THE IMPACT OF CHILD WELFARE REFORM: SOCIAL WORK BY NUMBERS?
THE IMPACT OF CHILD WELFARE REFORM ON INTAKE PRACTICE:
SOCIAL WORK BY NUMBERS?

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TITLE: The Impact of Child Welfare Reform on Intake Practice: Social Work by Numbers?

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This qualitative study explores the impact of recent changes to child protection in Ontario. The impact of Child Welfare Reform on intake practice was studied via an approach influenced by Grounded Theory. Utilizing interviews of six key informants, this study revealed concern for the implications of the narrow focus on child protection. There seems little faith that these drastic measures that came with Child Welfare Reform will prevent future deaths of children having involvement with a Children's Aid Society. The findings of this study encompass six themes that emerged which support this concern. First, they include the altered context of practice where four supporting components emerged; a political presence, Child Welfare Reform as an unfinished process, a tattered welfare state and a changed institutional psyche. Secondly, the shift in practice theme included components of loss of relationships and the volume of work. Thirdly, a theme regarding social work values included components of the importance of these values and concern for turnover. Fourthly, a theme of strategic organizational playing emerged where a pushing back against bureaucratic expectations was noted. Fifthly, children in care emerged as a theme with components of concern regarding the increase of children in foster care; foster home placement and focus on adoptions. Lastly, a theme regarding service effectiveness emerged where informants could not say with certainty that the changes have resulted in children being better protected. Given that the Child Welfare Reform is built on formulae and benchmarks, this exploratory study concludes that intake practice has changed and that it is largely child protection by numbers with social work happening despite the numbers -- just not to the satisfaction of anyone involved.
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There are many people who have contributed to my learning throughout this academic process.

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CHAPTER 1

Introduction

Child welfare has been subject to the swing of a pendulum, back and forth between a focus on the family and a focus on the child. The most recent swing in Ontario in the mid 1990s known as “Child Welfare Reform,” has brought extensive transformation to the province’s child welfare system and narrowed service delivery to focus on forensic investigation and protecting children. One thing that has not changed over time is that Children’s Aid Societies (CAS), charged with the delivery of services to help and support children and their families both voluntarily and involuntarily have remained a target of public scrutiny hence the shift in focus depending on the priorities of the government at any particular time. The pervasive modifications of Child Welfare Reform altered the existing focus on the best interests of the child and the paramountcy of the child’s well being, to the extent that anything peripheral to protecting the child has little relevance.

This study is about finding out how direct practice with clients has changed as a result of the reform and about whether social work remains an essential part of child protection intervention or whether this work is now merely managed by numbers. The method employed will be the exploration of experiences of people who have knowledge about Child Welfare Reform.
In my own work in the child protection system, I have experienced this shift in focus first hand. In an intake department of a Children’s Aid Society I have held various direct practice positions as a child protection worker. I have completed intake investigations early in the implementation of Child Welfare Reform, worked in telephone screening fielding incoming calls, concerns and allegations of child maltreatment and have completed record disclosures, releasing file information when requests are made and appropriate documentation is received. While I have felt good about the work I have done in my various roles, I found that direct practice child protection work since implementation of Child Welfare Reform was sometimes incongruent with my values as a social worker. At first I wondered if it was the power inherent in the position that I was uncomfortable with; if it was the work itself or if it was the way the work was done. To me the work seemed calculated and formulaic and it did not fit well with some of my social work values, namely those of self-determination, respect, dignity, social justice, acceptance of diversity and in the freedom of choice. I struggled to reconcile this incongruence and to work within what seemed at times a rigid and unfriendly system so that I could sleep at night knowing I did the best job I could for the children and families with whom I worked.

It was in my role of telephone screener that I came to understand more clearly the fragmentation of the welfare state and the point at which politics intersected with people’s lives as vulnerable children and families desperate for help had to meet eligibility criteria for service. Once again, my social work values were put through the test. However, it was in my role completing record disclosures that I realized this
particular position in a non-profit human service agency had potential to be a positive funding generator since regardless of how little time it took to complete a disclosure, the agency was always reimbursed for 0.58 hours (Ministry of Community and Social Services, 1999, p. 13). I found it simultaneously fascinating that a time and dollar value could be placed on work that had been broken into its parts, yet I found it confusing and unsettling since all this was taking place in a field where people were different and situations were different. Yet in this new system there seemed no allowance for this difference. It seemed there was no value placed on the importance of the relationships with people, recognizing that there is difficulty in establishing relationships when a power differential exists. In this role I worked with my computer and client contact was mostly via the telephone and letters. With my curiosity and my deeper understanding of the shift in protection, I wondered how this translated into the work of investigations, of face to face contact with people now that the Child Welfare Reform was further in its implementation. I could see for myself there appeared to be more children coming into the care of the Society for usually apprehensions and voluntary placements occurred in fits and spurts although there seemed shorter and shorter periods in between. It seemed to me that the narrow focus on protection was replacing the welfare of the child.

I understand this type of management is nothing new, for breaking tasks into parts and watching the clock is all in the name of efficiency and accountability which emerged in early industrial times. In industrial times people worked with things and this system overhaul was about making work with people efficient and more accountable. My concern is that it does not seem a very effective way of helping people; of helping
vulnerable children or their families since it seems to leave little time to form any kind of meaningful relationship. The repetition of tasks led to the deskilling of workers in industrial times. The Child Welfare Reform seems to be undermining social work and I am concerned that perhaps social workers practicing child protection may fall victim to the same proletarianization.

This study will seek to explore what Child Welfare Reform has achieved and will look at how the work of intake has changed as a result. It will explore how the quantification of the work shapes the work and it will explore how Child Welfare Reform fits with social work values. Furthermore, it will explore what it is like practicing after Child Welfare Reform and will explore the effectiveness of the work now. It is important to explore the impact of the Child Welfare Reform since social workers have historically found employment in child welfare and it involves working with some of society’s most vulnerable people.

I will continue chapter one with ‘What is a Children’s Aid Society’ where I will describe the purpose of a Children’s Aid Society and will detail the work of intake. In ‘About Child Welfare Reform,’ I will describe the context in which Child Welfare Reform originated. I will then describe the major components of the Child Welfare Reform in ‘What Child Welfare Reform Entailed.’ In chapter two I will critically review what the existing literature tells us about Child Welfare Reform and changed work processes and environments. Chapter three will focus on this research and explain the methodology used in this study, will present the findings and discussion. I will then present the ‘Conclusion, Limitations and Future Directions’ for this study. This study will
provide opportunity to understand the impact of Child Welfare Reform on intake practice and will help me understand if this new way of working with children and families is merely social work by numbers.

What is a Children’s Aid Society?

A Children’s Aid Society is a protection service for children. In Canada each province is responsible for the delivery of services aimed at the welfare of children. As such, these child protection services differ provincially and are dependent on the legislation of each province. These protective services can be delivered directly by the government or by community agencies authorized to administer the legislation. In Ontario, local agencies are mandated to deliver child protection services. These agencies are called Children’s Aid Societies and in some jurisdictions they are known as Family and Children’s Services.

In Ontario, Children’s Aid Societies are exclusively designated under section 15 of the Child and Family Services Act (CFSA, 1984) to deliver child protection services. The legal mandates of the Children’s Aid Society fall primarily under part three section 37, sub-section 2 of the CFSA, the portion pertaining to children in need of protection. Under the CFSA, the main duties of a Children’s Aid Society include the investigation and assessment of child abuse and neglect allegations of children under the age of sixteen; the provision of guidance, and other services to families where children are at risk of requiring protection including neglect, emotional, physical and sexual abuse; the
provision of care for children under their guardianship and the provision of adoption services (Ministry of Community and Social Services, 1997, p. 1).

There currently are 52 CASs in Ontario, four of which are Aboriginal specific (McConville, 2002, p. 2). In addition, throughout Ontario there are separate Societies serving Catholic and other religious groups (Swift & Callahan, 2002, p. 6). The CASs are governed by the Ontario Ministry of Children and Youth Services (most recently the Ministry of Community, Family and Children's Services and previously the Ministry of Community and Social Services, MCSS). According to the Ontario Association of Children’s Aid Societies (OACAS), a body established to promote the welfare of children and coordinate the work of all the societies, Children’s Aid Societies are non-profit, local agencies that provide help and support to children and their families (OACAS, n.d.). Although a quasi-governmental organization, each Children’s Aid Society is an independent organization with a volunteer Board of Directors composed of community members.

For the most part, each Children’s Aid Society is divided into various units, each offering different services. Intake Services offer telephone screening, consultation, investigation and assessment. At intake, allegations of abuse and neglect are investigated and concluded as substantiated or unsubstantiated. This involves ensuring the child is safe; gathering all identifying information; interviewing individuals involved; speaking with collaterals and other community professionals, completing assessments regarding future risk and client needs and making referrals to other agencies (MCSS, 1999, p. 13). If there is reason to keep a case open for further service, for example the allegations are
substantiated and there remain some concerning risk factors, the file is sent to an
Ongoing Services unit for further service. An Ongoing Services worker would be
assigned to carry the file and would work with the family to create a service plan and
formulate goals. If, for example a child was brought into the care of the Society, the child
would be assigned a Children’s Service worker whose primary responsibility is to ensure
the child’s needs are being met while in foster care including a medical assessment. All
services for children cease upon their sixteenth birthday, although services can be
provided up to the age of 18 based on “mutual consent” (MCSS, 1999, p. 1). Likewise,
Crown Wards can be maintained by the Society by mutual agreement up to the age of 21
(MCSS, 1999, p. 1).

Historically, CASs provided a broad range of services aimed at the safety and
well being of children and families. Some of these services included family crisis services
and the development and delivery of parent resource services. These programmes
concentrated on prevention and they were attempts to consider the safety and best
interests of the child while simultaneously recognizing the family unit as important. As
such, maintaining the child in the home environment was emphasized (King, Leschied,

**About Child Welfare Reform**

It is no secret that “child welfare is fraught with social and political pressures”
(Regehr, Chau, Leslie & Howe, 2002, p. 17) and as such, child protection workers find
themselves faced with multiple conflicting pressures of “the best interests of the child,
concerns for the parents and shifting public policies" (Guterman & Jayaratne, 1994, p. 100; Regehr et al., 2002, p. 18). Similarly, Swift and Callahan (2002) write,

The child welfare system has embedded in it a number of contradictions that remain powerful and often problematic. It rests on tensions between helping and punishing parents and between its focus on parents and on children. These tensions lead to constantly changing thresholds of intervention, guided at least as much by ideological and political interests as by any evidence that works (p. 18).

Child Welfare Reform in Ontario did not happen in a political void. Many of the changes in the past eight years within child welfare have been the result of the 1995 election of the neo liberal/conservative government in Ontario. The government’s response to a plethora of media reports about children dying at the hands of their caregivers while having some involvement with a Children’s Aid Society led to a rapid overhaul of the provincial child welfare system which some (Alwon & Reitz, 2000 as cited in Regehr et al. 2002, p. 33) say were changes unprecedented in the field.

While attempting to ameliorate the ills of the child welfare system and in keeping with the Progressive Conservative Party’s election campaign for a “common sense revolution” (Simms, 1995, p. 18) the government simultaneously implemented austere policies. These policies were aimed at curbing public spending by cutting funding for social programmes including slashing welfare payments for Ontarians by a record 21.6% (Calver, Grey & VanderPlaats, 1999, p. 3). Ultimately this impacted 40% (Calver et al., 1999, p. 1) of people on welfare, or some 500 000 vulnerable children living in Ontario (Ontario Secondary School Teachers’ Federation, 1997, p. 2). These programmes and services provided the diversification of approaches to helping children and their families
(Ringrose & Walsh, 2001, p. 3) without necessitating the removal of children by the child welfare system.

Changes of this magnitude were in keeping with the Conservative ideology and were reflective of a right wing libertarian view that desirability lies within individual success rather than in collective wellbeing. The provincial government viewed the welfare system as it was, as creating dependency and so their belief was that reduced welfare payments would create greater motivation for personal success, self-sufficiency and reward. As such, minimizing social programmes, reducing welfare payments, instituting a mandatory work for welfare programme, establishing welfare eligibility rules exemplified by the ‘spouse in the house’ and the creation of a ‘welfare cheat hotline’ were justified as a means to discourage passive dependency. This promotion of individual accountability is also reflected in a law and order ideology where one must take responsibility for their actions or inactions. In the case of child maltreatment, greater accountability was demanded of everyone involved.

Munro (1996) indicates, “The public is understandably distressed when a child dies and is right to demand an inquiry to check the quality of help provided. But a child’s death is not proof that any professional was incompetent” (p. 793). While at times it appeared the media were crucifying individual workers, others realized there were problems inherent in the system itself. According to the Ontario Association of Children’s Aid Societies (OACAS, April 1998, p. 14), the public demanded answers, accountability and transparency for the child welfare system and the Conservative government set about a rather quick process of reshaping child welfare. What happened
in Ontario was really not much different from the child welfare climate in both North America and the United Kingdom where shifts within child welfare led to a focus on child protection and more forensic work, where workers saw their roles change to “gatherers of evidence” (Howe, 1992, p. 502) for court purposes.

What followed in Ontario was the establishment of the Child Mortality Task Force in 1996, composed of 14 members including the Deputy Chief Coroner, representatives of the OACAS, representatives from the Ministry of Community and Social Services (presently the Ministry of Children and Family Services), four CAS Executive Directors; two Directors and two supervisors of CAS departments (OACAS, April 1998, p. 19). The mandate of the Task Force was to review and make recommendations regarding “the collection and flow of data; the coordination of efforts among community partners; prevention training; the adequacy of accountability mechanisms and the field’s ability to assess risk” (OACAS, April 1998, p. 18). These items were considered while examining the deaths of 100 children (OACAS, July 2002, p. 4) under age five between January 1994 and December 1995 who had involvement with a Children’s Aid Society in Ontario (OACAS, April 1998, p. 18). Simultaneous to the Child Mortality Task Force were the Coroner’s inquests into the deaths of six children who died in a one year period from 1996/97 (OACAS, April 1998, p. 16). In addition, three government reviews were carried out. The Child Protection File Review examined 3038 randomly selected protection files from across the province to review how CAS practices compared to standards for investigation and assessment of child abuse cases as set out by the Ministry of Community and Social Services (OACAS, Aug. 1998, p. 4).
The Child Welfare Accountability Review was charged with examining the accountability relationship between the Ministry and all 52 CASs with particular emphasis on setting direction, contracting, monitoring and follow up (OACAS, Aug. 1998, p. 4). The Protecting Vulnerable Children Review, also referred to as the ‘Expert Panel’ examined whether changes should be made to the 1984 Child and Family Services Act (OACAS, Aug. 1998, p. 4).

This extensive review process resulted in the recommendations of the Child Mortality Task Force; the four hundred recommendations to improve the child welfare system which arose from the inquests (OACAS, April 1998, p. 16) and the recommendations from the three reviews. The Ontario Child Mortality Task Force recommendations encompassed such areas as:

- the development of a database for the sharing of information about children and families receiving child protection services;
- use of a risk assessment tool;
- use of a comprehensive pediatric screening mechanism for high risk infants;
- legislative amendments including allowing the full disclosure of information among professionals;
- more emphasis on neglect;
- public awareness and education about the care and protection of children and about the risk factors associated with Sudden Infant Death Syndrome;
- a new procedure for review of child deaths;
• the establishment of community partnerships, including expert medical consultations to CASs;
• the development of workload standards which consider the time required to deliver child protection services which are effective;
• the use of the media to promote the well being of children and the development of a “children first” approach such that all new initiatives regarding children will be evaluated in the context of how they will affect children (OACAS, April 1998, pp. 4-17).

In addition, the Protecting Vulnerable Children Review included a renewed focus on the duty to report for everyone, particularly professionals in the community and included legislative changes.

These recommendations were synthesized and presented to the public in the fall of 1997. This work was unveiled as the Ontario Government’s Child Welfare Reform Agenda. The Ministry of Community and Social Services (now the Ministry of Family and Children’s Services) developed the following vision statement to guide the Child Welfare Reform Agenda and presented it December 3, 1998 (Ringrose & Walsh, 2001, p. 5) as “...a high quality protection system which protects children who have been identified at risk of abuse and neglect. Services are responsive, based on best practice research, delivered by highly trained professionals and integrated with other support services for children” (OACAS, July 2002, p. 4).
What Child Welfare Reform Entailed

Child Welfare Reform encompassed many changes, one being changes to the legislation. Additionally, the recommendations, also referred to as objectives that informed the Child Welfare Reform Agenda focused on six main areas. These six areas encompassed technology, standardization, capacity building, funding, accountability and foster care revitalization (OACAS, July 2002, p. 2). As Child Welfare Reform was to be “a multi-year, incremental approach to the transformation of child welfare,” (OACAS, July 2002, p. 15) some of these initiatives have been implemented and other have yet to be realized.

Legislation

Originating from the Protecting Vulnerable Children Review were the legislative changes to the Child and Family Services Act that King et al. (2003) noted to be the “most substantial changes to the CFSA in almost two decades” (p. 9). These major changes came with the introduction of Bill 6, The Child Welfare Reform Act which was “an Act to amend the Child And Family Services Act in order to better promote the best interests, protection and well being of children” (Legislative Assembly of Ontario, 1999) and included as its purpose that the “least disruptive course of action to help a child should be considered” as previously it was recommended that these actions should be followed (King et al., 2003, p. 10). Although not proclaimed until May 3, 1999 and implemented in March 31, 2000, this change in legislation resulted in a broadening of intervention and acknowledged emotional harm and neglect as grounds for finding a child
in need of protection (King et al., 2003, pp. 10-11). Furthermore, the removal of ‘substantial risk’ and acknowledgement of ‘risk’ exemplified this shift to focus on prevention. In addition, the amendments promoted the establishment of time limits for children in the care of CASs temporarily to promote “earlier and more decisive planning” (OACAS, July 2002, p. 5). Specifically, the threshold before a child is made a Crown Ward is now cumulative; a child under age six has a cumulative maximum of 12 months and a child over age six, a cumulative maximum of 24 months (OACAS, July 2002 p. 5).

Technology

The technology portion of the Agenda evolved partially from The Child Welfare Accountability Review which recommended that information technology in CASs be used for decision making and to “improve management and delivery of services” (OACAS, July 2002, p. 11). It was recommended that prior contact checks be made with this technology to determine any previous CAS involvement; a comprehensive data collection system be implemented and that every worker have a computer in order to “facilitate the collection and analysis of performance data necessary to effectively administer child welfare services” (OACAS, July 2002, p. 10). In addition, Ringrose and Walsh (2001, p. 9) indicate that the use of laptop computers is “for added flexibility of workplace.”

This technology included the implementation of the Child Welfare Information System (CWIS) an internal file system that maintains the agency specific statistics. It is from this database that file statistics are pulled in order to determine agency financial
entitlement. Changes to technology also included “Fastrack,” the provincial database which was implemented to complete prior contact checks and to determine if a child or family has been the subject of a child protection alert and the origin of that alert (OACAS, April 1998, p. 4).

Other technological recommendations included a standardized recording package that incorporates the Risk Assessment Model with case recording requirements and is known as IFRS, the Intake and Family Service Recording System (Ringrose & Walsh, 2001, p. 10). The assessments all appear within this standardized recording package and are time and date stamped. Completed documents are then emailed via the IFRS connection to a supervisor for approval and must be approved before moving forward.

Standardization

The initiatives regarding standardization were driven by a commitment to enhance the ability of direct practice workers to protect children. These included the development and implementation of standardized tools, new standards and guidelines and improved communication (OACAS, July 2002, p. 7).

As CASs were using non-uniform means of assessing risk a comprehensive risk assessment tool was implemented. This tool was composed mainly of three parts; an Eligibility Spectrum, originally called the Intervention Spectrum when it was first created in 1991 (OACAS, 2000, p. 1); a Safety Assessment and a Risk and Comprehensive Assessment (Ringrose & Walsh, 2001, p. 7). The Ontario Risk Assessment Tool was adapted from the Risk Assessment Tool used in British Columbia (MCSS, 1999, p. 12),
which had been adapted from the Risk Assessment Tool used at one time in New York (Federal-Provincial Working Group, 1997, §6). These standard tools are used to determine which cases should be opened and include a risk assessment tool and new standards and timelines to cover all case types (OACAS, July 2002, p. 7). The Ministry of Community and Social Services implemented these tools in consultation with the OACAS and other child welfare experts with the goal that these tools "would lead to a more consistent interpretation of provincial legislation" (OACAS, July 2002, p. 7). In addition, a primary goal of the Ontario Risk Assessment Model was to support a "structured and rational decision making approach to case practice without replacing professional judgment" (OACAS 2000, p. 1).

The Eligibility Spectrum dictates which types of situations can be investigated and the mandated response time. Criteria are very clearly laid out, either above the intervention line where service occurs or below the line where the Society is not mandated to intervene but can at its own discretion. The assessment of risk is documented in the Lotus Notes, IFRS recording package and is a standard assessment that must be completed if the file is opened for more than 30 days; for example, risk decision #5 in a series of 11 determined by the Ministry (OACAS, 2000, p. 1). In assessing risk, protective factors such as individual characteristics, family characteristics and community characteristics are considered (OACAS, 2000, p. 34). These three realms are further divided into more detailed areas that are assessed by the worker and given an overall rating to determine the future risk to a child which in turn assists in the formulation of the service plan or in determination to close the file. As such, the Risk
Assessment Model guides decision making by taking the worker on a journey of information gathering and analysis while considering risk influences and protection issues regarding family functioning (OACAS 2000, p. 1).

The use of Standards to guide direct practice regarding Intake Services and Ongoing Services were implemented. These Standards were legislated under the Regulations of the Child and Family Services Act for the purpose of governing all stages of service (Ringrose & Walsh, 2001, p. 7) such that Standards describe the minimum Ministry requirements and are partial content of each risk decision (OACAS, 2000, p. 5). It has been noted (Ringrose & Walsh, 2001, p. 7) that this is the first time in Ontario that such standards of practice have been set for all major components of the delivery of child protection services. While standards still reflect a minimum level of performance, they now encompass neglect (OACAS, April 1998, p. 9) as they previously addressed minimum MCSS expectations for abuse cases only (OACAS, 2000, p. 5).

In addition, a goal of improved communication between direct practice child protection workers and other community professionals was central for better sharing of information (OACAS, 2002 p. 7). This has resulted in increased focus on the creation of protocols between CASs and community partners such as Violence Against Women (VAW) shelters. Furthermore, existing protocols between Police, local hospitals and school boards and have been reviewed to ensure they embody the new legislation.
Capacity Building

Both pre-service and ongoing training were already provided by the Ministry and so a commitment was made to “enhance the capacity” of these workers to protect children (OACAS, July 2002, p. 8) via implementation of a comprehensive training curriculum. This was done with the introduction of an integrated program of pre-authorized training for new workers. The Ministry’s own Ontario Child Protection Training program is an “integrated program of pre-authorization training and continuing education for workers, supervisors and managers” and has “testing requirements for new workers to demonstrate competencies in child protection” (OACAS, 2002, p. 2). In addition, it offers specialized training to meet the unique needs of Aboriginal CAS staff (OACAS, July 2002, p. 2). A three month long curriculum for new workers was developed involving competency based standards and components of classroom, e-learning and mentoring. It was an intention of this training that it reflect the legislative changes and that new workers complete the training and demonstrate minimum competencies to be eligible for authorization and to work independently as Child Protection Workers (OACAS, July 2002, p.9).

Capacity building included that Ministry staff charged with the responsibility of supervising the operations of CASs receive more training and preparation for their role (Ringrose & Walsh, 2001, p. 9). Along with the complexity of the CAS mandate and services and the accountability of the Society arising from Child Welfare Reform, a provincial training manual was developed to provide foundation training for Board members of Children’s Aid Societies (Ringrose & Walsh, 2001, p. 9). The intent was to
enhance the Board’s capacity regarding governance and management of public funds in addition to meeting Society standards (OACAS, July 2002, p. 14). Furthermore, capacity building included Ministry required joint VAW and CAS training, information on Aboriginal issues and a French language version of the new worker curriculum (OACAS July 2002, p. 9).

Accountability

The recommendation of the Child Welfare Accountability Review was that improvements should streamline and enhance the monitoring of CAS performance, including the monitoring of all case types (OACAS, July 2002, p. 13). Accountability was a major thread throughout reformation of the child welfare system that referred to CASs being accountable to the government, to the public and accountability of individual worker performance via audits. In addition, more emphasis was placed on consultation between direct practice workers and their supervisors to ensure adherence to Ministry Standards.

To increase CAS accountability, a commitment was made through improved reporting to the Ministry and Board of Directors via expanded reviews including all protection cases, children in care and children on adoption probation (OACAS, July 2002, p. 13). In addition, accountability included a thorough review of Society data to determine compliance with the Eligibility and Risk Assessment tools and realization of standards (OACAS, July 2002, p. 13). An integrated review mechanism to audit cases province wide was to be implemented in addition to the implementation of outcome
indicators to monitor client outcomes (OACAS, July 2002, p. 11). Furthermore, audits of agency files occur four times per year to ensure compliance with Ministry guidelines (MCSS, 1999, p. 71). Since the funding framework was pivotal to Child Welfare Reform, collective credibility in child welfare would only be attained via fiscal accountability (OACAS, 1999, p. 4). In addition was the recommendation of timely feedback regarding the results of the provincial audits and the promotion of best practice research in the field (OACAS, July 2002, p. 14).

**Foster Care Revitalization**

The recommendations regarding foster care revitalization as a component of Child Welfare Reform included a renewed focus on foster parent recruitment and retention programs that were both “comprehensible and sustainable” so that appropriate foster homes would be available for all children who required this type of placement (OACAS, July 2002, p. 2). Societies across Ontario had reported increasing costs for children in care as children were being placed in more costly residential placements and group homes due to the lack of available local foster home placements (OACAS, July 2002, p. 10). Furthermore, many children were not even placed within their own jurisdiction and travel costs became an issue.

In addition, a commitment to provide standardized assessments and planning for children in care to ensure more positive outcomes was made (OACAS, July 2002, p. 9). Furthermore, PRIDE, the Parent Resources for Information, Development and Education training program rights were purchased by the Ministry of Community and Social
Services and the curriculum was intended to better train and support foster parents (Ringrose & Walsh, 2001, p. 11).

**Funding**

Of all the initiatives presented as the Child Welfare Reform Agenda, the changes to funding were most prominent. In an audit by ARA Consultants that was submitted as part of the Child Welfare Accountability Review, it was found that there was "No effective accountability framework to provide assurance of prudent expenditure of public funds and compliance in carrying out program requirements" (MCSS, 1997, p. 66). Furthermore, it was discovered that through review of individual CASs the Ministry itself did not have clear and detailed performance information and so had no such mechanism in place to hold individual agencies accountable for the kind and quality of services they offered or for how they spent provincial money (MCSS, 1997, p. 66). As a result, a commitment was made regarding the new funding framework considering the four principles of equity, standardized services, accountability and cost effectiveness (OACAS, July 2002, p. 12).

Previous to the provincial government resuming total financial responsibility for child welfare on January 1, 1998 the government provided only strategic direction, no direct service involvement and 80% of annual funding with municipalities funding 20% (MCSS, 1997, p. 1). In the past, CASs were able to apply for extra money from a contingency fund to meet their expenses, however with a growing demand for services, this fund was no longer used to address shortfalls, rather agencies had come to rely on it.
annually as a supplement (MCSS, 1999, p. 2). According to the OACAS (March 1999) with the introduction of the new funding formula came a shift from a less flexible model with base funding, lack of clarity and with less reliable data to a more transparent and predictable type of mitigation funding with zero base funding; where funding is volume driven with standard definitions, incentives built into the framework, verifiable data and with accountability via controls and monitors built into these “business processes” (p. 8).

The provincial government advised that in determining how CASs would be funded, extensive research into various approaches to funding in other sectors and jurisdictions, most notably approaches in use in education and healthcare in other parts of Canada and the United States were considered before a decision was made to utilize a volume based mitigation funding which originated from a series of benchmarks (MCSS, 1999, p. 5). However, the Ministry was also upfront in admitting that this workload based approach to funding was based on estimates and not on empirical evidence (MCSS, 1999, p. 11). The Ministry maintains that this new funding formula “is to provide a rational and equitable means of funding all Children’s Aid Societies” and indicates among many items, a focus on frontline services, standard definitions and benchmarks including workload sizes, salaries of front-line staff and supervisory requirements for Societies (MCSS, 1999, p. 2). It was the intention that once the funding framework was fully implemented, funding would be standardized provincially so that all CASs would receive funding based on predetermined benchmarks and according to the demonstrated need for the specific geographic jurisdiction (MCSS, 1999, p. 5). Hence, funding would be volume driven. As a result, accountability measures were implemented with Child
Welfare Reform including that agencies were responsible for submitting detailed quarterly reports to the Ministry outlining the number of cases organized by status and in turn the Ministry would fund the Societies (MCSS, 1999, p. 71). The financial accountability is a very detailed set up to monitor the spending of provincial money including detailed projections of budgetary needs and actual costs. It is noted that the agreement between the federal and provincial governments regarding the provincial government’s ability to claim 93% of child protection costs for Aboriginal children from the federal government still stands (MCSS, 1999, p. 1).

In establishing workload benchmarks, which are related to service volume, workload and the cost of the service itself (OACAS, March 1999, p. 7) the Ministry took into account “the number of hours of work required for a trained frontline worker to provide a unit of service” (MCSS, 1999, p. 11). This translates into a benchmark of 12.5 hours for an Intake investigation which the Ministry indicates includes “the investigation of allegations that a child is at risk, assessment of risk, determination of client service needs and development of a service plan or referral to another agency” (MCSS, 1999, p. 13). The agency in other words, does not receive any funding for any time spent on a file above the allotted 12.5 hours and even then, only receives funding when the file is either closed or moved to Ongoing Services. Similarly, the benchmark for Ongoing Services was set by the Ministry at 5.5 hours per month (MCSS, 1999, p. 13). In addition, the Ministry (1999, p. 73) indicated that the benchmarks for funding would be reviewed initially every year until full reform implementation and then every three years thereafter.
Table 1

Funding Benchmarks

<table>
<thead>
<tr>
<th>WORKER TYPE</th>
<th>BENCHMARK</th>
</tr>
</thead>
<tbody>
<tr>
<td>Investigation and assessment, Reports received and not investigated (record disclosure)</td>
<td>0.58 hours per referral</td>
</tr>
<tr>
<td>Intake Services – investigation and assessment</td>
<td>12.5 hours per investigation</td>
</tr>
<tr>
<td>Ongoing Services – ongoing support and assessment</td>
<td>5.5 hours per month</td>
</tr>
</tbody>
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*Note.* Ministry imposed benchmarks for work / positions.
CHAPTER 2

Existing Research and Theory About Changed Work Processes

While child welfare is a heavily researched field, there has been little exploration regarding the impact of Ontario’s Child Welfare Reform on direct practice work in Intake. A small body of literature exists regarding the experiences of child welfare managers and supervisors, however the experiences of direct practice workers within the climate created by Child Welfare Reform in Ontario are relatively unexplored. Therefore much of the literature selected concerns the impact of health care and social service reform in the United States and England and considers global factors influencing frontline practice including the adoption of managerial ideology. The impact of Child Welfare Reform will be explored with respect to the existing literature.

The reform to child welfare in Ontario was in some ways reflective of reform that had occurred and was occurring in other jurisdictions throughout Western countries. Beginning in England from the mid 1970s onward, neo-liberal governments began reducing the scope of welfare initiatives and reducing the role of the state, in part as a reaction to economic slowdown (Parton, 1998, p. 13). Simultaneously, feminism helped bring to light the issues of women battering and child rights and consequently these and other concerns such as anti-discriminatory practice were exerting themselves in child welfare and pressing for change. Parton (1998, p. 13) notes that social work with children and families at this time became particularly vulnerable to criticism and reform as this type of social work was representative of all the ills of welfarism. In addition there was
concern from within social work itself, for deteriorating and inconsistent practice (Parton, 1998, p. 14) and public scrutiny of a number of deaths of children while under the care of child welfare agencies.

In England, Howe (1992, p. 497) noted that attempting to find a solution to prevent child deaths from occurring would mean that approaches to working with families would shift focus to protection of the child and not on reconstituting the family. As such, the work would be more “administrative and judicial in attitude as opposed to professional and rehabilitative” (Howe, 1992, p. 497). In Canada where restructuring and dismantling of the social safety net was less severe and did not begin until the mid 1980s, the later adoption of neo-liberal ideologies was accompanied by new managerial processes which attempted to apply business principles to public agencies, emphasizing efficiency, accountability, targeting and “lean work organization” (Baines, 2004, p. 268). Along with the managerial ideology and implementation of business practices to account for the millions of dollars poured into the Ontario child welfare system, managing risk in terms of what was in the best interests of the child became paramount. The use of formalized technocratic risk assessment tools was adopted to identify families at the greatest risk (Davies, McKinnon, Rains & Mastronardi, 1999, p. 105) and social work within this bureaucracy seemed to take a back seat to the narrow focus of child protection. Social workers have seen their job titles change to that of child protection worker and the work is notably more forensic; where skills are focused on investigation, surveillance, monitoring, gathering evidence and managing risk (Davies et al., 1999, p. 104) and practiced within a businesslike atmosphere.
One has to look no further than Child Welfare Reform itself to observe the presence of managerial ideology in the terminology the Ministry used to implement reform. Words like *agenda*, literally “items of business” (Concise Oxford, 1982, p.18), also suggest a certain dogmatism, a route followed with no deviation; *eligibility* as opposed to entitlement, where rules are used to qualify (Khoo, Hyvonen & Nygren, 2003, p. 508); *capacity building* as staff training; and the words *risk assessment, risk decisions, standards, quarterly reports and audits* are commonplace. There is an ever-present awareness of accountability; a watchful eye that did not exist to this same extent before the Child Welfare Reform Agenda was implemented. Children and families have become *cases*, their issues *serviced* and the labeling of work processes as *tools*. The use of the word *tools* implies a mechanization of service. Indeed, the managerial ideology does seem to have facilitated the creation of efficient services focused on the removal of children from situations where they are deemed to be at risk.

For direct practice workers, the focus on efficiency and accountability may not be totally satisfying. Aronson and Sammon (2000, p. 172) investigated the experiences of direct practice workers in child welfare and institutionally based health services within the changed work environment of the mid 1990s and found worker’s experiences to be of frustration and feeling rushed. Moreover, social workers described the changes in their jobs as isolating and routinized and reported having little job satisfaction. According to Aronson and Sammon (2000), practicing within these constraints and working at a faster pace changed the work social workers do in child welfare by “reducing it in range and depth” (p. 171). Child welfare workers further indicated that the organizational reshaping
of practice focused on the administrative procedures and on the standardization involved in ‘processing’ clients rather than on social work (Aronson & Sammon, 2000, p. 172). A participant in this study captured workers feelings about the focus on standardized administrative tasks and the processing of clients by indicating,

Fill in the boxes! What you may know is going on in the family, that might not even fit in the boxes ... and it would take time for them to even build a relationship, trust ... but you don’t have time for it. You just do what you have to do to move away from working with people and being with them, which is what I think social work is ... and you move away from that to kind of, like, getting the answers you need to fill in. You want to know that at least the paper is there ... so that if your name goes on the headline in the paper, you know that at least I’ve done what was expected of me ... but you may not have done what was best for the client (Aronson & Sammon, 2000, p. 172).

Concern was expressed that good practice was being replaced with time constraints and standardization and it was noted that workers had previously derived satisfaction from working with people over time and knowing their response had been helpful (Aronson & Sammon, 2000, p. 172). Likewise, in her study of new work organization and volunteer work of paid employees, Baines (2004, p. 278) noted one of the most impressive findings was that workers lamented over the loss of caring relationships with clients; that the interactions with clients were no longer helpful and that the work was highly administrative and calculated. Furthermore, Aronson and Sammon (2000, p. 168) noted how the presence of a managerialist ideology left workers finding themselves at “political, professional and personal odds” particularly since there was little discourse about organizational changes including need and entitlement and any discourse had an administrative focus. This managerialist ideology resulted in formulaic approaches to practice for efficiency in monitoring the work. Child Welfare workers
noted that parenting was more challenging with fewer social programs and cuts to social assistance, and that the work was less preventative. Additionally, in their study Aronson and Sammon (2000, p. 178) noted "organizational tinkering," as ways that participants actively pushed back against organizational limits which participants believed to not be in the best interests of their clients.

In the re-engineered acute care environment where managed care and reduced costs are stressed, Sulman, Savage and Way (2001, p. 320) found social workers indicated the work was less satisfying and that they felt devalued and underutilized. Respondents further indicated that under the changed conditions including very structured work, the practice had become diluted and the presence of social work was no longer obvious. Furthermore, the idea of competing demands emerged as the risk that the social worker may yield to the pressure of the organization over the needs of the client presented itself within this altered work environment (Sulman et al., 2001, p. 320).

In another study of social worker’s experiences within the context of the changing health care environment resulting from the changes in global economies, workers reported feelings of isolation, with fewer opportunities for peer consultation as a result of the pace of the work (Heinonen, MacKay, Metteri & Pajula, 2001, p. 79). The authors indicated that social workers in health facilities were faced with trying to strike a balance between constraints of the work environment and the needs of their patients along with their professional ethics and standards (Heinonen et al., 2001, p.79). Furthermore, workers described having to be creative in finding opportunities to do social work and although they recognized the importance of quantifying their effectiveness for
administrators and policy makers, it was difficult to find the time to do this given that
time was scarce and workers wanted to spend their limited time with patients (Heinonen
et al., 2001, p. 82).

Similar to the experiences of direct practice workers, a study of the responses of
supervisors and managers to Child Welfare Reform by Regehr et al. (2002, p. 24) found
that over 50% of participants identified quantity of work and organizational change as
problematic to their jobs. It was found that greater administrative responsibilities and a
focus on accountability and protection as a result of Child Welfare Reform, along with
fear of media scrutiny, led supervisors and managers to report feeling isolated, a loss of a
sense of accomplishment and demoralized. In addition the authors found that increased
pressure to support staff was contributing to the loss of experienced supervisors and
managers who chose to leave the field of child welfare (Regehr at al., 2002, p. 31).

The application of business principals and the call for accountability and hence
for the transparency of services appears to have altered social work in human service
fields and made child protection workers and their supervisors more focused on
accountability and risk reduction. Crook (2001) notes that “although bureaucracy in and
of itself is not a bad thing, too much of it can stifle creativity and result in rigidity as well
as displaced interests and goals” (p. 4). The bureaucratization of social work in Ontario
and the shift to a narrower focus of prevention in child welfare has been simultaneous to
declining community resources and has had dramatic impacts on the way social work in
intake child protection is carried out. The managerialist ideology and subsequent
bureaucratization of social work have made the work less open to professional judgment,
more predictable, less creative and has put workers in a conflicting position of doing what they were trained to do and what is best for the agency. Hence, professional discretion fades as policy and formulae come to the fore (Howe, 1994, p. 529). The irony is that while the government was pulling back on welfare state programs and putting more onus on families to sustain themselves they were investing more heavily in child protection which has resulted in the state inevitably becoming more intrusive as demonstrated by children coming into the care of CASs in record numbers. Weber (as cited in Elwell, 1996, The Irrationality Factor, §15) recognized this paradox; that bureaucracies, while they epitomize rationalization can act in seemingly irrational ways.

In the case of Child Welfare Reform, the rationalization of process and the narrow focus on protection has created an efficient machine to process the ever-increasing numbers of child protection concerns leading to ballooning costs and unknown human benefits or costs.

In 1999 the Workload Measurement Project was initiated by CAS directors and completed by the Ontario Association of Children’s Aid Societies in response to the changes in direct practice that came with Child Welfare Reform (OACAS, Nov. 2002, p. iii). A benchmark of 19.3 hours was arrived at with input from Intake workers province wide, as the average time it takes an Intake child protection worker to complete the tasks required of an Intake investigation (OACAS, Nov. 2002, p. 8). It is little wonder these studies show worker discontent with their changed work environments as a result of the shift to accountability. Completing the work of an intake investigation including the additional workload requirements to meet the standards, including the standardized
assessments and computerized recording would seem an unrealistic and monumental task knowing the CAS is only being paid for 12.5 hours regardless of the actual time required. It is not surprising so many Societies are fairing poorly under the existing funding framework and little wonder the newly elected provincial Liberal government gave a cash bailout with strings attached ("CASs Getting Cash," 2004). This 12.5 hour benchmark, coupled with the 23% increase in the number of calls to CASs since the legislative amendments to the CFSA (OACAS, 2003 p. 3); a 40% increase of children in care from 1998 to 2003 (OACAS, 2003, p. 12); a 42% increase in direct service staff (OACAS, 2003, p. 10) in addition to the changes in technology and standardized recording appear to be reshaping the work of Intake.

Similar concerns were noted by the Provincial Directors of Service in their critical analysis of the evolution of Child Welfare Reform. Concerns regarding high staff turnover as a result of burnout and the ensuing loss of office culture and "erosion of agency memory" were documented (Provincial Directors of Service, 2001, p. 4). In addition, the Provincial Directors of Service (2001) noted concern regarding accountability in child protection work. They noted that child protection has become more focused on compliance of administrative tasks; in particular that the use of standardized tools was taking time away from clients so much so that at Toronto CAS, 15 to 20% of worker time is spent with clients and the remainder spent on the administrative part of the job (Provincial Directors of Service, 2001, p. 3). There is also concern that supervision is now taken up with administrative tasks focused on compliance and volume, rather than the teaching of clinical skills (Provincial Directors of Service, 2001,
p. 4). Interestingly, this relationship parallels the hurried relationship between the worker and the CAS client. Most notable in their critique was that with what appears to be more of a focus on protection as a result of Child Welfare Reform, workers feel that there is not enough time to get to know clients to effectively reduce risk. Furthermore, they suggested that Child Welfare Reform has reshaped the work of frontline child welfare practice. They indicate that the job is more isolating and increasingly administrative as a result and they speak to the many losses in the work as 'unintended consequences,' including the losses in flexibility, in relationships, in creativity and in the quality of service (Provincial Directors of Service, 2001. p. 4). Likewise, the Grand River Executive Directors (Ringrose & Walsh, 2001, p. 4-5) noted the loss of best practice approaches and the lack of time for direct service with families as unintended consequences.

This process is nothing new, simply a managerial ideology played out in a human service field. Dominelli and Hoogvelt (1996, p. 57) indicate that accountants have had key roles as developers of models that transferred business culture into the public service sector. These are purely business practices to promote the transparency and efficiency of child protection. Whether it is dictating which situations can receive intervention; dictating response time; dictating that a standardized safety assessment must be completed within 12 hours of seeing a child; dictating that a standardized risk assessment must be completed; allotting funding for units of service or certain case types in Intake; deconstructing tasks into all of their parts to determine benchmarks; and dictating the specific training which a new worker must undertake to become certified in child protection, it is all reflective of the Taylorist principles which in the name of efficiency
specified in minute detail what was to be done, by whom and the time allotted (Gruber 1974 as cited in Fabricant & Burghardt, 1992, p. 79). The difference is that the Taylorist principles of breaking jobs into discrete tasks for the sake of efficiency and the resulting standardization and routinization and narrowing of the scope and meaning of the service (Fabricant & Burghardt, 1992, p. 85) were all about working in industrial times with cogs, wheels and widgets while child protection is about working with people. The Child Welfare Reform and the funding framework and benchmarks that drive it are shaping work with vulnerable children and their parents often on the margins of society where the standardization of tasks often does not fit, where routinization may be leaving more children at risk and where it seems efficiency and accountability have been placed above the importance of children.

Fabricant and Burghardt (1992) in writing about the fiscal austerity that accompanied the transformation of social services in the 1980s commented “almost without exception, cost-containment policies tend to favour fiscal austerity over the delivery of quality services” (p. 66). It is not surprising then that priorities have shifted to accountability and fiscal responsibility under the guise of child maltreatment prevention. The assembly line, made popular in industrial times is reflective of current child protection work much like the application of Taylorist principles evident within Child Welfare Reform, while intended to create economic efficiencies, has meant that children and families must qualify for service and are subjected to standardized assessments. The danger is that the use of standardized tools will be come the focus of human contact and will become habitual. As such, it is the child protection worker’s interview; carried out in
a calculated manner under time constraints and seeking specific information, hence limiting opportunity for discourse. Workers feel a loss of autonomy and concern that there is not enough time to get to know clients to effectively reduce risk (Provincial Directors of Service, 2001, p. 3) hence, the implicit concern is that in haste, vulnerable children may be left at risk.

In order to determine if a child is at risk and in helping to determine a plan of action that might be in the best interests of the child, the risk assessment is undertaken. The risk assessment is a standardized tool composed of checklists of risk indicators with determinants of state intervention based on a prediction of what might occur in the child's future (Anglin, 1999; Parton, 1998 p. 17). Of concern, Fabricant and Burghardt (1992, p. 79) indicate that the use of standardized tools leads to routinization, which will in turn replace human judgment. This repetition and standardization which weakens professional autonomy and control is what characterizes Fordism and the "business logic" of managerialism (Baines, 2004, p. 274). The pervasive Fordism within child protection has workers relying on the tools of the trade and workers are concerned that other risk factors less obvious in family functioning might not be identified as a result (Provincial Directors of Service, 2001, p. 3). Concern about risk lies central to both child welfare policy and practice and there is much controversy surrounding the use and accuracy of assessing risk. One thought being that the attempt to assess risk gives the impression it is "calculable and objective" (Parton, 1998, p. 6) when literature exists indicating the current risk assessment tools are not very successful at predicting future risk (Longlade, 1999 in Khoo et al., 2003, p. 520). At best, future risk would seem an educated guess
based on limited family contact. Parton, Thorpe and Wattam, (1997) write of the implications, namely the standardization and loss of professional judgement which result from this focus on risk,

... the pervasiveness of risk in a context where the trust in science and experts is replaced by audit can lead to new forms of organizational defensiveness and authoritarianism. It is as if once concerns about risk become all-pervasive, the requirement to develop and follow organizational procedures become dominant and the room for professional manoeuvre and creativity is severely limited. Ironically, once risk becomes institutionalized, the ability and willingness of professionals to take risks – in the original sense of positive as well as negative outcomes – is curtailed (p. 240).

There has been some question as to who really benefits from standardized tools. One thought is that structured recording helps to organize data and allows for efficient location of needed information (Reid & Smith, 1981; Streat, 1987; Videka-Sherman & Reid, 1985 in Edwards & Reid, 1989, p. 49) however, the other thought is one of managerial control in which these structured recordings are measures of accountability in fulfilling job requirements (Mutschler & Hasenfeld, 1986 in Edwards & Reid, 1989, p. 49). There is danger using the time constraints and standard assessments and recordings as indicated by a study in which child welfare workers sometimes provided “distorted and unsubstantiated information” in order to meet compliance with the time frames (Edwards & Reid, 1989, p. 51). Furthermore, this study found structured recording required workers to spend on average 9.4 hours more per week completing administrative tasks (Edwards & Reid, 1989, p. 50). Another danger is that completing the structured recordings time and time again, involves little thought and so is demoralizing (Regehr et al., 2002, p. 34) to the worker which in turn, seeps into any client contact as the worker is only seeking information in these contacts to fill in the

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boxes. This makes contact with clients, mechanical and prescribed. Baines (2004) refers to the standardization as the replacement of “holistic approaches” to much reduced and “narrowly calibrated” approaches to “diverse problems and issues” (p. 277).

Much of this standardization is supported by the technological components of Child Welfare Reform which involved a major focus on computerization. While traditionally social workers have been resistant to computerization of human services (Roosenboom, 1995), Weaver Moses, Furman and Lindsey (2003) attribute this to the “independence traditionally associated with professionalism and because of the unique nature of their personal relation with clients” (p. 71). This particular study revealed that computerization did not lessen the amount of time workers spent with clients but did indicate that workers felt isolated as a result (Weaver et al., 2003, p. 74). Computer mediated communication removed impromptu conversations and informal peer supervision by isolating the worker and hurrying the work. In this rushed atmosphere the workers do not have the luxury to sit and reflect, the very things necessary according to Munro (1996, p. 805) for a critical approach to child protection.

Computers and technology have been used to promote managerial ideologies of efficiency and standardization and for the expansion of the monitoring of the work. Multiple layers of monitoring and surveillance are happening via the managerial practices instituted by Child Welfare Reform. Intake child protection work is likened to workers in Bentham’s panopticon (Moffat, 1999, p. 224). It is in this metaphorical prison it could be said that client behaviour comes under the surveillance of workers; that worker’s behaviour comes under surveillance by management, whose work in turn is under
surveillance by the government. It could be understood that there are many panopticons in operation at any given time. Worker’s volume of output is always monitored and workers continue to monitor themselves and carry a panopticon of sorts within. Foucault (1979, as cited in Moffat, 1999, p. 224), indicates that “the panopticon is a mechanism that ensures the efficient expression of power relations,” as everyone is aware of their position in the chain of command. In addition, it seems that this panopticon serves to redefine best practice in fiscal terms due to the constant monitoring of worker’s output; done at arms length by computer surveillance. This arrangement of Bentham’s panopticon (Moffat, 1999, p. 221) results in each child protection worker internalizing this metaphorical prison and then they become a capable monitor of their own productivity. It seems this surveillance will drive the child protection workers to do lots of work, to process clients and to do it competently and efficiently by Ministry standards. In addition the supervisor is one who monitors output and is the ‘keeper’ in the panopticon; yet monitored by Ministry officials in their policing role. The audit, employed quarterly by the Ministry is the ultimate monitoring device or key mechanism for overseeing compliance of the work of CASs. It seems there is much misguided energy at the frontline, supervisory and Ministry level, energy put into compliance that could be constructively used to work effectively with clients.

With professional judgment being replaced by bureaucratic reliance on monitored standardization, the time, volume and fiscally driven prescriptive nature of Child Welfare Reform is effectively squeezing social work out of child welfare. Fabricant and Burghardt (1992, p. 64) have drawn from a number of authors (Wilkins, 1981; Cousins,
1897; Derber, 1982; Larson, 1980 & Braverman, 1974) in referring to this process of reducing workers skill level and control over their work as proletarianization. They indicate that this deskilling is akin to repetition of tasks such as on an assembly line in a factory. Interestingly, Riffe and Kondrat (1997, p. 47) indicate that proletarianization is synonymous with ‘alienation’ in education. Fabricant and Burghardt (1992) indicate, that as workers were subjected to more intensified forms of management and control, they suffered a loss of the skills historically associated with their craft. This loss of skill heightened the economic vulnerability of workers, making them even more susceptible to managerial control” (1992, p. 87).

Presumably, this would seem to indicate a loss of bargaining power on the part of workers and suggests a narrowing of employment options. If this is true, it could be expected that turnover in child protection would be minimal.

There is concern with the repetitive nature of standardization under the current regime, as likened to an assembly line, workers will become deskilled, a product of compliance driven work strategies. The literature breaks this idea of proletarianization into its technical and ideological components. Fabricant and Burghardt (1992) define technical proletarianization as “the loss of control over the work, of the execution of the work” (p. 90) and ideological proletarianization as “the loss of control over the goals, the end of conception of one’s work” (p. 89). It follows that the routinization of the work done under Child Welfare Reform in its prescribed Taylorist manner is leading to the technical proletarianization of skilled social workers as indicated by earlier studies (Aronson and Sammon, 2000; Provincial Directors of Service, 2001). Over time the ideological proletarianization would choke out previous social work conceptions of child welfare in favour of child protection. As new child protection trained workers enter the
system and child welfare social workers exit the system, the ideological self conception of individual workers and the agency itself would be altered through the loss of what the Provincial Directors of Service (2001) refer to as “agency memory” (p. 4).

There is concern regarding the high turnover rates of staff in the field. The Ministry of Community and Social Services (1999, p. 15) estimated turnover in the field to be 20% as did the Child Welfare League of America (2001, as cited in Steib & Whiting Blome, 2004, p. 102). Graef and Hill (2000, p. 518) found a turnover and attrition rate at public child welfare agencies to be between 20 and 50%. Similarly, Drake and Yadama (1996, p. 179) observed a two year turnover rate of 46 to 90%. At Toronto CAS between 1999 and 2000, 93% of Intake workers and 79% of Ongoing Service workers either terminated or transferred from their jobs (Howe & McDonald, 2001, Study of Staff Retention §2). In addition, terminations in Ongoing Services more than tripled in that same period. Not only would there be an emotional cost to a child or family who might have many workers in a short involvement given that these relationships can be difficult at the best of times, but it has been estimated to be a significant economic cost for the agencies. It has been noted in an American study that for every trained child protection worker who leaves an agency, the cost is conservatively estimated to be $10,000 US, based on 1995 dollars (Graef & Hill, 2000, p. 528). With workers leaving, new issues surface in terms of new workers not having experienced staff to answer questions or to mentor them. The Provincial Directors of Service of CASs in Ontario (2001, p. 4) indicated in their report that this influx of new staff erodes the agency culture and as a result weakens the link to the agency’s mission. This argument was countered by
Enzell, Casey, Pecora, Grossman, Friend, Vernon, and Godfrey (2002, p. 67) who indicated that new staff can be advantageous in that they bring skills, knowledge and perspectives with them. These fresh ideas could be expected to break the routinization and prescription of the work as workers might question the workings of the system and express their discord with the power and mechanization of their statutory responsibilities.

Perhaps to lessen the effects of staff turnover and to increase the size of the pool of potential intake workers to handle an anticipated increase in work volume, or simply to reflect the changed focus of the prescribed work, workers saw their job titles change to child protection workers. Along with the changed job title, some agencies no longer require that workers have a minimum of a Bachelor of Social Work degree.

Implementation of such bureaucratic controls has effectively reduced social workers professional autonomy, groomed them to be gatekeepers to carry out work strategies that are regulated and proceduralized (Khoo et al., 2003, p. 509). With the Ontario Child Protection Training Program all new direct practice workers regardless of their academic qualifications are taught child protection. Researchers in the United States are acknowledging that the response of reducing qualifications for child welfare staff to attract available and affordable workers, while a well intentioned response to recognition of child maltreatment in the late 1960s and early 1970s was in fact a “fatal error” (Steib & Whiting Blome, 2003, p. 747). They attribute the lesser qualifications of staff to problems within the current system of a high level of regulation, daunting documentation, constant threat of legal liability and lack of respect from both public and professional groups (Steib & Whiting Blome, 2003, p. 748). Russell (1987 as cited in Steib &
Whiting-Blome, 2003, p. 748) notes that at one point in the mid 1980s nearly half the States did not require a degree and currently only one quarter of staff have professional social work qualifications. Much research has linked social work education to better performance of staff (Dhooper, Royse & Wolfe, 1990, p. 60; Liberman, Hornby & Russell, 1998, p. 489) to people who are more likely to create permanent plans regarding children; who possess a positive relationship to professional self-efficacy and caring (Ellett, 2000 as cited in Steib & Whiting-Blome, 2003, p. 749). Not surprising then is that social work education with a focus on child welfare yielded graduates, who exemplified even more competence in the field (Fox, Burnham, Barbee & Yankeelov, 2000; Okamura & Jones, 1998 as cited in Steib & Whiting-Blome, 2003, p. 749); and individuals who had more confidence and more sensitivity to clients (Hopkins, Mudrick & Rudolph, 1999 as cited in Steib & Whiting-Blome, 2003, p. 749). Given that Crook (2001, p. 55) has identified an inverse relationship between increased levels of bureaucracy and negative client responses to programs, one could expect very poor outcomes such as poor client relationships and more children in foster care under the bureaucracy of Child Welfare Reform. If outcomes have not significantly deteriorated then there must be a mitigating factor at play. It would seem that this buffer could likely be social work trained child protection workers engaged in some form of strategic organizational playing.

There is an understanding that workers who are trained social workers will execute the work in a more compassionate, less compartmentalized and rigid manner; workers who will work with children and families in the moment and without always focusing on the final product; who will succeed in child welfare no matter the political
climate; workers who will hold true to their social work roots and who, according to Burr (1995, p. 70) choose to act as a force of resistance against the prevailing discourse; those who attempt to counter surveillance and subvert the goals of the agency (Moffat, 1999, p. 243). Aronson and Sammon (2000, p. 176) write of the “organizational tinkering” done by workers who use language in their workplaces to get what their clients need and Lewis (2003, p. 6) when addressing the legislature about obtaining preventative services for clients that were at one time offered by CASs referred to this act as “various little patchwork things.” These strategic organizational players could be seen as pushing back against and subverting the goals of the organization for the benefit of their clients. It could be surmised that this would lead to higher job satisfaction and a more positive overall experience despite the prescriptive nature of the work and in turn, proletarianization would be less likely is to occur as the worker would have a sense of control over the work and their social work skills would continue to be utilized.

Since child welfare has historically been performed by social workers (Leiberman et al., 1998, p. 485) and this appears to no longer be the case, one must wonder if, despite organizational tinkering by strategic players, the bureaucratic stronghold is choking social work practice from child protection. In a comparative study of social workers in Canada and Sweden, Khoo et al. (2003) captured this shift in a participant’s response. A Canadian child welfare participant commented that,

We’re no longer in the child welfare business. Child welfare is a term from the '80s. It’s an ‘80s philosophy. And the ‘90s pretty much pounded the work of child welfare into oblivion. So now it’s the child protection business (Khoo et al., 2003, p. 509).
Having limited time to do the work, all workers can manage is to police clients and enforce socially constructed standards of normality. Applying standards about rearing children in families is what Freud (1999, p. 337) indicated child protection workers are supposed to do and that these standards are imposed with little discourse. Clearly, the standards constructed by those with power and imposed on those without are assumed to be better or inherently right. There is no mention in Child Welfare Reform that normality is a social construct and is relative, changing over time and place. When considering a jurisdiction as large and diverse as Ontario, this fails to take into consideration the differences evident in rural versus urban areas, multicultural versus homogeneous areas, northern versus southern areas, poor versus wealthy areas and Aboriginal versus non-Aboriginal areas. Policing of clients is inherent in Child Welfare Reform with its narrow focus on protection, hence children are protected and parents are policed for the greater good of society. Service and assessments focus on families' weaknesses resulting in intrusive responses to minimize risk. Little help is given of a preventative nature, except for the removal of children.

Furthermore, these studies show that direct practice workers experience discord with the manner in which Child Welfare Reform has played out in practice. It seems that the bureaucratization that accompanied the reform is responsible for the changed work. The Ontario College of Social Workers and Social Service Workers Code of Ethics (2000, p. 3) emphasizes advocating change in the best interests of the client, the promotion of social justice and social change (p. 6) and while these are left to interpretation, there seems little time within the tight control of reform to do anything but
the prescribed tasks. It seems logical that workers would express dissatisfaction as a result. In addition, adhering to professional Codes of Ethics was an indicator of good practice in a study conducted by the Canadian Association of Social Workers (2003, p. 11). This study indicated that it is in advocating on behalf of vulnerable families that a shared understanding emerges and this healthy working relationship then leads to good, positive change (CASW, 2003, p. 10). When reform leaves little time for relationship formation, it is little wonder that strategic organizational players emerge. Perhaps this exemplifies Foucault’s notion that “where there is power there is also resistance” (Burr, p. 75, 1995).

Child Welfare Reform seeps into every area of child welfare and has far reaching impacts. Although there have been many changes over time to the legislation which have resulted in minor shifts in practice, none will have a greater impact than these reforms which have encompassed both policy and practice in attempt to prevent child deaths. What the Ministry neglected to recognize with this swing of the pendulum were results of a study conducted by the Ministry and released in 1979 that indicated,

The child welfare system cannot assume responsibility for all the ills inflicted on children in society and yet it is expected to do so. Unfortunately the realities of child welfare mean that no system, present or future, can ever guarantee that children will not die (MCSS, 1979, p. 7).

It appears that in a vain attempt to prevent child deaths, practice within CASs changed dramatically. However, Anglin (2001) cautions that we need to remember days gone by, we need to remember history – there is no research to support that in times when child protection becomes more intrusive that we are more effective in eliminating death, injury and emotional trauma. We only need to remember native communities, families and children who saw their children adopted outside and
lived to see the breakdowns and broken lives years later (Balancing the Two Paradigms, §2).

This increase of children in care and the increase of referrals in general is what prompted a study by the University of Western Ontario at the request of CAS of London and Middlesex. This research is said to be the largest child protection research in Canada (Lescheid et al., 2003, p. 1). After review of files in 1995 and 2001, literature review, focus groups and consultation with professionals and researchers, it was determined that this CAS is indeed fulfilling its mandate of protecting vulnerable children (Leschieder et al., 2003, p. 1). It was determined that poor parenting skills, poverty, woman abuse and mental health issues were all factors which contributed to the increase in referrals and admissions to care. It would follow then that community services which were slashed simultaneous to Child Welfare Reform played an important role in fewer referrals and maintaining children in their homes and families.

When examining workers experiences of practicing child protection and social service work amid such organizational changes, fiscal or otherwise, it is obvious that the experiences are not unlike those of workers on assembly lines. The work is wrought with Tayloristic business principles aimed at efficiency and cost containment. For workers this has meant a standardization and routinization of work and work done in a reductionistic and thoughtless manner. This change in work processes and subsequent curtailing of professional judgment has raised concern for the deskilling or proletarianization of social work. Additionally, worker's experiences seem to include tensions on many levels both within child protection and within the newly created forensic work environment. The narrow focus on protection and simultaneous bureaucratization of social work that came
with Child Welfare Reform is concerning given that social workers historically have worked in child protection agencies and this work is often with people on the margins of society. Furthermore, Child Welfare Reform has raised many questions. One must wonder if the reform, rife with accountability is really about the government being accountable to vulnerable children and their families or a means of appeasing the public who scrutinized the system in the first place. As such, there is a real possibility that these changes are merely social control under the guise that reform of the system will better protect children; that the administration of legislation is just another way to control people for the ideological purposes of the government. Is society and the child protection system any better at protecting vulnerable children or are even more children being left at risk to save the few at grave risk? For a human service agency to focus so narrowly on protection and so overtly on dollars, where do children factor on the balance sheet and where are the best interests of the child in all of this? How has intake practice changed and is there room for social work in child protection? The lack of research on the impact of Child Welfare Reform and how the work of intake has been reshaped begs further examination of workers experiences to determine what exactly the reshaping of Intake work looks like and if the reform is just social work by numbers.
CHAPTER 3

The Research

Methodology

This study explored the impact of Child Welfare Reform on intake practice and whether it is social work by numbers; whether there is room to practice social work amid the quantification of the work.

Design

This exploratory study utilized a qualitative design influenced by a Grounded Theory approach. Grounded Theory according to Glaser and Strauss (1967, p. 1) is the "discovery of theory from data which is systematically obtained and analyzed in social research" (p. 1). This theory then unfolds via a back and forth type relationship between data analysis and data collection referred to as "continuous interplay" by Strauss and Corbin (1998, p. 273). In addition, this research was informed by my knowledge gained in my direct practice position of child protection worker at a Children's Aid Society. I am aware my experience influenced data collection and ultimately those experiences I sought to explore.

Sampling

Theoretical sampling, the selection of people for a specific reason, hence a controlled way to collect data (Glaser & Strauss, 1967, p. 45) occurred after approval was
given by the McMaster University Research Ethics Board as this research involved human participants. This exploratory research utilized a snowball sample of key informants throughout Ontario. Key informants are according to Schwandt (1997, p. 78) individuals who hold a unique perspective and are articulate about their substantial knowledge. Names of other possible key informants were gathered from the first contact with an informant, hence a snowball sample resulted which is appropriate for exploratory purposes such as this study (Rubin & Babbie, 1997, p. 271). These key informants had first hand knowledge about how the work of intake child protection has been impacted by Child Welfare Reform and about social work values. As such, this purposive sample allowed for what Ritchie and Lewis (2003, p. 78) referred to as a “detailed exploration and understanding” of this change to the work of child protection. These informants were selected specifically because it was believed they had information regarding these institutional changes in child protection and were willing to share that information (Rubin & Babbie, 1997, G4).

Informants were contacted by e-mail and telephone, advised of the study and asked if they were interested in participating. A date and a time were arranged for the interview to occur and a Letter of Information was e-mailed to them that outlined the research study. Please refer to Appendix 1 entitled Information Letter. Informants were assured of confidentiality and anonymity and their consent to participate was obtained prior to commencing the research. Please refer to Appendix 2 entitled Consent to Participate in Research. The sample understood they were participating in research exploring the impact of Child Welfare Reform on intake practice. All informants were
thanked for their participation and as reciprocity, were offered a summary of this research at its completion.

Data Collection

Data was collected via interviews. Each interview was conducted at a location convenient for the informant and at a location to ensure maximum comfort and confidentiality. Informants were advised of my academic credentials and my previous research experience. The informants were again explained the purpose of the research and I asked for permission to audiotape the interviews. Informants were advised that all transcripts would be coded and that their names would not be placed anywhere on the documents. Informants were reminded they could stop the interview at any time without penalty.

Questions regarding demographic data were asked first. This contextual information included questions about educational background, current position, previous child welfare positions held, length of involvement in social work and length of time at a CAS pre and post Child Welfare Reform. Please refer to Appendix 3 entitled Interview Guide, Questions Requesting Demographic Data. Instrumentation included an interview guide that provided a broad range of topics to explore (Ritchie & Lewis, 2003, p. 115). This guide was composed of well-phrased, open-ended questions designed to promote discourse of experiences, insights and understanding of the impact of Child Welfare Reform on intake practice. Semi-structured interviews using iterative probes (Ritchie & Lewis, 2003, p. 152) occurred to achieve a fuller understanding of informants’
experiences. Interviews followed a semi-structured research guide composed of questions regarding informants' experiences with Child Welfare Reform and intake practice. Please refer to Appendix 3, Interview Questions. Questions initiated conversation about what Child Welfare Reform achieved, the fit between the changes and social work values, changes in the way work is undertaken, questions about benchmarks and the quantification of the work and about the effectiveness of their work. All informants were then given the opportunity to add anything they felt was relevant to my research.

In keeping with the inductive, comparative methods of a Grounded Theory approach (Rubin & Babbie, 1997, p. 375) an iterative process was used to test ideas in subsequent interviews as such, each interview built on the previous interview so the perceptions and experiences articulated by the informants could be better understood. This also led to increased richness of the data. Notes were taken throughout the interviews and observations were recorded. These memos were written to capture ideas during the interview and were helpful in extracting themes and meaning from informant’s spoken words (Glaser & Strauss, 1967, p. 108).

Data Analysis

Interviews were transcribed verbatim by myself and grammar was fixed. Each informant was given a copy of their transcript to review and was asked to make any changes, clarifications or omissions of their choosing. Each interview was then analyzed for themes by using NVivo, a computer software package for this purpose. A line by line analysis was completed from which ‘trees’ were created that were possible themes.
'Nodes' were then created within the 'trees' in support of the themes. This coding of the data involved searching for common themes and an overarching story in the data. The emergent themes were reflective of the data and logically consistent with the data (Law, Stewart, Letts, Pollock, Bosch & Westmorland, 1998, p. 7) and helped to tell the bigger story.

**Findings and Discussion**

**Sample Characteristics**

This sample was comprised of six informants. Information was gathered via interviews. Five of the interviews took place in a face to face meeting and one took place over the telephone. The interviews lasted between 40 minutes and two hours with one hour being the average. Demographic data indicated that all six informants had a university education with half holding a Bachelor of Social Work qualification. Five of six informants held multiple degrees and four of six had completed post graduate work. These informants were experienced in child protection, having practiced before and after implementation of Child Welfare Reform and had held numerous positions within the Ministry and the field itself, including that each had experience with direct practice. Throughout conversations with the informants, it was evident that the work of each informant was well grounded within social work values and that each had considerable social work skill. To ensure confidentiality of the informants in this study, all quotations and data have been referenced generically.
Qualitative Themes

The core theme that emerged from this research is that there is concern for the implications of the narrow focus on child protection central to Child Welfare Reform. The following six key themes that emerged all support this core theme. The six themes and their supporting components include firstly, the altered context of practice where components of a political presence, an unfinished process, a tattered welfare state and a changed institutional psyche were evident. Secondly, the shift in practice theme included components of loss of relationships and the volume of work. Thirdly, a theme regarding social work values included components of the importance of these values and concern for turnover. Fourthly, a theme of strategic organizational playing emerged where a pushing back against bureaucratic expectations was noted. Fifthly, children in care emerged as a theme with components of concern regarding the increase of children in foster care; foster home placement and focus on adoptions. Lastly, a theme regarding service effectiveness emerged where informants could not say with certainty that the changes have been effective or that children are better protected.

Altering the context of practice: Unfinished business or monkey business?

Informants spoke of the political context of the Child Welfare Reform, that the changes are reflective of the neo-liberal conservative government of that time and also that there was not, nor is there necessarily a great deal of political will within government to stick with the changes. This theme was supported by four components that emerged
including; a field driven by politics, an unfinished process, a tattered welfare state and institutional psyche.

The first component of this theme is the political nature of reform, that this field is driven by politics. Informants in this study were aware of the lingering presence of the neo-conservative ideology. When asked about their experiences with the recent Child Welfare Reform, informants described their knowledge of the creation of reform and their knowledge about the changes. All informants were aware that Child Welfare Reform came as a result of the inquests into the deaths of children having CAS involvement. One informant took the process back a step further adding,

I really believe Child Welfare Reform would not have happened had it not been for the high level of attention paid to child welfare deaths and I say that because it was not on the agenda of the Common Sense Revolution to focus on anything related to child welfare except to cut resources (Informant).

Informants spoke of a field driven by politics and how Child Welfare Reform fit with the government’s neo-conservative ideology so that “there was lots of attention and lots of money available for it” (Informant). However, one informant speculated, had the child welfare system been given the money under the previous system “we probably could have done a better job than with the reform, but the reform did bring that 400 million to the system” (Informant). One informant commented that the Ministry had a view to reform that they needed to get rid of “dead wood in the system that they were paying for and there’s no business of the state being in family’s homes longer than they’re supposed to be” (Informant). This seems to be another example of the irony Weber (Elwell, 1996, §15) noted about the irrationality of bureaucracies, that while attempting to be less involved and invest fewer dollars in child protection, the
government has ended up being more involved in families' lives and investing far more money.

Many described the political driving of the field as the swing of the pendulum. One informant indicated that child welfare was not unlike other fields in the early stages of evolution where “there’s lots of tooting and froing until we get better, we know more, we get more information on best practice, on research” (Informant). This informant added that we haven’t found something that works hence the swing from “very least intrusive family rights kind of based approach right over to the intrusive, state intervention law and order kind of approach” (Informant). Another indicated that we “have more propensity than any other field to go from one end of the pendulum to the other; we just don’t know how to settle in the centre” (Informant).

A second component with respect to the context of practice emerged when informants spoke of reform as an unfinished process with milestones and goals evolving and there was concern about the evolution of reform having come to a halt. One informant expressed this by noting,

Any government that imposes reform has to remember that it’s a work in progress; that reform needs constant monitoring and assessment and change and needs to respond to the needs of its consumers and that’s the client and the frontline workers (Informant).

There appears little faith in the neo-conservative government since they “bailed out once they initiated it and we’ve been stranded” (Informant).

Informants gave mixed descriptions of their experience with reform as “an adventure” (Informant); “it’s been hell” (Informant), and “a headache” (Informant), regarding the changes to a narrower focus on child protection. Informants also identified
positive aspects of reform such as consistency in terms of funding and standardized tools and a greater emphasis on the child as the client.

The interviews revealed the enormity of changes and the difficulty associated with the process of change brought by reform. Informants spoke of the system mushrooming out of control and being bombarded with cost-control changes, yet there was concern reform may have stalled. The promise by government to revisit reform, legislation and the funding framework were seen by informants as important elements of a reform process and there was concern this had been neglected. One informant indicated,

"the reform never really stopped, although it appears the last government thought it did. It seems the previous government took the position that it’s in place, you got what you wanted so what are you complaining about ...as soon as they realized the price tag attached to it was so high they backed out. So when you say Child Welfare Reform...they imposed this model from 1997 to 2000 and they abandoned ship...so reform happened within a very short period of time (Informant).

There was also concern the recent change in provincial government in Ontario was not likely to change the inertia seen in reform. One informant offered that already the new provincial Liberal government was not listening to suggestions about cost effective ways of running the system and reported, “I’m hopeful that the Liberal government is going to take a critical look at it, but already they’ve started to act like the Conservatives” (Informant).

The third component that emerged in support of the altered context of practice included the difficulty of working to protect children in a tattered welfare state with diminished social services. The increased focus on child protection rendered by Child Welfare Reform provided an ideological fit with the previous neo-conservative
government, which sought to reduce the size of government and government spending while investing heavily in ‘law and order’ areas. As such, informants noted child protection secured large increases in funding over the time frame of reform while other social service sectors saw drastic cuts to funding. While child welfare advocates may appreciate the increased attention and funding which accompanied reform, the cuts imposed on the social services in general concerned informants of this study. As one informant recognized, “money was taken away in other shapes and forms from the social network for clients so clients haven’t benefited from it” (Informant). Another expressed concern about how the cutting back in some of the other services and their availability to families at risk in the community was actually growing the need for child protection, …not the least of which was the government’s reduction of welfare support by 22%; the cutting back in some of the other services and their availability to families at risk in the community. All those things, I mean, child welfare can’t protect children alone and you know the research is pretty clear that things like poverty, unemployment, the fact that you’re a single parent, drug and alcohol problems, mental health problems are risk factors but the resources available to actually support families who are encountering those risks haven’t kept pace with the demand. In fact, I would say they are probably less than they were ten years ago” (Informant).

Additionally, the informants identified the disparity of funding between service agencies as a cause for concern. The growth of child protection was felt by informants to be seen as having come at the expense of the ability of other organizations to respond (Informant). Informants expressed concern the funding disparity has led to animosity toward child protection and that this might be a barrier to building community partnerships to support clients.
A fourth component that emerged regarding the context of practice was of institutional psyche, of how much information about reform workers really need to know. While informants were in agreement that most direct practice workers in intake were aware of the 12.5 hour benchmark there was tension between responses of just how much information these workers ought to have. One informant indicated “Yeah definitely we’re numbers driven now; everybody knows from frontline up and down that they get 12.5 hours for this, 5.5 hours for this … everyone is really thinking numbers, numbers, numbers” (Informant). This changed way of thinking was exemplified by responses of “the whole thing is based on one formula after another and I think it has trickled into the psyche of our staff” (Informant) and again, “workers feel they must have the mentality of go, go, go let’s get it done, let’s just do it” (Informant). Conversely, it was mentioned that when workers have that information, practice is negatively affected as exemplified in one informant’s response,

It is the management’s job to wrestle with the Ministry around the 12.5. It is never a frontline worker’s responsibility to worry about the dollars or the number of hours; it just isn’t. That is wrong. It interferes with their work and that’s when you get best practice not being implemented…I try my damnest to keep that information as far, far away from the worker as I can” (Informant).

These components exemplify the changed context of practice as a result of Child Welfare Reform. They are concerning in that these political shifts give workers no grounding in understanding how to do their job. Having fewer community resources to support clients makes the work more challenging by further narrowing the scope of that work and exemplifies that the work is susceptible to political whim. It is concerning that the process is unfinished and that there are no services within child protection of a
preventative nature. Essentially this means that client problems may never be fixed and that there will continue to be more and more protection concerns which will justify more forensic work. Not attacking the root causes of client's difficulties is strictly a law and order mentality, where there is money for policing and risk reduction but when those costs become too much to bare, the process is left hanging. The political underpinnings of the government that initiated this change are toxic to those who must do the forensic work within a system which offers families little more than an investigation. If the ideology of the government was to not monkey in people's lives then the least they could have done was offer families something to sustain themselves.

_Altering practice: Narrower focus of protection_

The theme of altering practice regarding the narrower focus on protection emerged as informants spoke of the changed work since reform implementation. No longer is the work just that of child protection but with new emphasis on the protection of children the work itself has changed. This theme was supported by two components; the loss of relationships and the volume of the work.

The first component of this theme identified a loss of relationship and subsequent processing of people with the change from child welfare to child protection. Informants identified standardization and workload as significant factors; as the culprits. Informants noted that the work is more forensic due to the intrusive nature of protection, time constraints and standardization and accountability. Informants indicated that the work was not a client-friendly or preventative but more adversarial and involved more court
work. Informants spoke about standardization, consistency and accountability using words to describe their work such as “linear” (Informant), “prescriptive” (Informant), “mechanistic” (Informant), “formulaic” (Informant), “rule driven” (Informant), “intrusive” (four Informants) and “accountable” (three Informants).

It was suggested that the reform was creating “technicians” (Informant), people who are ticking boxes and are compliance driven, rather than social workers and this raised concern for the loss of clinical skills. Also on the minds of informants was concern about accountability and compliance and concern was expressed that this is driving the direction of practice. Informants expressed concern that the “rules can take over and investigating workers become interrogating workers” (Informant). As one informant said, “because we have to be so within our guidelines, because we’ve got to meet compliance and you didn’t meet the standard you lose touch with what you’re trying to do clinically” (Informant). Informants spoke about the importance of compliance under reform and increased accountability for workers and supervisors and that there was some comfort in the worker-supervisor consultation and in the process. However, concern was also raised that the standards and timelines cause stress that the work might be done too quickly, and that in haste, something would be missed. As one informant put it,

Even with all the tools I worry that I closed this file too soon; that I didn’t ask all the right questions and do I get a chance to go back a second time? Probably. Do I get a chance to go back a third time? Not likely because of all the time constraints. That’s always been a scary thing but now that you’re just processing families and not doing social work, that to me is the scariest” (Informant).

A second component that emerged regarding the changes to practice was the increasing volume of work. Informants described their work as being rushed and raised
concern that the rushed work was leading workers to use shorthand ways of speaking about clients, issues and processes. “Everybody who has practiced since reform talks that one language, and those of us who’ve been in both systems are saying, oh my God, we’ve lost track, we’ve lost them” (Informant). The use of this shorthand was seen to be depersonalizing and highly problematic. Rushing was felt by informants to being a disservice to clients since there is little time to engage clients and there was worry as expressed by one informant, “that people don’t get the feeling that you really care, when you really do” (Informant). This was echoed by another informant who worried that “the net effect is that sometimes the work at the front door feels very cursory to families” (Informant). Additionally, there was concern expressed that “clients are picking up on this rushing” (Informant). Across the board, all informants identified that the 12.5 hour benchmark was simply not adequate to engage clients; that the funding formula isn’t giving enough time to “realistically do the whole job” (Informant). One informant put this benchmark into context by adding,

12.5 hours, I could use this in one day on a complicated investigation; it’s one day; that’s not counting the paperwork. That’s the phone calling, the interviewing, work easily on a case you get in the morning and you’re out till 7 or 8 at night. It’s just not enough time (Informant).

Informants raised concern that the rush to close files meant that cases were “recycled” (Informant) in intake, in that files were closed so quickly the same families often came back to intake a few months later with the same or similar issues and assigned another worker.

These components exemplify that the practice of child protection in intake has changed since Child Welfare Reform. These findings parallel and support those of studies
mentioned earlier regarding restructuring and changed work processes, particularly that of Aronson and Sammon (2000), Heinonen et al. (2001); Regehr et al. (2002); Riffe and Kondrat (1997); Savage and Way (2000) and Sulman et al. (2001). The bureaucratization of the work is evident in informant’s reports of more forensic, compartmentalized, reductionistic and Taylorized work. This means that any compassionate human component is being replaced with thoughtless process. Regardless of how the work is carried out, we must not forget that this work is work with vulnerable people. All too easily we can forget we are working with people, particularly when we are consumed by rigid, technical processes and are trying to move through increasing caseloads. I think these findings mean that on the surface, this field is at risk of becoming totally proceduralized and that the workers are at risk of proletarianization, particularly technical proletarianization, the loss over the process (Fabricant & Burghardt, 1992, p. 89) due to the routinization resulting from the prescribed work, the template application and workers have no control over the prescriptive nature of this work. This theme supports the overarching theme of this study in that there is concern that a focus on protection is just too narrow; that children and families could be better helped if there were not cookie cutter type templates to slot people and problems into.

*Social work values*

This theme regarding social work values emerged from the data in that informants expressed concern for the skill set necessary in helping people. It emerged from the tone of the interviews in which ambivalence was expressed about the presence of such
managerial practices in a human service and it emerged with respect to informants speaking to concerns about changes in the field. This theme was supported by two components, social work values themselves and turnover.

Social work values emerged as a component particularly with what appears to be discordance between social work values and Child Welfare Reform. When asked about how Child Welfare Reform fit with social work values, all informants paused, two asked to revisit this question later and one quipped, “Am I doing social work? No. I’m being a corporate puppet” (Informant). Some informants indicated that Child Welfare Reform does not fit with social work values, as exemplified by numerous complaints to agencies and many worker changes. In contrast, another informant indicated that the two “aren’t necessarily antithetical” (Informant), but that the approach of the worker can make a difference (four Informants). Another informant saw the tension between social work values and the Child and Family Services Act as the “nature of the beast” (Informant), but also saw having trained social workers doing the task-oriented work as “the safety valve” (Informant). This was echoed where informants indicated that the chances of success with a client were much greater when basic social work skills and values are brought to the relationship (two Informants). Informants did not see having a BSW or MSW as a prerequisite to doing child protection, but saw having concern for the well being of others and having social work values as necessary for doing the job justice.

The second component that emerged from the data was the concern for turnover. Some of the informants also clearly connected this tension between social work values and the work of child protection with worker satisfaction and high staff turnover. The
work was seen as too task focused to give workers a true sense of satisfaction from a social work perspective and there was concern that the pace of work, going from one crisis to another, putting out fires and always being behind was a risk factor in worker burnout. One informant captured it like this:

Anybody with a BSW is and out of this system really fast because it’s not what they want to do. They don’t want to be policing agents, because that’s what we’re doing – we’re policing and that’s what this system was designed to be – policing (Informant).

Bringing social work values to the job, besides being seen as beneficial to the client relationship, was acknowledged as critical to the satisfaction of the social workers in the field. As one informant said, “you try to keep yourself in there – the person you are, the social worker you are – you try to keep that intact with all of the pressures from the outside” (Informant).

These components exemplify that espousing the traditional values of social work is advantageous in child protection. While the work of Steib and Whiting Blome (2003, 2004) found social work education beneficial to client outcomes, I would argue that practicing the values and weaving them into the protection work is as advantageous as having the educational qualification. Acknowledging the importance of social work values in this work is important since the work is more intrusive and forensic given its narrow focus on protection and its bureaucratic underpinnings. Hence the concern for turnover is legitimate given the statistics from the literature discussed. That informants were, after some thought willing to discuss social work values instilled hope that all is not lost to policing, that social work is still alive in child protection and that there is a place for it, however small that may be. This theme supports the informants concern for the
implications of Child Welfare Reform in that social work values are advantageous when working with people and have been affiliated with child protection since its beginning and to lose them would be further tragedy.

Strategic organizational playing and manipulation

Strategic organizational playing, a well intentioned form of manipulation emerged as a theme from the interviews on three levels; as a means of getting clients what they needed, getting the agency what it needed and in the field as a whole getting what it needed. It was almost as if Child Welfare Reform was a game and the informants, forced players. This theme was evident when one informant described these actions by stating,

my whole life, I found a way – even without legislation – to protect the kids I really felt needed protecting and I’ve always believed I should take the steps my practice wisdom tells me I need to take and if I need to apologize for it later, or fail in court, that’s OK” (Informant).

Strategic organizational playing was also implied by another informant in discussing the “hard decisions” (Informant) around doing the extra things that might make sense for a particular family, even when there is no financial compensation for the agency.

These perspectives reflected the view that pushing back was both good for the work and the worker. Sometimes this pushing back was explicit, other times implicit in the interviews. Along these lines, informants mentioned the increasingly important role of unions in shaping the work, in particular through bargaining hard to address workload issues (three informants). Implicit in another informants response was how the agencies are pushing back in choosing to be involved in situations for which they do not receive funding but that they believe is a good place to invest and hopefully the dividend will be

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a healthy, non-adversarial relationship and that the child won’t be in dire need of protection. An informant gave an example of pregnant women as an area where CASs invest resources when there is no incentive because it is hoped that at the time of the baby’s birth there is a working relationship established and apprehension won’t be necessary (Informant). However, this informant was quick to point out that there isn’t room for this “prevention to be an overwhelming piece of work” (Informant).

These findings parallel and support those of Aronson and Sammon (2000) with what they referred to as “organizational tinkering” and Lewis (2003) in her reference to “various little patchwork things” (p. 6). Workers know this pushing back against bureaucracy is temporary but derive satisfaction in knowing they are doing the best they can for their clients. Perhaps the biggest example of this is the manner in which the child protection system catapulted to the attention of the public when news of child deaths was emphasized; that every move was strategic to avoid the chopping block of the neo-liberal conservative government as they set about their cost cutting measures. It was evident that these informants cared about the people with whom CASs work and would go the distance to help their clients. This strategic subversion means that ideological proletarianization, the conception of one’s work (Fabricant & Burghardt, 1992, p. 89) is not about to happen anytime soon and this is encouraging because there is hope that workers will maintain their ideological perspective and that it will be firmly in place for the next swing of the pendulum. This leaves a question about why the recent provincial audits were halted. If the results were terrible, is this due to poor worker adjustment or is it confirmation of the existence and effectiveness of strategic organizational players
which of course do not fit with managerialist ideology? It would make sense from a human level that if compliance was very poor, that workers were taking the time to treat clients they way they would want to be treated.

The theme of strategic organizational playing supports the overarching theme regarding concern for the implications of Child Welfare Reform in that workers appear to be fighting back against the rigidity of this changed human service. This would imply that informants are fighting back against something; are doing the things, however small, they believe will make a difference in people’s lives.

*Children in care: We care*

The theme children in care emerged from the data as informants spoke about what child protection work was all about with its narrow focus on protection and about the renewed focus on the child as client. This theme was supported by three components; the increasing number of children in care, foster homes and focus on adoptions.

As a first component, it emerged that it’s irrefutable there are clearly more children in care. Informants clearly expressed concern for increasing numbers of children in the care of CASs throughout Ontario. Informants talked about the misinterpretation of the tools (Informant), particularly the risk assessment model where “risk level is indicative of certain types of intervention” (Informant) and high risk seems to mean bringing children into care to ensure their safety (Informant); fear of scrutiny by supervisors and direct practice workers since “they’re right there after the worker for
scrutiny” (Informant). Lack of supportive agencies in the community and the legislation were also mentioned as contributing factors. As one informant put it,

You always have to keep the kid safe, I’m not arguing about that at all. But I think this lets us off the hook of good quality practice too easily by saying you go out and save the child. That old crap about scooping, this Act sort of supports scooping. I’ve never in my life in child welfare had anything to support scooping like this does. So, that’s my concern about it. So you need very wise practitioners with this Act because it gives them too much license in my view (Informant).

One informant spoke of the emphasis on children as a result of the legislative changes as not a good thing and spoke of literature supporting that children do best in families indicating, “it’s irrefutable … and that if you can make the family a safe place then that’s the best place for the child” (Informant). Another spoke of this focus on the child as better since the client is more clearly identified (Informant). Furthermore, concern was raised that once the children are brought into care, the “emphasis comes off” (Informant). Another informant mentioned that children are supposed to be safe in foster care and then mentioned the growing number of foster home investigations (Informant).

A second component that emerged regarding children in care was the quality and quantity of foster home placements since the number of foster homes has not grown simultaneously with the increasing number of children being brought into care. One informant mentioned a 56% increase in children in care in the past four or five years and a 41% increase in foster homes and, “You do the math, it doesn’t compute, we’re in big, serious trouble and I am tremendously worried; it’s very scary” (Informant). Another informant conveyed concern for the quality and quantity of foster homes for children by indicating,
... we have 18 000 kids in care now compared to 8 000 ... you see, when there were 10 000 kids in care, I wouldn’t give you a plug nickel for the last 1000 beds we had those kids in, group homes and what not. Now, there’s another 8 000 children and youth in beds that didn’t exist five years ago, so I don’t know the quality of life for those kids (Informant).

Furthermore concern was noted about what this lack of homes means for children, that they are placed at great distances from their families, their schools, their communities and that these losses are “disgraceful,” particularly if there is a goal to get them back home (Informant).

A third component that emerged from the interviews with respect to children in care is the emphasis the Ministry has put on agencies to increase adoptions. One informant offered that after nearly “going out of the adoption business” (Informant) pre reform, that now the number of adoptions are up. Another informant expressed concern about Ministry driven incremental incentives to increase adoption targets, indicting that this incentive came from the Conservative government on the verge of the recent election in the amount of $5 000 as a first step for each adoption over the targeted number. This bounty, placed on the heads of vulnerable children was noted by this informant to, “marginalize the poor” (Informant).

These findings are concerning since the number of children CAS foster care across Ontario has increased dramatically. Informants in this study attributed this rise to many things; the change in broadening of the legislation, the loss of other community services simultaneous to Child Welfare Reform implementation and the misinterpretation of the standardized risk assessment tools. These findings are partially supported by Leschied et al. (2003) who indicated that the number of children in care and increase in
referrals to the CAS of London and Middlesex are a result of a number of contributing factors. These contributing factors and their impact might be buffered if there were adequate community services and resources to assist children and families without lengthy and discouraging waits.

As a society we should be concerned about the narrow focus on protection resulting in greater numbers of children in care. Do we want to be creating a 21st century scoop when we already know the lasting and damaging impacts of what came to be known as the sixties scoop? Do we really believe that children in care will fair well when we know they do best in families? Furthermore we should be concerned, as the informants in this study continue to be, for the quality of the foster homes in which children are placed. We appear to be moving toward orphanages once again, with so many group homes and overflowing foster homes. Where are ethics in this? How right is it to remove children determined to be at risk, from their families and homes only to put them at risk in a foster home that has been asked to take an extra child, or a home that is three hours away? In addition, the financial increase for adoptions over a target number is appalling; an adoption target alone is punitive.

The law and order ideology is evident where adoptions are concerned. Parent’s are not given opportunities to better their parenting or work on their own issues to be reunited with their children because those community services are almost non existent. Swift and Callahan (2002) write about the belief held by community workers and child protection workers that, “you mother the mother and you mother the child” (p. 24). To provide the community services would be to have fewer children in care, as the study by
Leschied et al. (2003) indicated. It appears there are concerning numbers of children in care because there are few community services and there is no time within Child Welfare Reform to nurture, or mother the mother. There is financial drain to work with the mother beyond 12.5 hours and financial gain to bring a child into care and to later have that child adopted.

This theme of children in care and its components support the larger theme of the concern for implications of Child Welfare Reform in that these are precious lives we are dealing with. The informants in this study conveyed compassion and caring about the young lives intruded upon and the lack of suitable accommodation as a result of the narrow focus on protection.

*Concern for effectiveness*

The theme regarding concern for effectiveness emerged from the data when informants spoke of not knowing if there was real improvement with the narrowed focus on protection. There was so much change with Child Welfare Reform but has it made a difference and what is the measuring stick by which to check?

Concern for effectiveness emerged as a theme as informants were asked if Child Welfare Reform provided children with better protection and families with better service. Informants spoke of how there were no outcome measurements in place before the reform as a baseline and there are still no outcome measurements. One informant indicated,

*They haven’t really taken a critical look at how it’s working in terms of outcome base; are we doing what we’re supposed to be doing? People can say the*
impression is that there are fewer child deaths but do we know that for sure? Do we know? I don’t know. Are we more effective? I don’t know (Informant).

While each informant mentioned compliance in one way or another in their interviews, half specifically spoke of the halt to the agency audits. One suspected they were halted because the “results were dismal” (Informant) and another indicated the results were “dreadful” (Informant) and out of compliance with the Ministry’s own standards. Another remarked that the audits brought too much of a focus on paperwork and compliance and accountability and workers were “throwing families out for the paperwork” (Informant). One informant clearly spoke of the reform as providing children with better protection (Informant) and more structure to decision making (Informant). One informant remarked, “How can we say better protection when there’s no prevention” (Informant) and another, that reform has “provided children with better, more consistent cookie cutter safety” (Informant). All but one informant indicated that there was no better service to families since Child Welfare Reform. One informant, while uncertain as to the effectiveness expressed hope that the reform provided families with better service (Informant).

These findings point to the lack of available outcome measurements in the field and that despite the many changes to child protection, there is no evidence that the change has worked, that it has made a positive contribution to society by protecting children and their best interests. Informants spoke of outcome measurements in the works and the importance of knowing how the field is doing. Hamilton and Longlade (2003) noted that the emphasis on accountability in the public sector occurred simultaneous to interest in measuring client outcomes in child protection as such has resulted in the Ministry moving forward in creating outcome measurements of effectiveness. It is said
that this system will track client outcomes at the agency and provincial level to ensure Child Welfare Reform is effective in “protecting and caring for children” (Hamilton & Longlade, 2003, p. 44).

This theme of effectiveness supports the overarching theme of concern for the implications of Child Welfare Reform as informants have no real idea if the work is more effective; if more of a difference is being made under the new system. These findings indicate that informants are concerned that things are no better and that deaths of children involved with CASs in Ontario will still occur.

**Conclusion, Strengths, Limitations and Future Directions**

This section will present a conclusion to this study, will present strengths and limitations and will finish with future directions.

**Conclusion**

This study clearly tells a story, one that does not have a fairytale ending for the direct practice workers who do the job of child protection or for the children being brought into the care of CASs in record numbers. The field of child protection must continue to look for ways to maintain the pendulum in the centre, to find a balance somewhere between protecting children while recognizing that children fare best in families; between intrusive and least intrusive; and between authoritarian and authoritative. In addition, the field must be prepared to accept a level of uncertainty in the work so that a balance can be found. News of the death of a child is always tragic, but
society must question if the goal of eradicating child deaths is attainable and at what cost. Is society willing to once again accept a generation of children scooped from their families? Furthermore, the field needs to reconsider community partnerships, to establish trusting relationships for the sake of the children so that their families might be made safer and children can be maintained in their homes.

While business principles of accountability and standardization can be good things, the extent with which they are embedded in reform is questionable. It appears that a reshaping of the work of intake has occurred with Child Welfare Reform. The quantification of the work, in terms of formulae, benchmarks and standardization and the focus on compliance and accountability appear to have altered its execution with the exception of those individuals who, while practicing child protection continue to hold true to social work values as strategic organizational players. Workers are more likely to become subject to technical proletarianization while it seems there is no sign of successful ideological proletarianization resulting from such a narrow focus.

The informants in this study spoke of caring and of concern for the implications of the narrow focus on protection. This exploratory study has concluded that intake practice has changed; that it has been altered and that it is largely child protection by numbers with social work happening despite the numbers — just not to the satisfaction of anyone involved.
Strengths and Limitations

Although influenced by a Grounded Theory approach, a full Grounded Theory was not realized from this study as the small sample size did not permit saturation of the data. However, the small sample size allowed for deep exploration of the issues of interest. This study could benefit from a greater number of interviews to obtain a broader range of experiences and richer data about the impact of Child Welfare Reform on intake practice. The informants in this study were deliberately selected for their substantial knowledge of the child protection system and for their understanding of the work itself. These informants knew what to get for their clients and how to get it. It is not known with certainty that there are strategic organizational players in every agency, in every jurisdiction and it will be a loss for children and families when these informants leave the field or move on unless they have opportunities to mentor this tinkering with the best of intentions. Lastly, the findings of this study would be strengthened with the addition of a quantitative component.

Future Directions

This study uncovered a fair measure of agreement between the informants and previously reviewed studies regarding organizational change and changed work processes. This area is deserving of future research to ensure the child protection system in Ontario is offering the best service possible to children and families. Since informants in this study showed interest in knowing if Child Welfare Reform accomplished what it set out to do, the deaths of children since January 1, 1998 need to be tracked and studied.
to determine the effectiveness of the narrower focus on protection. Parent or caregiver satisfaction would be a worthwhile area to study given that CASs are involved with more families than ever before. In addition, a measurement and study of stress levels of direct practice workers and foster parents would be worthwhile since there are more children than ever coming into the care of CASs since Child Welfare Reform. A review of all foster home investigations throughout the province would be a helpful addition in determining whether children are being relocated to safer environments. Furthermore, a longitudinal study of the children with whom CASs have involvement would provide a measure of effectiveness of this narrow focus on protection. In addition, there is a sense of urgency from the findings of this study, that additional research occur promptly given that the number of children in the care of CASs in this province continues to climb.
REFERENCES


Anglin, J. (2001). *Child welfare reform and the CFSA amendments: Towards a more intrusive service; “Just because we can, doesn’t mean we should.”* University of Victoria, Canada.


APPENDIX 1
INFORMATION LETTER

THESIS TITLE: The Impact of Child Welfare Reform on Intake Practice: Social Work by Numbers?

RESEARCHER:
Crystal Sitzer
Graduate Student
School of Social Work
McMaster University
Hamilton, ON, L8S 4M4
905.525.9140

RESEARCH SUPERVISOR:
Dr. Gary Dumbrill
Assistant Professor
School of Social Work
McMaster University
Hamilton, ON L8S 4M4
905.525.9140 ext. 23791

Purpose of the Study

This research is being undertaken to gain insight into the impact of the Child Welfare Reforms on Intake practice.

Procedures

The researcher will meet with each of the participants for an interview lasting between one and two hours in duration. These interviews will be audiotaped and later transcribed.

Participants will be asked a series of questions pertaining to Intake practice and the Child Welfare Reforms such as:

1. What brought you to child protection work?
2. Tell me about your experience with the recent Reforms in Child Welfare.
   • What prompted the Reforms?
   • What do the Reforms achieve?
   • Have the Reforms changed the overall nature of Child Welfare work?
3. How do the Child Welfare Reforms fit with Social Work values?
4. In what specific ways have the Reforms changed your work?
   • Can you give examples of other specific changes in your work?
5. Has the way work is quantified changed with the Child Welfare Reforms?
   • How does this shape the way work is done?
6. Under the Reforms, the funding benchmark for an Intake investigation is set at 12.5 hours. How does this shape the work now?
   • Has this benchmark changed the way investigation is undertaken? If so, how?
   • Has the benchmark changed the ways other services at intake are undertaken? If so, how?
7. Is there anything else you could tell me to help me understand how the Reforms have changed your work or Child Welfare work?
   • What is it like practicing social work after the Reforms?
   • Have the Reforms made your work more effective?
   • Have the Reforms provided children with better protection?
   • Have the Reforms provided families with better service?
8. Is there anything else you would like to share with me that you feel is relevant to my research? Are there any questions you think I should have asked?

A written summary of the research will be provided to individual participants at their request.

Potential Risks and Discomforts

There are no known risks associated with participation in this study. The researcher is attempting to gather rich data about the impact of the Child Welfare Reforms on Intake practice.

Potential Benefits

Participants will receive no direct benefits from taking part in this research although they may gain a better understanding of the impact of the Child Welfare Reforms on Intake practice. There is opportunity for the participants to share experiences, insights, ideas and concerns and to reflect on the impact of the Reforms. Benefits include the opportunity to reflect on changes in Intake practice and contribute to the profession.

Confidentiality

To protect confidentiality, audiotapes will be stored in a locked cabinet at McMaster University or when being analyzed off-site, kept in a locked cabinet in the researcher’s home. Tapes will be destroyed after two years and transcripts will not have participants names on them or identify them and will be destroyed after ten years.
Participation and Withdrawal

Participants can choose whether to be involved with this research or not. Participants volunteering to be involved may withdraw at any time without consequence of any kind. Participants may also refuse to answer any questions and still remain in the study.

Rights of Research Participants

Participants do not waive any legal claims, rights or remedies because of their participation in this research. This study has been reviewed and received ethics clearance through the McMaster Research Ethics Board (MREB). Questions about the project can be directed to Crystal Sitzer at 905.525.9140. Questions regarding the rights of research participants can be directed to:

MREB Secretariat
McMaster University
1280 Main Street West, GH 306
Hamilton, ON
L8S 4L9

Telephone: 905.525.9140 ext. 23142
E mail: srebsec@mcmaster.ca
Fax: 905.540.8019
APPENDIX 2
CONSENT TO PARTICIPATE IN RESEARCH

THESIS TITLE: The Impact of Child Welfare Reform on Intake Practice: Social Work by Numbers?

You have been asked to take part in a research project by Crystal Sitzer a MSW Student at McMaster University, Hamilton. If you have any questions or concerns about the research, please feel free to contact:

RESEARCHER:
Crystal Sitzer
Graduate Student
School of Social Work
McMaster University
Hamilton, ON, L8S 4M4
905.525.9140

RESEARCH SUPERVISOR:
Dr. Gary Dumbrill
Assistant Professor
School of Social Work
McMaster University
Hamilton, ON L8S 4M4
905.525.9140 ext. 23791

Purpose of the Study
This research is being undertaken to gain insight into the impact of the Child Welfare Reforms on Intake practice.

Procedures
The researcher will meet with you for an interview lasting between one and two hours in duration. These interviews will be audiotaped and later transcribed.

You will be asked a series of questions pertaining to Intake practice and the Child Welfare Reforms such as:

1. What brought you to child protection work?
2. Tell me about your experience with the recent Reforms in Child Welfare.
   • What prompted the Reforms?
   • What do the Reforms achieve?
   • Have the Reforms changed the overall nature of Child Welfare work?
3. How do the Child Welfare Reforms fit with Social Work values?
4. In what specific ways have the Reforms changed your work?
   • Can you give examples of other specific changes in your work?
5. Has the way work is quantified changed with the Child Welfare Reforms?
   • How does this shape the way work is done?
6. Under the Reforms, the funding benchmark for an Intake investigation is set at 12.5 hours. How does this shape the work now?
   - Has this benchmark changed the way investigation is undertaken? If so, how?
   - Has the benchmark changed the ways other services at intake are undertaken? If so, how?

7. Is there anything else you could tell me to help me understand how the Reforms have changed your work or Child Welfare work?
   - What is it like practicing social work after the Reforms?
   - Have the Reforms made your work more effective?
   - Have the Reforms provided children with better protection?
   - Have the Reforms provided families with better service?

8. Is there anything else you would like to share with me that you feel is relevant to my research? Are there any questions you think I should have asked?

You will have a chance to review the transcript of your tape for accuracy and to mark any statements you would like to clarify or remove.

A written summary of the research will be provided to you at your request.

Potential Risks and Discomforts
There are no known risks associated with participation in this study. The researcher is attempting to gather rich data about the impact of the Child Welfare Reforms on Intake practice.

Potential Benefits
You will receive no direct benefits from taking part in this research although you may gain a better understanding of the impact of the Child Welfare Reforms on Intake practice. There is opportunity for you to share experiences, insights, ideas and concerns and to reflect on the impact of the Reforms. Benefits include the opportunity to reflect on changes in Intake practice and to contribute to the profession.

Confidentiality
To protect confidentiality, audiotapes will be stored in a locked cabinet at McMaster University or when being analyzed off-site, kept in a locked cabinet in the researcher’s home. Tapes will be destroyed after two years and transcripts will not have participants names on them or identify them and will be destroyed after ten years.

Participation and Withdrawal
You can choose whether to be involved with this research or not. Participants volunteering to be involved may withdraw at any time without consequence of any kind. You may also refuse to answer any questions and still remain in the study.
Rights of Research Participants
You do not waive any legal claims, rights or remedies because of your participation in this research. This study has been reviewed and received ethics clearance through the McMaster Research Ethics Board (MREB). Questions about the project can be directed to Crystal Sitzer at 905.525.9140. Questions regarding the rights of research participants can be directed to:

MREB Secretariat
McMaster University
1280 main Street West, GH 306
Hamilton, ON L8S 4L9

Signature of Research Participant
I understand the information provided for the study “The Impact of the Child Welfare Reforms on Intake Practice; Social Work by Numbers?” My questions have been answered to my satisfaction and I agree to participate in this study. I have been given a copy of this form.

Name of Participant ____________________________ Date ____________________________

Signature of Investigator
In my judgment, the participant is voluntarily and knowingly giving informed consent and possesses the legal capacity to give informed consent to participate in this research study.

Signature of Investigator ____________________________ Date ____________________________
APPENDIX 3
INTERVIEW GUIDE

THESIS TITLE: The Impact of Child Welfare Reform on Intake Practice:
Social Work by Numbers?

RESEARCHER:  
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905.525.9140

RESEARCH SUPERVISOR:  
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Assistant Professor  
School of Social Work  
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Hamilton, ON L8S 4M4  
905.525.9140 ext. 23791

Questions requesting demographic data:

1. What is your educational background?
2. What is your current position?
3. What previous Child Welfare positions have you held?
4. How long have you been involved in Social Work?
6. How long have you worked in Child Welfare since the implementation of the Reforms?

Interview questions:

1. What brought you to child protection work?
2. Tell me about your experience with the recent Reforms in Child Welfare.
   • What prompted the Reforms?
   • What do the Reforms achieve?
   • Have the Reforms changed the overall nature of Child Welfare work?
3. How do the Child Welfare Reforms fit with Social Work values?
4. In what specific ways have the Reforms changed your work?
   • Can you give examples of other specific changes in your work?
5. Has the way work is quantified changed with the Child Welfare Reforms?
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6. Under the Reforms, the funding benchmark for an Intake investigation is set at 12.5 hours. How does this shape the work now?
   • Has this benchmark changed the way investigation is undertaken? If so, how?
   • Has the benchmark changed the ways other services at intake are undertaken? If so, how?

7. Is there anything else you could tell me to help me understand how the Reforms have changed your work or Child Welfare work?
   • What is it like practicing social work after the Reforms?
   • Have the Reforms made your work more effective?
   • Have the Reforms provided children with better protection?
   • Have the Reforms provided families with better service?

Is there anything else you would like to share with me that you feel is relevant to my research? Are there any questions you think I should have asked?