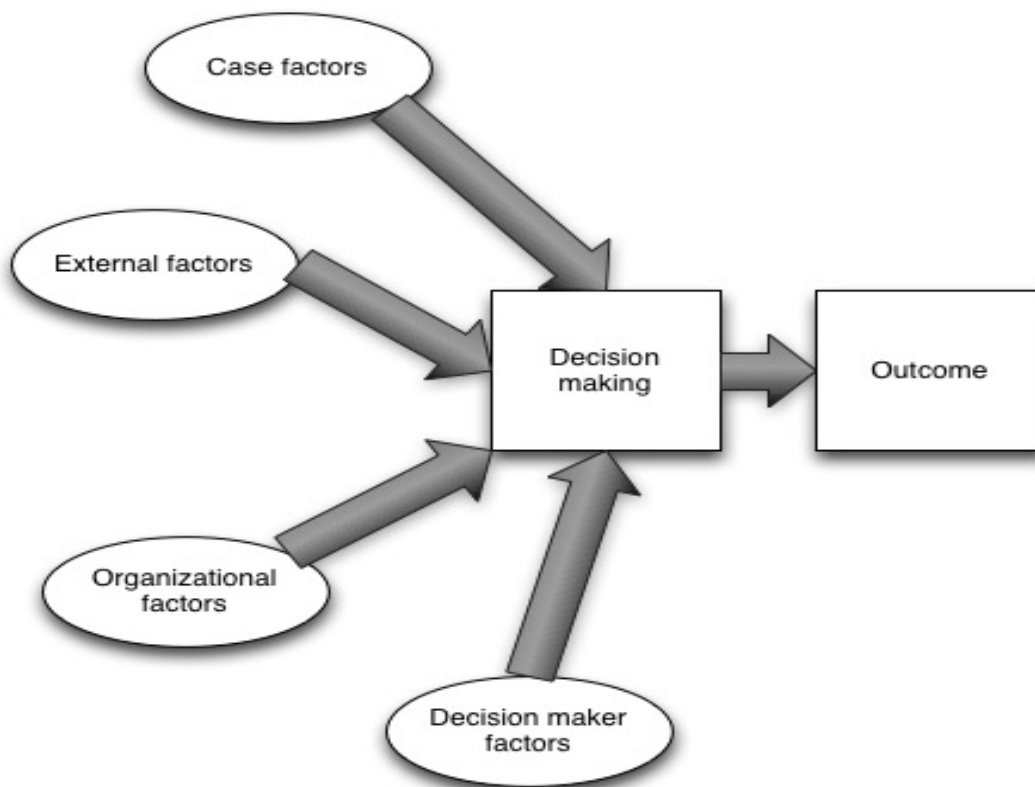


### 3.3 A theoretical model of contingency factors

Most studies that have been performed on the relationship between contexts and decision making pertain to business decisions in manufacturing companies. Papadakis, Thanos and Barwise (2010) reviewed 46 such studies and one of their conclusions was that we do not know if the results from such studies can be applied to decision making in public services. Knowledge about contingencies that affect decisions in CPS is, therefore, limited.

Bauman, Dalgleish, Fluke and Kern (2011) suggested a contingency model for factors that influence decision making in child protection. An illustration of the model is shown in Figure 2 (Bauman et al., 2011).

**Figure 2: Model of contingency factors**



The model consists of four main variable categories, illustrating that different types of factors may influence decision making. These are categorized as external factors, organizational factors, decision maker factors and case factors. Bauman et al. (2011)

points out that the model is based on the recognition that CPS decisions take place within an agency culture “where a systemic context combines with the case decisions made by the management and staff of the agency” (p. 5).

A limitation of this model is that the specific variables that impact decisions about child participation cannot be derived. Therefore, in order to determine which variables are likely to affect child participation, a review of research literature is needed.

## **4. Review of variables that determine child participation**

The purpose of this review is to assess what is known about case factors, decision maker factors, organizational factors and external factors that influence decisions about consultative participation and collaborative participation. It builds upon the categorization of factors from contingency theory. The aim is to identify variables that have been studied in relation to decisions on child participation in child welfare cases. This refers to Beach and Michell's (1978) second requirement for contingency modelling; identification of characteristics that account for variance in decisions about child participation (see page 16 in this thesis).

Case factors are defined as factors that are specific to the case such as the seriousness of the case, the child's age or the child's wishes. Factors related to how the decision-making process is conducted, such as the number of consultations and meetings a child attended, are also categorized as case factors. Decision maker factors are defined as factors related to the decision maker, i.e. the education, work experience and priorities of social workers. Organizational factors are defined as factors related to the organization that is responsible for the decision, i.e. the type of agency. External factors are defined as factors that are related to the general child protection framework, i.e. legislation.

### **4.1 Review method**

This review is limited to empirical studies published in Norwegian and English, containing samples of 30 or more subjects. It does not comprise theoretical publications. Studies that were not available online or for loan through the Norwegian University Library Cooperation (BIBSYS) were not included.

Three main strategies were used in order to identify studies that had investigated contingency factors. First, the references from three contemporary literature reviews were retrieved and investigated. These reviews were chosen because they were the most recent studies that had analyzed child participation in a child protection context. These reviews looked at (i) child participation and child health (Vis, Strandbu, Holtan & Thomas, 2011), (ii) children's and parent's involvement in social work decision making (Gallagher, Smith, Hardy & Wilkinson, 2012) and (iii) barriers and factors in

facilitating child participation within the child protection and child welfare services (van Bijleveld, Dedding & Bunders-Aelen, 2013).

Second, Norwegian studies were identified through searches in four official government- commissioned reports. These reports were used to identify Norwegian studies specifically because they reviewed child participation in Norway. The reports were generated by select committees that had been commissioned by the Ministry of Children, Equality and Social Inclusion (Norges Offentlige Utredninger 2000; Norges Offentlige Utredninger 2011; Norges Offentlige Utredninger 2012; Barnevernpanelet, 2011).

Third, a search of major research databases was undertaken. A detailed description of this search process is found in appendix 1. An overview of included and excluded studies is shown in Table 2.

*Table 2: Overview of included and excluded studies in the review*

	Number of studies identified	Reason for exclusion (N)	Number of studies included
Search in previous reviews	12	No context factor was specified (N=4) Low sample (N=3)	5
Search in Norwegian government reports	6	No context factor was specified (N=4)	2
Search in publication databases	921	Study was not relevant or no context factor was specified (N=912) Low sample (N=2)	7
Total	939	923	14

Nine studies were retrieved and analysed but not included in the final review due to the fact that they did not comprise any context factors. However, because those studies did indicate a proportion of children who were found to be participating, the main results from those studies are shown in a separate Table (see Table 3). Six of those studies

defined child participation as consultative participation. Three studies defined participation as collaborative participation. Over half of those above-mentioned studies were more than 10 years old. The studies looked at participation in different stages of CPS case processing, such as child protection investigations (Cocozza, Gustavsson & Sydsjo, 2006; Gording Stang, 2007), case planning (Wilson & Conroy, 1999; Holland & O'Neill, 2006) and case reviews (Murray & Hallet, 2000). Most studies did not specify in detail what type of decision was studied. Two studies (Bakketeig, 2010; New South Wales Community Services Commission, 2000) differentiated between custody decisions and decisions on family visitation for children living in state custody. Both studies found that participation in decisions on family visitations was more frequent than in decisions about custody. This indicates that the likelihood of participation is dependent upon the decision type. This may be explained by decision-maker factors such as social workers' attitudes towards custody placement (Arad-Davidzon & Benbenishty, 2008) and social workers' risk assessments (Davidson-Arad & Benbenishty, 2010).

A total of 14 scientific studies were finally included in the review of context variables (Table 4). It should be noted that, in many of the studies included, it was not the main aim of the study to investigate variables affecting child participation in CPS decision making. Despite this, the studies that were considered relevant for this thesis were included if it was considered relevant to determine variables that impact decisions on children's participation.

Table 3: Studies that address the occurrence of consultative or collaborative participation.

Study	Country	Type of study	N	% counted as 'participating'
<b>Consultative participation:</b>				
Cocozza, Gustavsson & Sydsjo, 2006	Sweden	Archive study: Unsubstantiated CPS cases	220	47%
Gording Stang, 2007	Norway	Archive study: Substantiated CPS cases	30	53%
Murray & Hallet, 2000	UK	Observation of children's hearings	60	87%
Næss, Havik, Offerdal & Wærness, 1998	Norway	Cross-sectional survey among social workers	1365	77%
New South Wales Community Services Commission, 2000	Australia	Cross sectional, child interviews: Custody decision	66	38%
Bakketeig, 2010	Norway	Cross sectional, child interviews: Family contact decision	62	47%
		Cross-sectional, child interviews: Custody decision		52%
		Cross sectional, child interviews: Family contact decision		70%
<b>Collaborative participation:</b>				
Holland & O'Neill, 2006	UK	Child interview	23	35%
Stang, 1997	Norway	Archive study: Substantiated CPS cases.	40	17%
Wilson & Conroy, 1999	US	Child interview	1100	29%

Table 4: Studies that address variables associated with child participation

Study	Country	Contingency factors	Variables studied	Sample and source	N	Main findings
Arad-Davidzon & Benbenishty, 2008	Israel	D	Social worker attitudes towards custody and reunification	Questionnaire to social workers, Vignette study	200	Removal and reunification recommendations were not associated with the child's wishes.
Block et al., 2010	US	C	Child age, abuse type, ethnicity, child anxiety	Cross section of court custody hearings, child interviews	85	Participation was not associated with age, abuse type, ethnicity or anxiety level.
Barne Ungdoms og Familiedirektoratet (2010)	Norway	O	Type of current living arrangement	Cross-sectional survey, child informants	815	Children living in foster care are happier with participation than children living in residential care.
Cashmore, 2011	Australia	C	Child age	Cross section of cases on child custody, child interviews	47	53% wanted more influence. 90 % had had little or no influence. Older children were more likely to have influence.
Davidson-Arad & Benbenishty, 2010	Israel	D	Social workers' attitudes about participation, Social worker risk assessment and intervention recommendations	Vignette study, Social workers	236	Attitudes toward child participation were not significantly associated with risk assessment or intervention recommendations. Intervention decisions may be biased by workers' personal ideology and values.
Goldbeck, Laib-Koehnemund & Fegert, 2007	Germany	C	Decision-making process	Social worker reports, randomized control trial	80	Participation was significantly lower when decision making was expert-assisted.
McDovall, 2013	Australia	C, E	Child ethnicity, child gender, child age, placement type, geographical location of CPS agency	Cross section of children living in state care, survey of child respondents	1062	No effects for ethnicity or placement type. Females were more likely than males to participate. Younger children less likely to be consulted. Significant differences in participation between geographical districts.
Oppedal, 1997	Norway	C	Child age	Cross section, archive study	297	Representation of children's views in case files increase with age.
					56	

Roose, Mottart, Dejonckheere, Nijnatten & Bie, 2009	Belgium	D	Social workers	Case reports for looked-after children, Document study		Social workers choice of language in reports has an impact on the credibility of the message regarding what the child wants and the weight that is given to it.
Shaw 1998	UK	C	Child age	Survey of children	2073	Overall were 51% seeing their family as much as they would like. For children aged 8-11, the proportion was 37%.
Shemmings, 2000	UK	C, D	Child age, social workers education	Questionnaire to social workers	88	There is a difference between social workers and non-social workers about the age at which children should attend conferences
Skivenes, 2013	Norway /UK/US	E, D	Country, decision maker priorities	Vignette assessments by Social worker	301	Norwegian social workers were less likely to want to consult with younger children compared to social workers from US and UK.
Southwell & Fraser, 2010	Australia	C	Child age	Cross-sectional, Child questionnaire	169	63% felt that they had influence. Young people less commonly expressed satisfaction with participation.
Thomas & O'Kane, 1999	UK	C	Child age, relation to parents,	Interviews with children invited to review meetings	225	Attendance at reviews increased with age. Conflict between parents and social workers indicated decreased participation. Few children thought their views had much impact, if they did not agree with the social worker's opinion.

Note: US = United States, UK = United Kingdom, C= Case factors, D= Decision maker factors, O= Organizational factors, E= External factors



## 4.2 Review results

In 14 studies, it was possible to assess if participation was contingent on some other contingency factor. A summary of these studies is shown in Table 4. There was one control group study. The rest were cross-sectional studies that used convenience samples. Sample sizes varied considerably between studies. Five studies had samples below 100, while seven other studies had sample sizes between 100 and 1000. Two studies had a sample size over 1000. Because most studies were conducted on a special subset of CPS cases, they are not representative of all types of children or cases. Data were collected from children (in 9 studies), social workers (in 5 studies) and archives (in 2 studies). When data was collected from child informants, child age was the most commonly included contingency variable. Most studies that used social workers as informants aimed to identify contingency factors related to the social worker, such as experience or education. The archive studies investigated child age and the reporting style of social workers as contingency factors. Most of the studies were European. Three were from Norway, three from the UK and one each from Belgium and Germany. There were three Australian studies, two from Israel and one from the US. The search design only included studies in Norwegian and English. This affected which countries were included.

### 4.2.1 Case factors

A variable that is related to the child or the child protection case is categorized as a case factor. Such variables were included in 9 of the studies. The most common among these was child age. One study did not find any age difference between children participating in court hearings to determine custody (Block et.al, 2010). Two studies found that the views of older children may be more likely to impact the outcome (Cashmore, 2011; Shaw, 1998). Several studies found that younger children were less likely to be consulted compared to older children (Cashmore, 2011; McDovall, 2013; Oppedal, 1997; Thomas & O’Kane, 1999). Most studies used age as a categorical variable. Many of these studies used the approximate age of 12 to separate child groups for statistical comparison. It is not clear whether this was used as a cut-off based on assumptions about child development or whether it was done to create equally sized groups for statistical analysis. The consequence, however, is that little is known about differences between children within the age group of 6-12 years. There were no longitudinal studies; thus, little is known about how participation changes as the child gets

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older.

Ethnicity was included as a variable in two of the studies (Block et al., 2010; McDovall, 2013). Other variables such as gender (McDovall, 2013), abuse type (Block et al., 2010), relation to parents (Thomas & O’Kane, 1999) and characteristics of the decision-making process (Goldbeck et al., 2007) were only included in one study. More research is needed in order to conclude how these variables impact the likelihood of children’s participation.

#### **4.2.2 Decision-maker factors**

A variable related to the decision maker is categorized as a decision-maker factor. The education (Shemmings, 2000) and work experience (Davidson-Arad, Englechin-Segal, Wozner & Gabriel, 2003) of social workers impact their priorities in decision making.

There are some indications that the relationship between child age and child participation is mediated by decision-maker factors. Holland (2001) found that the weight and value given to children’s views by social workers vary. Social workers may see children as more competent and mature if children’s wishes coincide with the social workers’ own views. How the social workers judge the child’s opinions was also found to affect the way in which those opinions are portrayed in social workers’ reports. Roose, et.al (2009) argues that the choice of language used in reports has an important impact on the credibility that is attached to the wishes of the child and the weight that is given them. This point is also made by Thomas and O’Kane (1999) who found that children do not believe their views have much impact if they do not agree with those of the social worker. Shemmings (2000) found social workers tend to favour diametrically opposed viewpoints about the age at which children’s views should have significant impact upon the decision. Interestingly, she also found that social workers believe children should nonetheless be allowed to attend reviews and conferences. Non-social workers, however, did not believe children should attend conferences if their views would not be likely to impact the decision. This indicates that social workers may tend to differentiate between consultative participation and collaborative participation in a manner that separates their understanding of participation from non-professionals.

Two vignette studies (Arad-Davidzon & Benbenishty, 2008; Davidson-Arad & Benbenishty 2010) attempted to measure the relationship between social workers’ attitudes and the decisions they make. It was found that social workers’ attitudes towards placing children in

state care influenced risk assessments as well as their recommendations for removal and reunification. Social workers' recommendations about child custody were not significantly influenced by the child's views. This corresponds with the finding that children's influence in custody issues is less likely to weigh heavily compared to other less decisive or non-strategic decisions (Thomas & O'Kane, 1999). The implication is that, in cases where safety takes precedence, participation may tend to be seen as an activity that is unrelated to decision-making. Thus, in some cases, children may be consulted for the sake of being heard and not because it is expected that their opinion will affect the decision. We may thus hypothesize that consultative participation and collaborative participation are two views on participation that exist side by side. Social workers may choose to see participation as consultative in some cases whereas they see it as collaborative in others.

The main weakness with studies that use hypothetical vignettes to examine social workers' decisions is that these may not provide adequate representation of what social workers do in practice.

#### 4.2.3 Organizational factors

A variable related to the child protection agency is categorized as an organizational factor. The hypothesis that an organizational factor impact child participation is supported by three studies. Those studies have found differences in the occurrence of child participation between organizations within a region (Barne Ungdoms og Familiedirektoratet, 2010), between public and private CPS service organizations (Healey & Darlington, 2009), and between regions within a country (McDovall, 2013). It is not known which specific characteristics of CPS agencies are associated with the differences in participation.

#### 4.2.4 External factors

A variable related to the child protection system is categorized as an external factor. The studies reviewed originated from many different countries. However, it is not possible to conclude if a difference in how often children participate exists across countries. This is primarily due to the fact that differences found in rates of participation in the studies reviewed may largely be a result of how participation is defined and measured. Comparisons are difficult because participation is sometimes defined as the 'social worker seeing the child', other times as the child 'feeling seen', sometimes as the child 'having helped write the care plan', sometimes as 'the child having influence' and other times simply as the 'child being present'. Additionally, data sources vary from archive studies to social worker interviews to

child interviews and observations.

One indication that external factors and decision-maker factors are related was found in a vignette study by Skivenes (2013), which concluded that Norwegian social workers were less likely to want to consult with younger children compared to social workers from US and UK. This indicates that the CPS system, and probably other cultural factors, may influence the decisions social workers make about the inclusion of children in decision making.

#### **4.3 Conclusion from literature review**

Most published studies only assess the relationship between participation and a few contingency factors. The available research thus provides little empirical evidence of how these factors interact and what the relative importance of each factor is. Therefore, it is not possible to construct an empirical contingency model that accounts for the relationship between different types of contingency factors based on current research. More research using multivariable analysis is needed in order to accomplish this.

## 5. Thesis objectives

The main aim of this research is to study contingency factors that influence decisions about child participation in the processing of child protection cases. These decisions include: (i) the decision to consult with a child about his or her own views and (ii) the decision about whether or not children may see their wishes fulfilled. These decisions are made by CPS agencies or courts. The outcome of the first decision determines if a child is allowed to attend consultations, which leads to consultative participation. The outcome of the second decision determines if a child has influence in the case, which leads to collaborative participation. In order to identify factors that are associated with consultative and collaborative participation the following objectives are addressed:

1. To assess social workers views about participation. (Article 2 and 3).

First, it is quantitatively measured how important and how difficult Norwegian social workers consider child participation to be. Then it is investigated how this relates to other variables categorized as decision maker factors. These other variables are: social workers' age, gender, work experience and work engagement. How important and how difficult social workers judge participation to be, are considered as variables that determine whether children are consulted. Different types of obstacles that social workers refer to as reasons not to include children in decision making have previously been identified (Vis, 2004), but not quantitatively measured. It is, therefore, unknown how much these views vary among individuals and groups of social workers. Previous research has found that education (Shemmings, 2000) and work experience (Davidson-Arad, et al, 2003) impact how social workers prioritize child participation. Associations with the variables age, gender, and work engagement is explored without any specific hypothesis on how they correlate with views on participation.

2. To assess the association between decision maker factors and organizational factors (Article 3).

This objective addresses the relationship between characteristics of the decision maker and the characteristics of CPS agencies. A decision about child participation is a strategic decision carried out between individuals within an organization. This means that a decision about participation is not solely dependent on the choices of individual social workers but is also influenced by the organization as a whole. It is known that child participation varies

depending on the type of CPS agency (Healy & Darlington, 2009) as well as the geographical location of the agency (McDovall, 2013). However, it is not known if social workers' views on participation are influenced by other characteristics related to the organization they work for. The hypothesis is that organizations influence social workers' views and that there is, therefore, a difference in how social workers from different CPS organizations view participation.

3. To investigate which case factors predict collaborative participation (Article 1 and 4). In the literature review (chapter 4) it was found that many previous studies have looked at the relationship between child age and participation. Other case factors have only been investigated in a few studies. The limitation of this previous research is that it only looks at simple associations between one predictor and the outcome. It is, therefore, difficult to assess which of the case variables are the most important predictors. Because previous findings vary depending on sample and research methods, there is no firm empirical foundation upon which to base a specific hypothesis for this investigation. The study of relationships between collaborative participation and case specific factors is, therefore, exploratory.

4. To assess if case factors that predict collaborative participation are dependent upon the decision type? (Article 4)

This question addresses the relationship between the type of decision and contingency factors. A few studies have found that the proportion of children who participate varies depending on what the decision involves (see Table 3 in chapter 4). This observation has two implications. First, it is possible that children are likely to influence certain types of decisions but not others. Second, it is possible that the effect of case specific predictors for participation, i.e. age, is dependent on the decision type. This objective is addressed by identifying variables that predict participation in different types of decisions. The study focuses on decisions about child custody and decisions about parental visitations.

The four objectives listed above are addressed through research presented in the four articles included in this thesis. In addition to these objectives, this thesis has a final aim that is not addressed in the articles:

5. To develop an integrated model of the relationship between factors that impact consultative and collaborative participation.

Figure 2 in chapter three presents a general contingency model for decision making in child protection case processing. This is a theoretical framework that is helpful in understanding the ecology of decision making; in particular, how different types of factors may impact decisions. This general model does not, however, inform us about the specific variables that are related to decisions about participation in different CPS contexts. The final aim is, therefore, to integrate the findings in objectives one through four together with findings in previous research. This is done by developing a more specific model of contingencies for child participation in the context of CPS decision making. This model should represent what is currently known about relationships between independent variables that impact consultative and collaborative participation.



## 6. Methods

Data were collected through three separate studies. There were different participants in each of those studies.

The design, participants and measures for the studies are presented below. Care has been taken to avoid confusion between studies and articles. It should be noted that study design is presented in relation to the three studies. Participants and measures are presented in relation to each of the four articles. A more detailed description of methods is found in each article.

### 6.1 Design in studies 1-3

The research was conducted as three separate observational studies.

#### 6.1.1 Design in study 1

This study was designed to collect data about social workers and CPS cases. A combination of cross-sectional and longitudinal design was used to collect data about the social workers. A cross-sectional design was used to collect data about the CPS cases.

The longitudinal design consisted of two groups. The first group included social workers from municipal CPS agencies. The second group was comprised of social work students. Data were collected at two different intervals. Interval one was before the participants attended a seminar on child participation. Interval two occurred six months after the seminar. Only the social worker group was included at interval two. The groups were specifically selected because they had different levels of social work education and experience. This was critical in order to analyse whether variance in social workers' views on participation may be attributed to such factors (Objective 1). The social workers were expected to gain additional experience in participatory work with children in the time period after the seminar. Therefore, social workers that were employed at a CPS agency were included in a follow up six months later. Social work students were not expected to gain additional work experience during the next six months following the seminar and were not included in the follow up. The seminar was commissioned to train social workers in the use of a Norwegian version of the «Children and Decision-making Toolbox». The toolbox was developed by Thomas and O'Kane (1999) and later translated and adapted to Norwegian by Vis (2005). The toolbox contained practical aids

that may be used for consulting with children and helping them to prepare for reviews and planning meetings.

Data about CPS cases were collected as a cross-sectional study. The same social workers that had participated in the longitudinal study at interval two were asked to provide information about CPS cases where they had consulted with children at the post-seminar interval. This was done in order to collect information about cases where there had been consultative participation. The purpose was to analyze factors that determine whether consultations led to collaboration; i.e. that the child influenced the outcome of the decision. For analytical purposes, the researchers divided the cases into two groups after the data had been collected. In Article two, the terminology ‘participation group’ and ‘non-participation group’ was used. Cases with collaborative participation were assigned to the ‘participation group’ and cases with consultative participation were assigned to the ‘non-participation group’. This was critical in order to determine whether case characteristics determine collaborative participation (Objective 3).

### **6.1.2 Design in study 2**

This study used a cross-sectional design consisting of two groups. The first group included social workers from regional CPS agencies. The second group comprised social workers from a municipal CPS agency. These groups were chosen because they represent the two main types of CPS organizations in Norway; i.e. first and second tier. In order to investigate whether social workers’ views on participation are dependent upon the type of organization they work for (Objective 2), it was considered critical to include social workers from different types of CPS organizations rather than merely studying different organizations of the same type.

Data for this study were collected as part of a project that was commissioned to evaluate 11 child and family units in the region of Northern Norway. This was later supplemented with data provided by social workers from one municipal CPS agency.

### **6.1.3 Design in study 3**

Study 3 was designed as a cross-sectional study in which all the data were collected specifically for the study. Judges from 11 out of 12 Norwegian Child Welfare Board districts collected the data from their archives. The study was designed to be representative of the

population who had petitioned CPS cases Child Welfare Boards in the year 2012. For analytical purposes, researchers assigned cases to two groups after the data were collected. The first group comprised cases where the board ruling coincided with the child’s wishes; i.e. cases involving collaborative participation. The rest were assigned to a comparison group of cases that involved consultative participation. It was essential to distinguish between cases with collaborative participation and those with consultative participation for two reasons. First and foremost, it was important to be able to compare case characteristics between the two groups (Objective 3). Secondly, such distinction makes it possible to investigate whether predictors for collaborative participation are dependent on the decision type, i.e custody or visitations (Objective 4)

## 6.2 Participants

Data for Articles one and two were collected during study one. Data for Article three were collected during study two. Data for Article four were collected in connection with study three. Table five shows the relationship between studies, participants and articles.

Table 5: Participants in the studies

Participants	Study 1		Study 2	Study 3
	Article 1	Article 2	Article 3	Article 4
Eligible for inclusion	N = 53 social workers	N=53 social workers N= 33 social work students	N= 91 social workers	N= 208 CPS cases
Not responding	N = 29	N= 0	N= 4	N= 47
Excluded from analysis	N = 0	N= 0	N= 0	N= 10
Included in analysis	N= 43 CPS cases <sup>4</sup> Provided by N = 24 social workers <sup>5</sup>	N=53 social workers <sup>1</sup> N= 33 social work students <sup>1</sup>	N= 87 social workers <sup>2</sup>	N= 151 CPS cases <sup>3</sup>

Notes : <sup>1</sup>response rate= 100%, <sup>2</sup>response rate= 96%, <sup>3</sup>response rate= 73%, <sup>4</sup> due to the way data were collected total number of cases that could have been reported is unknown,

<sup>5</sup>Response rate= 45%

Characteristics of the participants in each of the four articles are presented in Table 6.

**Table 6.** Participant characteristics

Participants	Study 1		Study 2	Study 3
	Article 1	Article 2	Article 3	Article 4
Social workers:				
Age (SD)		35.8 (8.2)	42.8 (9.1)	
Sex (women)		94 %	86.2 %	
Work experience (> 6 years)		42.9 % <sup>1</sup>	83.3 %	
Children:				
Age (SD)	10.0 (2.1)			10.0 (2.7)
Sex (girls)	42.5 %			58.6 %

Note: <sup>1</sup>Social work students not included.

### 6.2.1 Participants in Article 1

In Article number one data about child protection cases were collected through a registration form that was completed by case managers from municipal child protection agencies.

A total of 53 social workers who, six months earlier, had attended a training program aimed at learning how to use the Norwegian version of the «Children & Decision-making Toolbox», were asked to complete one registration form for each case in which they had used some of the training material. Inclusion criteria were: (i) the social worker had consulted with the child during the past 6 months and (ii) child age was 6-14 years. Twenty-four social workers responded, representing a response rate of 45 %. Eight of the respondents reported not having consulted with any children, and the remaining 16 of the respondents returned registration forms for a total of 43 cases. It is not known how many cases could have been included if the response rate from the social workers had been 100 %.

Each case represented one child. This sample was selected because it provided cases where the social worker had consulted with the child. The inclusion criteria were necessary because the aim was to investigate which case characteristics determined whether consultative participation progressed into collaborative participation (Objective 3).

### **6.2.2 Participants in Article 2**

Data about social workers' views regarding child participation were collected from social workers and social work students prior to a seminar on how to use the «Children & Decision-making Toolbox». Fifty-three social workers and 33 social work students were asked to participate, all of whom agreed to take part in the study. The social workers were from 21 different municipal CPS agencies in the northernmost region in Norway. The social work students comprised one class in their second year of a three-year bachelor program. The participants were chosen because attendance at the seminar provided an opportunity to secure a high response rate. Selection of the social workers that attended the seminar was carried out by the municipal CPS agencies and, thus, not influenced by the researchers. It is not known what criteria were used by CPS agencies. Additionally, it is not known exactly how many social workers were eligible to attend the seminar. Informed consent was solicited and permission for data storage was obtained from the Norwegian Social Science Data Services (NSD).

The sample was selected in order to identify variance in the views of social workers and to compare groups of social workers with diverse degrees of experience (Objective 1)

The response rate was 100 % at baseline. The social workers completed the same questionnaire about six months after the seminar. The social work students were not included in the follow up. At follow up, which was performed using mailed questionnaires, 21 of the social workers responded. The response rate at follow up was 40 %.

### **6.2.3 Participants in Article 3**

Data were collected from social workers employed at a first-tier municipal child protection agency and at second-tier child and family units. The study was designed to compare responses from social workers with first-tier affiliation to responses from those with second-tier affiliation.

The first-tier group consisted of 38 social workers who were recruited while attending a seminar. This, however, was not the same seminar as the one attended by social workers referred to in Article two. This type of recruitment procedure was used to secure a good response rate. Indeed, all of the attending social workers agreed to participate, providing a

response rate of 100%. The sample represented approximately 84% of the workforce in the child welfare services department of that particular municipality.

The second-tier group consisted of 49 social workers from 11 different child and family units at residential care institutions. This group was recruited through the regional residential care administrators who asked their employees to participate in an online survey. The survey also included other questions not intended for this study. The response rate was 93% and the sample represented the entire workforce in child and family units for one of the five administrative regions in Norway.

#### **6.2.4 Participants in Article 4**

In Article number four, data were collected from regional social welfare board archives. The data were retrieved from the archives by the ruling judges who completed one registration form for each sample case according to a specific set of criteria.

Eleven out of 12 Norwegian social welfare boards agreed to participate in the study. Data were requested from 208 cases and responses were received from 161 cases. This represents a response rate of 77.4 %. Inclusion criteria were as follows: (i) the case was decided in 2011; (ii) the child was born between 1996 and 2004; (iii) in cases involving more than one child, the youngest child matching the age criteria was selected; and (iv) only four cases were drawn from the ruling portfolio of each judge. Ten cases were excluded from the analysis due to missing data. The study included 151 child protection cases that were selected from a total population of 2,481.

The sampling was done in order to obtain a representative sample of all Child Welfare Board rulings. The purpose of the study was to assess if rulings were in line with the desires of the sampled children with regards to different types of decisions and to analyze which case variables predicted child influence in different types of decisions (Objective 3 and 4).

#### **6.3 Measures**

Articles one, two and four used questionnaires that were developed specifically for those studies. Article three used a short version of the questionnaire from study two and scaled composite measures developed by others.

**Table 7:** Overview of measures

Measures	Study 1		Study 2	Study 3
	Article 1	Article 2	Article 3	Article 4
<b>Questionnaires developed specifically for the study :</b>				
Demographic information about children	x			x
Demographic information about social workers		x	x	
Registration form for CPS cases	x			x
Social workers views about child participation		x	x	
<b>Questionnaires developed by others:</b>				
Utrecht Work Engagement Scale			x	
Quality of services scale			x	
Collaboration scale			x	

Articles one and four used child protection cases as the unit of measure. Articles two and three used social workers as the unit of measure.

Each of the measures is described in more detail below:

### 6.3.1 Registration form Article 1

Case managers were asked to report on: (a) the characteristics of each case; (b) the process of participation; and (c) the outcomes of the process in each case where the child was invited to participate.

*(a) Case characteristics requested were:* age and sex of the child; reason for referral and level of case seriousness; relationship between parents and case manager. More detailed questions about functioning and developmental ability of the child were originally planned, but were dropped following a decision by the Norwegian data inspectorate.

*(b) The report on the participation process asked for:* the number of times the case manager had consulted with the child; the number of meetings the child had attended and which of the tools in the Children and Decision-Making Toolbox had been used.

*(c) Measures of outcome consisted of:* the case manager's rating of the child's degree of participation on a six-point scale (see Table 2 in the article). The case managers were also

asked to rate whether child participation affected the decision making in the following ways: (1) led to improved cooperation with parents and other services; (2) led to the discovery of facts, (3) impacted the choice of action; (4) impacted the implementation of services; (5) led to better knowledge of the child's wishes; (6) affected cooperation with other services; (7) led to better understanding of the child's development and abilities; and (8) had no impact.

Based on the measures of outcome variables, one additional variable was computed for use in analysis. An operational definition of 'participation' was set, based on two threshold criteria: (1) the child's participation had to be rated at level 3 or higher on the six-point scale, indicating that he or she had some understanding of what was going on and had expressed views on the decision about to be made; and (2) the child's participation had to impact the choice of action or the implementation of services. Cases were counted as 'child participation cases' only when those criteria were met and were otherwise considered as 'non-participation cases'.

### **6.3.2 Questionnaire for Article 2**

*Social workers' views about child participation:* Twenty statements about participation were formulated on the basis of findings in a previous interview study (Vis, 2004). That study had identified a broad range of reasons that case managers gave for not including children aged 7-12 years old in decision-making processes. Chief among these were: (1) fear of inducing psychological harm to children; (2) difficulties communicating with children; (3) loyalty issues making it difficult to interpret children's views; (4) children not having the competence to participate; (5) children not wanting to participate; (6) different perceptions of what participation means; and (7) a wish to avoid conflict between children and parents. See also Appendix 1 in Article one for a full list of the 20 statements included in the questionnaire. Participants were asked to indicate agreement or disagreement with the 20 statements on a five-point Likert scale. The Likert scale ranged from 1 'totally disagree' to 5 'totally agree'

### **6.3.3 Questionnaire for Article 3**

Four different composite measures were used in order to measure the following: (a) social workers' views on child participation; (b) social workers' views on service quality; (c) collaboration between services; and (d) social workers' level of work engagement.



Items included in scales (a), (b) and (c) are shown in Table 1, Article 2.

*(a) Social workers' views on child participation were measured* by asking participants to indicate their level of agreement on 11 statements that represent reasons case managers give for not including children in decision-making processes (this was the refined version from study two). Because the 11-statement version had poor internal consistency for the present sample, this measure was later reduced to a 5-statement index for analysis purposes for this study. Participants were asked to indicate agreement or disagreement with each statement on a 5-point Likert scale. The Likert scale ranged from 1 'totally disagree' to 5 'totally agree'. A mean score for the scale was calculated, with a high mean score indicating that the social workers see many obstacles towards child participation.

*(b) Perceived quality of services was measured* using a scale consisting of three statements about user participation, user satisfaction and quality of services. These statements had previously been used by Martinussen, Adolfsen, Lauritzen and Richardsen (2012) in order to measure service quality. Participants were asked to respond to statements about quality on a scale ranging from 1 'very bad' to 5 'very good'.

*(c) Collaboration was measured* using eight statements developed by Martinussen *et al.* (2012). Participants were asked to respond to different statements about cooperation within and between services on a scale ranging from 1 'not at all' to 5 'to a very large degree'. A higher score on the collaboration index indicated that respondents viewed the level of cooperation as better, whereas a low score indicated poor cooperation.

*(d) Work engagement was measured* with the Utrecht Work Engagement Scale-short (UWES-9) (Schaufeli, Bakker & Salanova, 2006; Nerstad, Richardsen & Martinussen, 2010). The UWES-9 consists of nine statements such as, 'At my work, I feel bursting with energy' and 'My job inspires me'. The statements are rated on a 7-point scale ranging from 1 'never' to 7 'always'. Only total scores were used, not subscales. The psychometric properties for this scale are well documented (Mills, Culbertson & Fullagar 2012). We used the Norwegian version for this study. Both the Norwegian and the English versions are readily available online (Schaufeli *et al.*, 2006) and, therefore, not fully reproduced here.

#### 6.3.4 Registration form Article 4

The form consisted of 55 questions that were related to three main areas of interest. One form for each case was completed. Information was drawn from two different case documents: (i) the case ruling and (ii) the report of the child advocate. The following information was collected:

*(a) Information about the child and the child's wishes:* From the ruling, information about the child's age, gender, ethnic origin and existing care arrangements was collected. From the child advocate report, information was gathered about whether the child wanted to continue living with his or her current caregivers and, if not, where the child wanted to live. We also collected information about the child's views on visitations with his or her mother and father, contingent on the child not being allowed to be cared for by either or both of the child's parents.

*(b) Information about the parties' claims.* Claims about care and visitations set forth by child protection services, as well as those from the mother and the father of the child were collected.

*(c) Information about the case procedures and rulings.* Regarding the case procedure characteristics, information was gathered regarding which party was the petitioner, whether the case was decided with or without negotiations, whether a child advocate had been appointed and used, and whether an expert report had been submitted. Finally, information about the ruling, including the care and visitation orders, was collected.

Based on this information, the following variables were computed by for use in the analysis:

(i) whether the ruling about care placement was in accordance with the child's wishes; (ii) whether the ruling about visitations with the child's mother and father was in accordance with the child's wishes; and (iii) whether CPS or the parents won the case with respect to care and visitations. The case was considered to be won by CPS if there was disagreement about care and the ruling was in favour of CPS or if the parents agreed with the CPS claim and the ruling was made accordingly. A care ruling was considered to be won by parents if there was disagreement between the parents and CPS and the ruling was in favour of one or both of the parents. The ruling was counted as being in line with a child's wishes if the decision to move or not move the child from his or her current home was in accordance with the child's wishes. Very few children indicated a specific number of desired parental visitations. To calculate whether a visitation ruling was in accordance with a child's wishes, we first scored whether a child wanted more visitations, whether a child wanted fewer visitations, or whether the child

agreed to what was proposed by CPS. We then compared this data to the ruling. If the child wanted more visitations and the ruling was to increase visitations, the ruling was counted as being in accordance with the child's wishes.

#### 6.4 Statistical analysis

This thesis makes use of principal component analysis as well as bivariate and multivariable statistical analysis. The analysis was carried out using IBM SPSS software.

The principal component analysis was aimed at data reduction in order to construct composite scores for correlated items. The following criteria were used based on the recommendations of Tabachnick and Fidell (2001): for inclusion in analysis, items were required to correlate at  $r > .3$  ( $p < .05$ ); the significance tests were not Bonferoni corrected; variables with factor loadings below .5 were not included in factor solutions; and when calculating composite scores, items were only included in the factor which they loaded most strongly onto.

In statistical analysis,  $p < .05$  was used when testing for statistical significance.

An overview of statistical methods used for the main comparisons in this thesis is shown in Table 8.

**Table 8:** Overview of statistical analysis

Analysis	Study 1		Study 2	Study 3
	Article 1	Article 2	Article 3	Article 4
<b>Factor analysis</b>		x	x	
<b>Bivariate analysis :</b>				
$\chi^2$ / Ficher's exact	x			x
t-tests	x	x	x	
<b>Multivariable analysis:</b>				
Logistic regression	x			x
Linear regression			x	

## 7. Results

Description of the findings is presented with reference to each of the articles.

### 7.1 Case factors associated with collaborative participation in decisions made by CPS agencies (Article 1)

The objective was to study cases with consultative participation in order to identify variables that predict when collaborative participation is achieved (Objective 3). First, cases involving consultative participation were separated from cases with collaborative participation.

Collaborative participation was accomplished in 46.5% of the cases. In the article, cases with collaborative participation were labelled as 'participation cases'. Cases with consultative participation were as 'non-participation cases'. Older children were not significantly more likely to end up in the collaborative participation group as compared to the younger children. Collaborative participation was less likely (OR = 0.24) to if the case was characterized by abuse and neglect, and more likely (OR = 14.66) if the case was related to some other concern. There was a significant difference between cases with consultative participation and cases with collaborative participation in terms of the number of meetings the child had attended ( $t(41) = -2.148, p = .038$ ). If the child attended a meeting the odds for collaborative participation increased (OR = 3.2). Collaborative participation was not associated with the number of individual consultations between case manager and child ( $t(41) = 1.417, p = .164$ ). Collaborative participation was not significantly associated with child gender, quality of the relationship between social worker and parents or the level of concern the social worker demonstrated for the case.

Through multivariable analysis it was found that the number of meetings the child attended was the most important predictor of collaborative participation.

The full stepwise model for the regression was not published in the article. The complete model is, therefore, included in appendix 2 of this thesis.

## 7.2 Assessment of social workers views about participation (Article 2)

The objectives were: (i) to develop a quantitative measure of social workers' views about child participation and (ii) to compare scores between groups of social workers with different levels of work experience (Objective 1). First, the measure was developed using factor analysis. A data screening process of social workers' responses to twenty statements showed that 9 of 20 items on the questionnaire were not suitable for factor analysis. The remaining 11 items were included in the analysis using a principal component extraction method with Oblimin rotation. Two-, three- and four-factor solutions were examined. A three-factor solution was preferred. The results suggest that social workers' views about child participation can be categorized as pertaining to three main factors: communication difficulties (Communication factor); child participation being deemed unnecessary (Participation advocacy factor); and participation being considered inappropriate because it might be harmful (Protectionism factor). Cronbach's alpha estimates for internal consistency were .68, .55 and .49, respectively.

There were no significant differences in Communication and Protectionism composite scores between students and case managers or between case managers at baseline and follow up. Students scored higher ( $M=8.3$ ,  $SD=1.5$ ) on Participation advocacy than case managers ( $M = 6.3$ ,  $SD = 2.0$ ), indicating that they were more likely to agree that participation should be pursued in case processing. When the same case managers completed the questionnaire after having attended the seminar, additional experience in participatory work with children decreased the Participation advocacy factor scores further ( $M = 5.2$ ,  $SD = 2.0$ ). It was concluded that there is no consensus among social workers that participation should always be attempted.

Social workers' experience in child participation influenced the scores. Case managers who had not consulted with a child to attempt facilitating participation scored significantly higher on the Protectionism factor ( $M = 10.0$ ,  $SD = 3.0$ ) compared to those who had included children ( $M = 6.3$ ,  $SD = 2.0$ ). This indicates that Protectionism may predict whether case managers will consult with children. The analysis showed that a standard deviation increase in protectionism scores decreased the likelihood of consultations almost seven times. (Standard deviation for protectionism scores was 2.58.  $OR (2.58)=6.89$ , 95%, CI (1.01- 4.4).

### 7.3 Associations between decision maker factors and organizational factors (Article 3)

The objectives were; (i) to investigate whether social workers' views about participation are determined by organizational factors and (ii) to investigate associations between different variables categorized as decision maker factors. Views on child participation were measured with the same statements about participation that were used in Article 2. The factor structure from Article 2 could not be replicated. It was found that the 11 items from the questionnaire did not fit the expected three-factor structure in this data set. A decision was, therefore, made to calculate only a total score to represent a 'Participation Obstacle' measure. A high total score on this measure indicates that the social worker sees many obstacles to participation. To maximize the discriminant power of the score, it was decided to include only the items that had strong factor loadings. Factor solutions with eleven, eight and five items included were investigated. The five-item solution was preferred. The full factor structure for the different solutions was not shown in the article. Therefore, it is shown here in Appendix 2. Internal reliability for the five-item scale was fair (Chronbach's  $\alpha = .66$ ).

Correlations between decision-maker factors (participation obstacles, social workers' characteristics, work engagement) and organizational factors (agency type, work collaboration) were calculated. Social workers' age correlated significantly with 'Participation Obstacles' ( $r = .24$ ). Older social workers were more likely to agree with statements that represent reasons for deciding not to include children in decision-making processes. When controlling for total years of work experience by calculating partial correlations, age was still associated ( $r = .24$ ) with Participation Obstacles. Social workers' organizational adherence, i.e., municipal or residential care affiliation (agency type), correlated to Participation Obstacles ( $r = .39$ ), and collaboration ( $r = -.29$ ). Work Engagement did not correlate to any other variable. Approximately 74% ( $p < .001$ ) of social workers affiliated with a residential care agency scored higher on the Participation Obstacles scale. This means that social workers from the second tier agencies, i.e. from the child and family units, saw participation as more difficult than those working in a first-tier municipal child protection agency. This was also true when controlling for sex, age and work experience. Work engagement and work collaboration did not contribute additionally to prediction of Participation Obstacle scores. Therefore, organizational affiliations predict Participation Obstacle scores over and above social worker variables such as age, work experience and work engagement.

#### **7.4 Case factors associated with collaborative participation in decisions made by Child Welfare Boards (Article 4)**

The objective was to investigate case factors that predict whether social welfare board rulings about custody and family visitations are in accordance with children's wishes. (Objectives 3 and 4). Accordance between the rulings and the wishes expressed by the child was used as proxy for identification of collaborative participation.

Collaborative participation in custody rulings were found in 39.3 % (N= 124) of the cases.. Using bivariate analysis, several factors were associated with a custody ruling being in line with the wishes of a child. Collaborative participation was more likely if the child did not want a change in custody (OR = 9.1, C.I. (3.4-24.3). If the case was submitted with an expert assessment attached, the likelihood of collaborative participation was reduced (OR = 2.6 C.I. (1.01-6.8). Decisions on custody were in favor of CPS in 90.3 % of the cases. There was no record of any case in which the child's parents were given custody without this being supported by the child.

Children wanted more visitations with their mothers in 60.5 % of cases (n = 52) and with their fathers in 39.8 % of cases (n = 41). The difference in children's wishes for visitations with a mother or father was statistically significant (OR 2.3,,p < .01).

Collaborative participation in decisions about visitations with mothers was found in about 43 % of the cases. Child age was significantly associated with collaborative participation in decisions about maternal visitations (OR = 1.2, CI = 1.02-1.5).

Collaborative participation in decisions about visitations with fathers was found in about 50 % of the cases. No case factors were significantly associated with collaborative participation in decisions about visitations with the father.

It was concluded that the association between case factors and collaborative participation is dependent upon the type of decision.

## 8. Discussion

### 8.1 Discussion of results

#### 8.1.1 Social workers' views about participation

The first objective of this thesis was to assess how important and how difficult Norwegian social workers consider child participation to be and to study how this is related to other decision-maker factors.

*Social workers' views about the importance of participation.* A measure was developed to calculate the importance social workers ascribe to participation. This score was labelled 'Participation Advocacy'. Differences in Participation Advocacy scores were found between groups, social work students scoring higher than social workers. Additionally, 'Participation Advocacy' scores among social workers decreased as they gained more experience working with children in participation processes. This indicates that the way social workers view child participation changes as they gain more experience. Shemmings (2000) compared social workers' views on participation to the views of non-social workers. He found that social workers who believed young people should not make decisions until they are much older nevertheless thought that they should be involved in conferences. Laymen did not make the same distinction. This means that an ideology pertaining to participation exists among social work professionals. The findings in this thesis suggest that the strength of this ideology is reduced with increased work experience. This indicates that social workers believe that participation should ideally be pursued, but that their priorities change when faced with the realities of specific cases.

The Advocacy score changes over time for the same individuals, indicating that these are not representative of stable personal traits or deeply held personal beliefs. The 'Participation Advocacy' factor could rather be seen as a snapshot of social workers' currently held assumptions about the importance of participation. Studies (Thomas & O'Kane, 1999; Sothwell & Fraser, 2010) have found that participation can sometimes be a disappointing experience for children, in particular with regards to the amount of influence they have. This seems to impact their views on the importance of participation. It is likely that there is an interaction between social workers' priorities and case-specific factors such as type of abuse or neglect. One hypothesis for future research is that social workers realize this as they gain more experience. In order to investigate this, future studies need to include both decision



maker factors, i.e. the views of the social worker, and case factors in the analysis. Only then may it be determined if social workers' decisions to include children are primarily based on ideology or whether case-specific factors are more important.

*Social workers' views about obstacles to participation.* Obstacles scores correlated significantly to social workers' age ( $r = .24$ ). This association was confounded by the type of CPS agency they worked for (Organizational factor). It is therefore concluded that participation obstacles are not related to gender, age or work engagement. This means that, although social workers vary in how problematic they perceive participation to be, this variance is not explained by any of the other Decision-maker factors. There were differences between individual social workers in their assessment of a variety of possible obstacles to child participation. Although social workers may agree that participation is sometimes difficult, they find it difficult for different reasons. Some social workers find it difficult to communicate with children. Other social workers find it difficult to balance participation with a need to protect children. Composite scores for correlated obstacles were used to measure participation obstacles.

It was found that differences exist between social workers regarding how they view child participation. These differences were seen in the way social workers responded to statements on the importance of participation and the obstacles to participation. Some social workers equal participation primarily with consultations (consultative participation) whereas others equal participation primarily with child influence (collaborative participation). In particular, was this seen in social workers responses to the statement, "It is more important for children to be listened to than to have it their way" (see Article 1, for details). This shows that the two different theoretical definitions of participation as described by Landsdown (2010) are reflected in how social workers view child participation. Some social workers ascribe to the view of participation as a consultative process and others view it as a collaborative process.

These findings help explain why child participation has proved difficult to implement in CPS services. It is difficult to establish a sustainable change in how participation is practiced when such changes are not advocated by the more experienced social workers. The practical implication is that training social workers in child consultations may be necessary but not sufficient to create sustainable changes for children's involvement in case processing. A change in organization and routines may be needed.

### 8.1.2 Associations between decision maker factors and organizational factors

The second objective was to study the relationship between characteristics of the decision maker and the characteristics of CPS agencies. This was addressed by comparing differences in how groups of social workers scored on a Participation Obstacles measure. There were no group differences between social work students and social workers from municipal CPS agencies. There were group differences between social workers from first-tier municipal CPS agencies and social workers from second-tier regional CPS agencies. The results confirmed the hypothesis that there is a difference in how social workers from different CPS organizations view participation. The results indicate that the type of organization social workers are affiliated with explains most of the variance in social workers' Participation Obstacle scores. Organization type predicts social workers' views above decision-maker factors such as age, gender or work experience.

Previous research shows that child participation varies depending on geographical location and type of CPS agency (Healy & Darlington, 2009; McDovall, 2013). It was not evident from those studies if this was caused by work climate within the organization or some other organizational factor. In this thesis, social worker Collaboration was used as a proxy for work climate. Social workers' Obstacle scores were unrelated to the Collaboration measure. This indicates that the level of collaboration is not an organizational factor that impacts whether social workers find participation problematic. It should be noted that there are many other organizational factors that may impact social workers views about child participation that have not yet been included in a quantitative study. Among these are workload, agency policy and agency routines.

Social workers in different types of organizations are mandated to solve different aspects of a case. This means that, although there seem to be differences in the importance and priority that individual social workers place on child participation, these may be rooted in the recognition of what possibilities and limitations there are for child participation in different types of decisions. Hence, it is possible that the differences found between social workers from different organizations may be related to the differences in the aim and mandate for their involvement in the case. It is therefore too early to conclude whether the participation Obstacles measure primarily informs about the level of difficulty associated with participation in different contexts, or whether it is a measure of privately held beliefs and attitudes among social workers.

### 8.1.3 Case factors that predict collaborative participation

The third objective was to study which case-specific variables predict collaborative participation. Based on the results of the literature review, case-specific variables that could be associated with children's influence in CPS decisions were identified. These were as follows:

- Child-related variables; age, gender, the content of the child's wishes, the child's living situation
- Case-type variables; case seriousness, reason for CPS concern
- Case-process variables; social workers' cooperation with parents, social worker consultations with the child, child attendance at reviews /conferences or court hearings, expert-assisted decision process

This thesis examined the associations between collaborative participation, as a dependent variable, and the above-listed case factors as independent variables. It was found that collaborative participation was related to many of the independent variables, including the child's age, the child's wishes, the child's living situation, the reason for CPS concern, the number of meetings the child attended and whether or not the decision process was expert assisted. These findings are similar to findings that have been reported in previous studies. It was possible to expand upon previous research by assessing the relative importance of the variables. In that analysis, child age was not found to be a strong predictor of collaborative participation. The results showed that two variables are more important than the others: the number of meetings the child attended and the content of the child's wishes. These three case factors are discussed more thoroughly below.

*Child age:* The Norwegian Welfare Act prescribes access to consultative participation for a "child who has reached the age of 7, and younger children who are capable of forming their own opinions" (Child Welfare Act, Section 6.3). In Child Welfare Board hearings, there seems to be an established practice of routinely granting such access to seven-year-olds and, in some cases, younger children.

Based on previous research it was expected that the views of older children would be attributed more weight than those of younger children and that older children would, therefore, be more likely to reach collaborative participation. This effect was seen in decisions

about maternal visitations. However, in the other decisions that were studied, no relationship between child age and collaborative participation was found. The analysis showed that the effects of age are muted by other variables, such as the number of meetings the child attended and the wishes of the child. It seems as though child age may determine if children are consulted. However, when they are consulted, it is the participation process and the content of children's claims that determine if those consultations translate into collaborative participation. It can be concluded that when the children's opinions are considered by adults it is the process through which those opinions were formed, and the content of those opinions, that determine the weight that is given to them. This corresponds to the first two steps in the model of participation that was presented in Figure 1 (in Chapter 2.3).

*Children's attendance at meetings.* Children who had attended a meeting, such as a case conference, were more likely to have influence on a decision compared to children who had been consulted by their social worker. This illustrates that not all types of consultations are equally important. Attending meetings is an important factor that determines whether collaborative participation is achieved or whether participation is restricted to being consultative. The former is commonly rated as a higher-order form of participation according to the classical typologies developed by Arnstein (1969) and Hart (1992). It is not known exactly why individual consultations between a social worker and the child are less important than attendance at meetings in order for a child to influence decision making. However, it is likely that individual consultations act as a selection process through which it is determined if the child will be invited to a meeting. If, through individual consultations, a social worker considers the child and / or the child's views to be immature or deviant, then the social worker may be less likely to invite the child to take part in further discussions at meetings.

*The content of child wishes.* The wishes of the child is categorized as a case factor. In court rulings on child custody, it was evident that child influence was dependent on the wishes of the child. If a child was residing in foster or residential care, and did not want to move back to his or her parents, it was very likely that the child's wishes would be granted. If a child was residing with a parent/parents, and asked to be placed in protective care, such placement was always the outcome. This indicates that, if the child's view coincided with the view held by CPS, it was more likely to carry weight. This coincides with findings from previous research (Thomas & O'Kane, 1999). When children agree with CPS, their views have more impact than when the child agrees with the parent.

The Norwegian child welfare legislation states that, “importance shall be attached to the opinion of the child in accordance with his or her age and maturity” (Child welfare Act, Section 6.3). In decisions on child custody, consideration for the child’s safety takes precedence. If a child’s view coincides with CPS claims, those views are most likely considered to represent safe solutions. If the child’s views are contrary to CPS claims, those views may be considered unsafe. Eriksson and Nasman (2008) argued that children’s competence may be judged on the views they express: i.e., if their views concur with the adults’ views or dominant assumptions, they are deemed competent, whereas, if they do not concur, the children are deemed immature. The findings in this thesis support that theory. In cases of custody dispute, it is the content of the children’s wishes, not their age, that predicts whether a case ruling will be in favour of the wishes of the child.

This effect was not seen in decisions on parental visitations. Here, child influence increased with age. Additionally, children were more likely to have their wishes fulfilled if they wanted more visitations than if they wanted fewer visitations. This indicates that the weight that is placed on children’s views may also depend upon what the decision is about and not only upon considerations of age and maturity.

#### **8.1.4 The importance of decision type**

The fourth objective was to study if predictors of collaborative participation are the same in different types of decisions. Based on decision-making theory (Nutt & Wislon, 2010) it was expected that children’s collaborative participation is dependent upon what the decision is regarding. The results indicate that this is true. Four different types of decisions were studied. These were : (1) home-based services, (2) child custody, (3) visitations with mothers and (4) visitations with fathers.

Attending meetings predicted influence in decisions about home-based services. The content of child’s wishes predicted influence in custody decisions. Child age predicted influence in decisions on visitations.

Decision risk may explain why predictors for child influence vary according to decision type. When safety concerns are prominent, thresholds for child influence are higher because, in such circumstances, children can have their wishes fulfilled only if decision makers consider those wishes safe. Therefore, it is the content of the child’s wishes that determines child influence in high-risk decisions. When risk is low, such as in visitation decisions, it is more

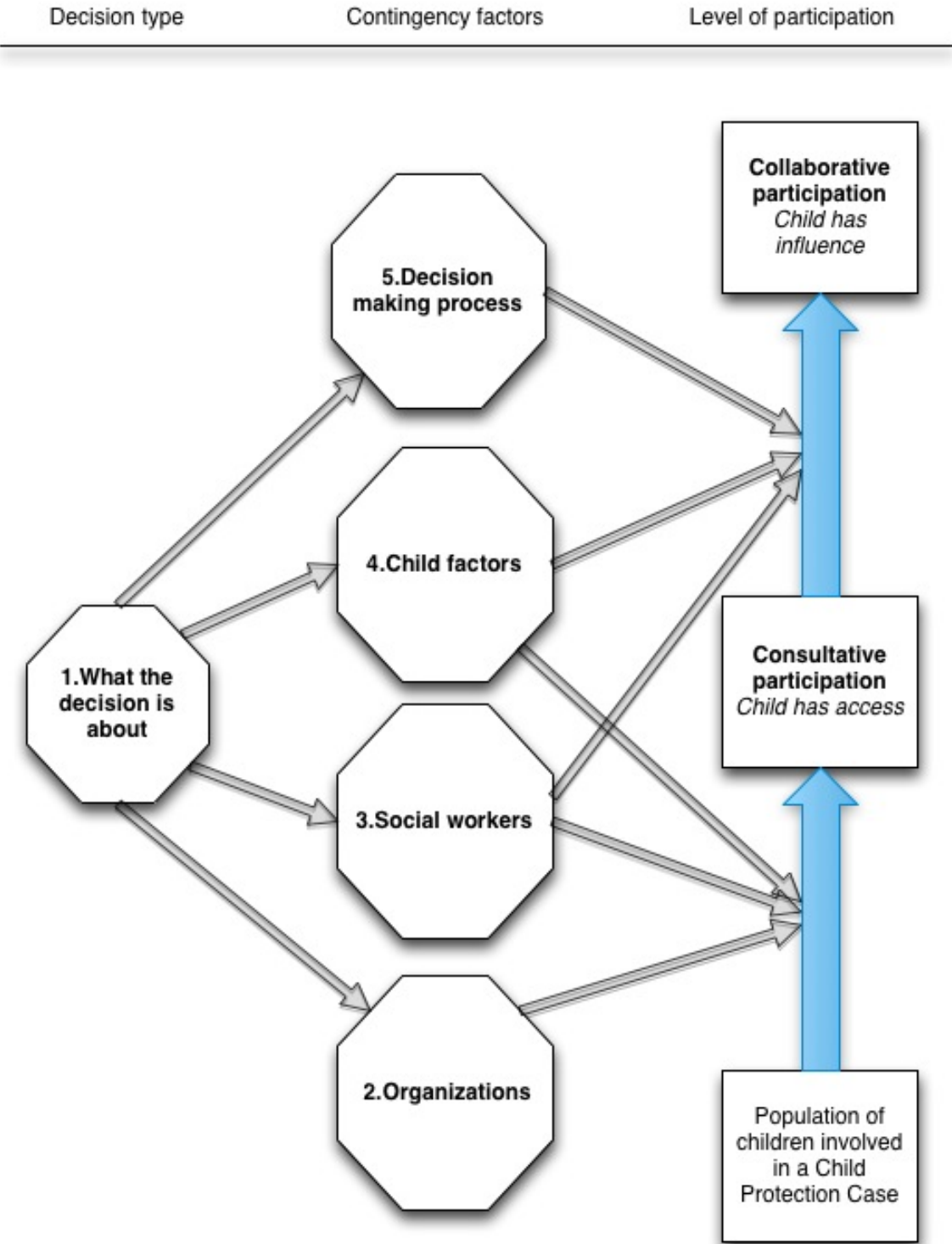
likely that a child has influence if the child wants something different from what social workers suggests. In such cases, other indicators of child maturity such as age may be used as a guide in determining the amount of weight that is placed on children's views. This corresponds with observations from other studies that found that younger children are more likely to participate in routine reviews than in higher order decision making where strategic decisions are made (Thomas & O'Kane, 1999; Southwell & Fraser 2010). A hypothesis for future research is that decision risk moderates the importance that is accorded child age and child wishes when cases are determined.

#### **8.1.5 A theoretical model of factors that determine consultative and collaborative participation**

The final aim of this thesis was to develop an integrated model of the relationships between factors that impact consultative and collaborative participation. This aim is not addressed in the articles included in this thesis. The model is first presented and then discussed.

*Presentation of a contingency model for child participation.* The relationship between levels of participation and determining factors is illustrated in Figure 4. This is an integration of models that illustrate levels of participation (Arnstein, 1968; Hart, 1992; Landsdown, 2010), contingency theory in strategic decision making (Nutt & Wilson, 2010) and Bauman et. al's (2011) classification of contingency variables that were shown in Figure 2 on page 18.

**Figure 4: A theoretical model of factors that determine child participation in child welfare decision making**



1. *Decision type.* In CPS, legal regulations dictate that the type of decision determines the decision-making process. It regulates which agency that makes the decision and determines the social workers who are involved. This means that a quantitative study of CPS decision-making contingencies needs to specify the type of decision that applies. The results from the studies in this thesis indicate that separate contingency models may be created for decisions on child custody and child visitations.

In theory, the level of risk associated with a decision is dependent upon the content of the decision. There are some studies indicating that risk assessments impact the likelihood that children will get their wishes fulfilled in custody decisions. Two vignette studies (Arad-Davidzon & Benbenishty, 2008; Davidzon-Arad & Benbinishty, 2010) found that social workers' risk assessments take precedence over children's views in custody decisions. This indicates that social workers' perceptions of risk do affect whether children are consulted as well as the weight that is placed on children's views. Further research is needed to determine more precisely how decision risk affects social workers' decision making.

2. *Organizations.* Studies have found that the frequency with which children are consulted varies considerably between different types of CPS agencies. It is assumed that this is caused by several conditions that vary between agencies. No previous study has attempted to determine exactly what those conditions are. Therefore, not much is known about why these differences exist. Differences in local policy and financial resources are possible explanations. Because so little is known about what causes these differences, more research is needed to identify which properties of CPS organizations cause the variance.

3. *Social workers.* There are differences in how social workers prioritize participation and how problematic they assume participation may be to achieve. This is not well explained by their work experience or work engagement. In theory, social workers' views on participation predict the likelihood that the social worker will consult with the child and the weight that is placed on children's views, which is supported by some of the findings in this thesis. However, because this research used very small samples, these findings need to be confirmed in future studies. Social workers' priorities when it comes to consulting children may be determined by a complex interaction between case factors and organizational factors. It should be further studied whether the views that social workers hold on participation change depending on the child protection case.



4. *Child factors.* The Child Welfare Act prescribes that the child's age and maturity should determine the weight that is assigned to a child's views. Child age impacts children's participation. Previous research shows that older children are more likely to have access to participation. Many studies have documented that consultative participation is dependent on child age (see Section 4.3). This is mainly because social workers sometimes decide not to consult with younger children. However, no previous studies have investigated whether age also determines children's influence. The studies in this thesis did show that other factors predict influence more than age. This means that, within the age group of 6-14 year-old children, age does not, in and of itself, determine collaborative participation. It is not known whether age better predicts influence in CPS decisions among adolescents. Future studies of collaborative participation could investigate this by also including 15 to 18 year-olds. Because CPS may consider some solutions to a decision unsafe or unrealistic, the influence children have is sometimes determined by the content of their claims. The implication is that it is the views a child hold and not the age of the child that is used as proxy for child maturity. There is no indication that gender or ethnicity affects participation.

5. *Decision-making process.* The type of involvement the child has in a decision-making process determines the influence he or she has. In Norway, this was indicated by an increased likelihood of influence when children attended meetings. In Norway, social workers often decide not to include children in conferences. There was an indication that some Norwegian social workers think participation can be emotionally disturbing for the child. This was associated with lowered likelihood for consultative participation. In the UK, Shemmings (2000) found that social workers think children should be involved in conferences, although they should not be allowed to make decisions. It is possible that differences exist between social workers in Norway and UK with regards to how they separate consultative participation from collaborative participation. This could be investigated by a comparative study including social workers from different countries.

*Discussion of Contingency model for child participation.* The model shown in Figure 4 summarizes what is currently known about associations between the different types of variables and levels of child participation. It integrates contingency theory with theories on child participation in strategic CPS decision making. The model adds three new perspectives to current child participation research. First of all, it clarifies the importance of specifying decision content when child participation is studied. Because the types of variables associated with children's participation varies depending on the decision content, it is difficult to

compare results across studies. A second contribution is the recognition that participation is determined by an interaction between multiple variables. This indicates that multivariable analysis is needed in order to identify the circumstances that lead to child participation. The third contribution is the recognition that participation can mean different things. Therefore, it should be expected that the factors influencing whether or not children are consulted, i.e. consultative participation are different from the factors affecting whether or not children have influence, i.e. collaborative participation.

The model has some limitations. It is based upon a synthesis of many studies that have assessed one or more contingencies. No study has assessed all the factors together. How these interact in determining child participation is, therefore, not well known. In order to develop the model further, a larger study that includes information about the different types of contingency factors would be needed. The lack of such a study is a major limitation in the research currently available. Additionally, because the studies that do exist are observational studies of associations, assumptions about causations remain theoretical.

A second limitation of the model is that it does not account for external factors such as legislation and regulations that determine how the child welfare system works. In the UK, it is mandatory to invite children to case conferences and reviews. Norway has no such regulations that mandate participation in specific processes. This is believed to contribute to a larger proportion of UK children being invited to participate in meetings compared to Norwegian figures. There are some early indications that external factors, the child protection system in particular, also impact whether social workers will consult younger children (Skivenes, 2013). However, it is possible that this association is confounded by other factors. Very little research exists comparing participation in different countries. Therefore, more research is needed in order to determine the significance of the type of child welfare system involved.

A third limitation is that the model is specifically designed for strategic decision making. There are many other types of decisions that take place during the course of processing a CPS case than those that have been studied here. Many of those other decisions are not strategic; for example, decisions related to where and when parental visitations are carried out. It is not known how useful this model is in studying non-strategic decisions. Future research should also look at what determines children's participation in other types of decision-making processes such as assessment, planning and evaluation of services.

## 8.2 Methodological discussion

### 8.2.1 General study approach

Child participation can be studied using both qualitative and quantitative methods. The approach used in this thesis was to collect data through observations and to quantify and describe variations in the data. Blaikie (1993) refers to the quantitative scientific approach that aims to make generalizations about events through analysis of regularities as “*the standard view in the philosophy of science that has dominated the English speaking world after the Second World War*” (p.16). This approach to scientific study may be labelled as a realist approach (Blaikie, 1993). The realist approach assumes that social reality exists independently of the observer and can be discovered by the use of observational methods.

The major strength of this methodological approach is that it is possible to generate hypotheses about causal relations that explain why variations occur. However, this approach also has limitations. Broadbent (2013) makes the point that the use of this methodology cannot provide a “complete and comprehensive account of why the phenomenon in question occurred”. What it does provide, he asserts, is better described as explanations of differences in outcome that are explained through exposure. This can be used to generate hypotheses about causal relations and to make probabilistic predictions, but not deterministic laws.

The weakness of this approach to the study of participation is that it does not account for subjective explanations from the view of the social worker or the child.

### 8.2.2 Design

Social workers’ views were studied with a cross-sectional design and a longitudinal design. The cross-sectional design was used to analyze variance in social workers’ views and to compare groups of social workers. A cross-sectional design is good for descriptive analysis and analysis of associations between variables. The general weakness in a cross-sectional design is that, when all the data are collected at one point in time, a cause and effect relationship cannot always be determined. This limitation was seen in the study of relations between social workers and organizations. It could not be determined if the difference that was found between the views of social workers from different types of organizations (Article 3) was caused by the organization or whether social workers seek employment at different organizations because of their personal views. However, it should be noted that the main aim of that study was primarily to test for differences rather than to infer causation.

A longitudinal design was used to analyze changes in how social workers view participation. In hindsight, the longitudinal study could have been designed better. It would have strengthened the study if the social work students had also been included in the longitudinal design, thereby allowing that group to be used as a comparison group. This would have made it possible to address possible threats to internal validity such as maturation and repeated testing.

Child protection cases were studied using a cross-sectional design. The purpose of both studies was to separate participation cases from non-participation cases and to observe differences in the characteristics of those two groups. Identification of participation and non-participation cases was part of the analysis. Assignments into groups were, therefore, done retrospectively. The weakness with this method is that it may result in biased groups. The advantage is that the researcher controls group assignments. This was considered important because participation can have different meanings and definitions. This method thus allows for the use of a specific definition of participation and for the identification of variables associated with the applied definition of participation.

The possibility of confounding variables limits the ability to separate cause from effect in cross-sectional studies. The problem of confounding can be addressed by including known confounders as variables in the study. Because relatively little was known about the factors that determine participation, it was difficult to use previous research as justification for the selection of variables to include as possible confounders. Therefore, an exploratory approach to analysis of associations was chosen. A cross-sectional design is suited for this type of approach.

In the future, limitations regarding causal inference and confounding could be addressed by using an experimental research design. This could be used to test some of the hypotheses that derived from these studies. For example, a randomized controlled study could be used to test if children's attendance at meetings leads to ("causes") greater child influence.

### **8.2.3 Sample**

An important strength of the studies employed in this thesis was the use of multiple samples. The most important limitation was the small sample sizes. Sample sizes in the studies ranged from 43 to 151. Sample size impacts the likelihood that a true association may pass a statistical test of significance. In order to detect a small effect, a large sample is needed.

Conversely, a large effect may be detected using a small sample.

*Sample size for the study of CPS cases.* Study 1 had a sample of 43 CPS cases. This is considered a small sample. As a consequence, it was not possible to detect a significant effect for age and gender in this study. The small sample size used in Study 1 caused the regression analysis to be unstable, thus limiting the usefulness of the regression model. A larger sample would have improved the study. It was learned from this study that it is difficult to collect data from CPS cases. A different data collection procedure was, therefore, used in Study 3 in order to obtain a larger sample of CPS cases. Study 1 indicated a difference of about 20 percentage points between groups in many of the categorical variables. Study 3 was, therefore, designed to determine the significance of a 20 percentage point difference between categorical variables. For this reason, Study 3 was designed to include more cases than Study 1.

*Sample size of social workers.* The sample sizes used for factor analysis in this thesis were 86 and 91. The sample size was about 8 times the number of variables. A common recommendation for sample sizes in exploratory factor analysis is that samples should comprise at least 100, or a minimum of five times the number of variables (MacCallum, Widaman, Zang & Hong, 1999). The main purpose of the factor analysis was to reduce data, i.e. to create a composite score from multiple questions. The sample size was sufficient for this, however, it was not large enough to determine a definite factor solution for the items used in the questionnaire. This was seen in Article 3, in which it was not possible to reproduce the same factor solution for the Obstacles for participation measure that was used in Article 2. A post-hoc evaluation of sample size showed that communalities were medium in the data set (0.39-0.64). A sample size above 200 would be needed to produce a stable factor solution of 11 items and three factors with communalities of this size. It is, therefore, recommended that any future study aiming to refine the factor structure in the questionnaire use samples above 200.

*Attrition* in the study of social workers' views on participation was very low. A response rate of 96% and 100 % was obtained through on-site administration of questionnaires. In the study of CPS cases, response rate ranged from 45% to 73%, the higher attrition rate being due to the fact that study questionnaires were administered by mail. The high attrition of reports about CPS cases in Study 1 (45 % response rate) limited the generalizability of the findings for that study.

*Representativeness.* Sample bias is a threat to the validity of a study. It limits the ability to generalize from a sample to the population. In Studies 1 and 2, a convenience sample of social workers who were attending a seminar was used. One weakness with convenience sampling is that the sample may be biased. If social workers had been sampled from different types of agencies and regions using a randomization procedure, systematic bias could have been reduced. The drawback with this approach is that questions would have to be administered through mail or online surveys, two methods that are usually associated with lower response rates. The sampling of CPS cases in Study 1 was biased by convenience sampling and high attrition. Study 3 was designed to reduce this bias by yielding a representative sample of cases. Judges were asked to report from the first four cases they had ruled on in 2012 that met the inclusion criteria. This procedure did not provide for randomization because cases from the first half of the year were more likely to be selected than cases from the second half. However, this was not seen as a problematic bias because case characteristics and court decisions are not likely to be influenced by seasonality. In summary, Study 1 used a biased sample of CPS cases. Much was learned from this study about data collection in CPS. Improvements in study design and sampling procedures in Study 3 provided much better representativeness.

#### **8.2.4 Measures**

A combination of standardized measures and measures developed specifically for these studies was used. The strength of using standardized measures is that psychometric properties of the measures are expectedly good. Because there were no standardized measures available for many of the questions of interest, they had to be specifically developed. The problem with creating an index score for the first time is that high internal consistency cannot be expected. This means that the internal consistency of the developed measures could have been better. The process of creating a highly consistent questionnaire requires repeated sampling with reformulation and replacement of statements in much iteration. A higher reliability could have been obtained if more studies had been previously conducted in order to develop the measures further.

Collaborative participation was measured in two different ways: e.g. by social workers' appraisal of child influence for Article 1 and by observations of coincidence between a child's wishes and the outcome of the decision for Article 4. One important limitation in this thesis is that the views of the child were not taken into consideration. It may be argued that, when

participation is defined without reference to the subjective experience of the child, the definition omits some part of what participation is all about. For example, it is possible that a child who was invited to or attended a meeting, for some reason, did not feel free to express his or her views in that situation. It is also possible that a child may think he or she did not have any influence on a decision despite the fact that the outcome corresponded to some degree with the wishes of the child. Therefore, it is possible that a different division between participation and non-participation cases may have been found if children's assessments of their participation had also been collected. This would have strengthened the validity of the studies.

## 9. Conclusions

Findings in this research show that how social workers prioritize consulting with children varies. There is also variation on how difficult they assume it is to consult with children when a CPS case is processed. This is one reason why children's right to be consulted is not always fulfilled. When a child has influence upon a decision, this is defined as collaborative participation. It was found that, when children are consulted, this resulted in collaborative participation in about half of the cases. Collaborative participation is determined by the content of the decision and the views of the child. These findings have implications for current social work practice in addition to future research.

Implications for the practice of social work:

1. Today it is mandatory for CPS to consult with the child before decisions are made. Because some social workers assume this is not always necessary, there is a need for more detailed guidance on when this should be done. Such guidance would likely increase consultative participation.
2. Such guidance should include a mandate to submit a written report about child consultations to be included in the case file. This report should contain reference to what the child said. In addition to assuring that the child's views are recorded and documented, such a practice would also make archives better suited for audit and research.
3. When a decision is made the decision should be explained to the child. If the outcome is not what the child wanted, a reason for this should be given.
4. A formal requirement for child participation in case reviews, based upon the British review model, should be considered. This would allow for greater representation of children in collaborative processes.
5. Children's collaborative participation, in many cases, is in conflict with parental rights to retain contact with the child. When a child in foster care does not want family visitations it should be considered whether the child's view should be ascribed more weight.

Implications for future research:

1. Participation has different meanings. It is important that studies define the operational definition that is being used, making it easier to compare results across studies.



2. Variables that determine collaborative participation are dependent upon the decision type. It is recommended that future studies specify the type of decision that is studied.
3. It is not known how well social workers' views about participation reflect what they do in practice. In particular, little is known about how the views of social workers affect how much weight is given to children's views. This should be studied.
4. A factor that hinders consultative participation is when social workers think it is harmful for the child. The merit of this assumption should be addressed by studying the relationship between participation and children's health.

## Appendix 1

Details of methods for the literature review in Chapter 4:

Search for relevant studies was done electronically in the following databases:

PsychINFO(OVID), CINAHL(EBSCO), Web of Science(ISI) and ERIC(EBSCO). Searches were performed using the search string ‘child’ AND ‘participation’ AND ‘decision making’. Searches were limited to publications from the period of 2008-2013. A narrow time range was used in order to capture studies that were not mentioned in the three previous reviews referred to on page 20. The searches identified a total of 921 studies (PsychInfo = 137; CINAHL = 178, Web of Science = 549, Eric = 57). Titles and abstracts from these studies were screened. A substantial amount of the identified studies were related to child participation in health care, education or research. These were not examined further. The remaining studies were systematically analyzed according to: (i) the contingency factors included in the study; (ii) study design and sample; (iii) country of origin; (iv) number of subjects included in the study; and (v) main findings related to factors that may impact decisions on child participation.

### Excluded studies

Eight studies were excluded on the basis of sample size criteria. All of these studies were based on qualitative interviews with children. The main conclusion from many of these studies was that children felt their views had been recorded but not valued (Munro, 2001; Holland 2001; Leeson, 2007; Bessell 2011; Fitzgerald & Graham, 2011).

## Appendix 2

### Errata

Correction to Article 1: On page 163, the last line in the fourth paragraph reads: «Children were unlikely to be ‘participating’ when the referral was classified as ‘other’». This interpretation is not correct. In the SPSS data sheet, membership of the «other» category was coded as 0=no, and 1=yes. When running the analysis, 1 was selected as a reference. The correct interpretation should thus be that likelihood of participation increases with membership of «other» category. The odds ratio for the increase equals the inverse of  $.47 = 21.1$ . The text should thus read: «If the case was characterized by some concern other than or in addition to (1) abuse and neglect, (2) child behaviour problems, (3) acute placement or (4) parent requesting services, the children were much more likely to be counted as participating<sup>11</sup>».

Furthermore, the corresponding note number 11 should read: «OR=21.1»

Correction to Article 2: page 11, section 2, line 12 should read: The response rates were 100 per cent (N = 53) for the pre-measure and 40 per cent (N = 21) for the post-measure.

Clarification on Article 2: In Table 2, composite factor scores are listed. It was not made entirely clear in the article that, before calculating the participation Advocacy composite scores, responses to statements 10 and 13 were inversed in order to give all the factor items the same direction. A low score on this factor means that the social worker thinks participation is less important.

Correction to Article 3: On page 2, the second paragraph reads, “ In a questionnaire containing 20 statements about child participation, groups of case managers (n = 54) and social work students (n = 32) were asked to rate their level of agreement with these”. The correct numbers are 53 case manager and 33 social work students. The sentence should, therefore, read: “In a questionnaire containing 20 statements about child participation, groups of case managers (n = 53) and social work students (n = 33) were asked to rate their level of agreement with these”.

## Additional information for Article 1

Table 7: Logistic regressions for case factors predicting collaborative participation – the full stepwise model.

Condition	Variable Exp (B)						
	Model 1	Model 2	Model 3	Model 4	Model 5	Model 6	Model 7
Constant	0.00	0.00*	0.00 *	0.00*	0.01	0.08*	0.30*
Meetings	8.10	9.14*	8.73*	8.55*	3.55*	3.52*	3.18*
Concern= other	19.99*	19.80*	27.30*	30.14*	19.86*	20.47*	21.11*
Concern -seriousness	1.78	1.81	1.76	1.73	1.44	1.37	
Child age	1.32	1.33	1.31	1.43	1.22		
Consultations	0.63	0.63	0.62	0.59			
Child gender	2.57	2.67	2.61				
Concern= abuse / neglect	0.67	0.62					
Problem-solving method used	NA <sup>a</sup>						
Model $\chi^2$ (df)	19.63 (8)*	19.55 (7)*	19.35 (6)*	18.23 (5)*	16.03 (4)*	15.05 (3)*	13.14 (2)*
Nagelkerke's R <sup>2</sup>	.52	.52	.51	.49	.44	.42	.37

\*p<0.05, <sup>a</sup>Not able to estimate because there were no cases counted as non-participation for this condition.

### Additional information for Article 3

Table 6: Factor loadings for the Obstacles towards participation measure.

	Factor loadings 5 items	Factor loadings 8 items	Factor loadings 11 items
3.It is important to know as much as possible about the child before the first consultation	.79	.75	.76
6. It is easier for children to say what they really mean if they know you well	.67	.61	.61
14. Talking about their problems is an additional burden for children	.59	.62	.61
1.Special skills are needed in order to talk to children about how they are doing	.61	.58	.58
2.Children normally don't like to talk to social workers	.60	.57	.56
8. One should not establish relationships with children if they cannot be maintained	Na	.37	.39
7.One should be careful about asking children about any difficult experiences they may have had	Na	.41	.38
19. It is more important for children to be listened to than to have it their way	Na	-.35	-.34
12. Children should attend meetings	Na	Na	.02
13. It is always in the best interest of the child that children get to give their opinion before decisions are made.	Na	Na	.09
10. It is not always necessary to ask children what they think before decisions concerning them are made.	Na	Na	.19
Variance explained	43%	30 %	22 %
Cronbach's alpha	.66	.65	.57

Note: To accommodate comparison between studies, items were numbered to correspond with the numbers from the original 20-item questionnaire used in article 2.

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# Paper I

## Paper II

## Paper III



## Paper IV