Does Using the Tool of 'Safety Networks' in Child Welfare Create Enough Safety So Children Can Remain, Or Return To The Home?

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List of Acronyms

Delegated Aboriginal Agency: DAA

Ecological Systems Theory: EST

Family Centred Approach: FCA

Ministry of Child and Family Development: MCFD

Signs of Safety: SOS

Truth and Reconciliation Commission: TRC

Abstract

This paper will explore if the tool of safety networks in child welfare can create enough safety so children can remain, or return back to the home. My selected research design is a thematic review of the literature using twelve electronic databases that were searched between March 2019 and October 2019 using specific search terms. Through the literature review I was able to locate research regarding utilizing safety networks in child welfare settings. This review resulted in limited research findings; therefore, I drew on a broader range of research literature to support these claims.

The literature review indicated that applying safety networks in child maltreatment cases may help in the reduction of re-maltreatment after case closure and showed some promise in helping children integrate back into their parent's care after a removal has occurred. Utilizing safety networks could have several implications to social work practice including potentially reducing costs for the child welfare agency by keeping children out of the care system and also reducing social worker burnout. Safety networks may also help children and families reduce the emotional toll of being removed from their parental home due to child welfare concerns. Using safety networks has the potential to diminish current child welfare concerns that have been linked to many negative childhood experiences, and/ or prevent future child welfare concerns from reoccurring after the case has been closed.

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Introduction

I have been working as a social worker at a Delegated Aboriginal Agency (DAA) in the child welfare field for over five years. My main role is dealing with families whose children are not in their home due to maltreatment concerns. The ultimate goal when working with families is to have them address the child maltreatment concerns, and build enough safety into the family so that the children can return home. This goal is supported by the Ministry of Child and Family Development (MCFD) (2015), which states "Evidence shows that, where appropriately safe, keeping families together rather than placing a child into care results in better outcomes overall for these children" (p. 1). This goal is further reflected in the Truth and Reconciliation Commission of Canada (TRC): Calls to Action (2015), which calls on the Federal, Provincial, Territorial and Aboriginal governments to pledge to reduce the amount of Indigenous children in care by providing adequate resources to allow Indigenous communities and child welfare agencies to keep Indigenous families together whenever it is safe to do so (Truth and Reconciliation Commission, 2015). The TRC (2015) explains for over a century the main goal for the Canadian government was to try and assimilate Indigenous people by eliminating their government structures, rights and Treaties. Thus, causing Indigenous people's distinct social, cultural, religious and racial identities to be forever changed or lost. This call to action by the TRC is due to negative intergenerational impacts of colonization resulting in higher rates of Indigenous children being placed in the care system.

Turner (2016) states that there were 14,200 Aboriginal children aged 14 and younger living in foster care in Canada in 2011. The author goes on to say Aboriginal children accounted for 48 percent of all foster children in Canada even though they made up only 7 percent of the overall population aged 14 and under. Therefore, my proposed question is: Can the tool of safety

networks keep children in the parental home when there are child welfare concerns or can it build enough safety using a safety network within the parental home in order for children to be returned back to their parents? For the purpose of this paper, I will be using Nelson, Idzelis, Roberts, and Pecora (2017) definition of safety network as a group of adults which can include, relatives, friends, and other professionals that parents involved in child welfare can be relied upon to support parents and in turn help ensure the safety of their children (p. 1).

When using the tool of safety networks to build safety within the family to address or mitigate maltreatment concerns, professionals are giving the power to make positive changes back to the families. If successfully achieved, this will ideally lead to fewer children coming into care, less financial costs for the child welfare agency, and less reoffending families after case closure. I am taking this opportunity to explore the use of the safety network tool in current academic research to determine if it is effective in creating enough safety within families in minimizing child welfare concerns so that children can remain in the home environment or return back home after removal. I will also explore the social worker's views who utilize this tool in their practice and the impact they feel it has in their practice. In my own practice, I have used this tool within the Signs of Safety (SOS) Model, and would like to further explore the outcomes for families who utilize the safety network tool.

The theoretical frameworks and models that guide my understanding of the current research around the tool of safety networks in child protection cases are the use of Strength Based Practice, Family Centred Approaches, Safety Assessment Framework, Child Centered Approach Brief Solution Focused Therapy, Ecological Framework Model and the Signs of Safety (SOS) Model.

Literature Review

My selected research design is a thematic review of the literature using twelve electronic databases that were searched between March 2019 and October 2019 using specific search terms. These databases included: Academic Search Complete, eBook Collection (EBSCOhost), E-Journals, eBook Academic, Collection (EBSCOhost), ERIC, Primary Search Reference eBook Collection, PsycINFO, PsycARTICLES, SocINDEX with Full Text, Social Work Abstracts, Social Sciences Abstracts (H.W. Wilson) and Google Scholar. Some of the specific terms I used were: safety network or social support, child protective services or cps or child welfare services, social support or social networks or social relationships or social inclusion or social exclusion or social isolation, Signs of Safety, child abuse or child neglect or child maltreatment, alcoholism or substance abuse or drug abuse and mental health or mental illness or mental disorder or psychiatric illness. I trust the validity of the research findings as they were found in academic journals, peer reviewed articles and written by authors who have published significant amounts of material on these subjects.

Using Safety Networks within the Signs of Safety Model (SOS) Model

SOS is the model that most commonly uses the tool of safety networks when working with families involved in the child welfare system. SOS is a practice-based model that is a child protection practice which is grounded in establishing constructive working relationships between children, parents, families, practitioners and workers to create an agreed upon plan to address child welfare concerns. Salveron, Bromfield, Kirika, Simmons, Murphy and Turnell (2015) and Stanley and Mills (2014) explain various tools are implemented in the SOS model including Three Columns Assessment and Planning Framework, Safety Networks, Words and Pictures Safety

Plans and Words and Pictures Explanations (Salveron et.al, 2015; Stanley & Mills, 2014). For the purpose of this paper I will be focusing on how the tool of safety networks is utilized.

Through the literature review I was able to locate research on individual cases studies and sample sizes to looked into the effectiveness of using Safety Networks in the SOS Model. Nelson et. al (2017) conducted a study with findings that suggest safety plans and the use of safety networks may help reduce occurrences of re-maltreatment, but additional research with larger sample sizes will need to be done in order to verify these preliminary findings (Nelson et.al, 2017). Gibson (2014) looked at a case involving an older boy who had been sexually inappropriate with a neighbourhood child. A safety network was created with the older boy and his mother to ensure this type of behaviour would not happen again and to support the older boy to create and follow some safety rules without making the older boy feel that there was something fundamentally wrong with him. Another individual case example was highlighted by Turnell (2004) which involved a mother who physically abused her children, resulting in the children being removed from the mother's care. A safety network and plan were created which allowed the children to be integrated back into their mother's care (Turnell, 2004).

The literature also showed the views of social workers who utilized the safety network tool, which was highlighted by Baginsky, Moriarty, Manthrope, Beecham and Hickman (2017) who conducted a pilot study on social workers and families in ten child welfare authorities in London, U.K. that utilized the SOS Model. The study showed that only 8 percent of social workers utilized safety networks with all of their families and 41 percent reported using them with some of their families with half of the social workers not using them at all in the SOS Model (Baginsky et.al, 2017). In another study social workers did not always see a support

network as a vital piece of child protection work. The participants reported that the network was a potential tool that could be used but was not a necessary tool to help with parental empowerment (Reekers, Dijkstra, Stams, Asscher & Creemers 2018; Stanley & Mills, 2014). Baginsky et al. (2017) study, as mentioned previously, also examined the family's perspective using safety networks within their own cases. A total of 270 families were sampled. The results showed that only one-third of families thought their social worker helped them create personal networks and sources of support. Results also showed that parents had on average fewer than two people whom they considered a support and saw at least once a month. These results highlight that more considerable efforts need to be implemented with parents to help them develop a network that can be used to support them (Baginsky et al., 2017).

In the study by Nelson et.al (2017) the majority of parents viewed their safety network as valuable and spoke about the importance of having close family members and friends in their lives. Parents shared that they could often count on their network to support them, be nonjudgmental, but also be very honest with them. Some parents in the study found it helpful that there was a formal process for creating a network because it helped remove some of the nervousness of asking their network for help. Some shared that before the safety network was created, they had felt nervous when they needed help with their mental health problems, substance misuse or help with their children. In addition, they felt that the network was well-equipped to recognize a crisis if one should occur. Within Ackerson (2003) research the author was able to capture the participants views of their support network. Most participants acknowledged their supports and noted that their relationship to them was often complex. This was predominantly true when their main supports were ex-spouses or family. Participants described their relationship with these supports as good and bad. On one hand many of these

supports provided a good source of financial and child care help, but not always a good source of emotional support for the parent who had mental health concerns (Ackerson, 2003).

Nelson et. al (2017) also captured the voices of the safety network members, which had various views on what it meant to participate as a member of a safety network. Some members viewed their role as keeping the children safe, while others thought their role was to enforce the rules, such as ensuring the parent stays away from drugs. Many members saw their role as a support to the family, mainly providing emotional support to the children and parents. Other members reported their role to be of assistance to the parents with tasks like running errands or looking after the children (Nelson, et.al, 2017).

Child Maltreatment and Safety Networks

Apart from the SOS Model, other studies highlighted the effectiveness of using safety networks in other child protection cases. Chamberland, Lacharité, Clément and Lessard (2015) highlighted that less formal social support was seen as helpful in cases of children who experienced or were at risk of neglect and psychological maltreatment (Chamberland, Lacharité, Clément & Lessard, 2015). Urgelles et al. (2017) found that mothers who are entangled in the child welfare system due to child neglect and drug use were able to reduce their behaviors with the use of supports following the conclusion of treatment. There appears to be a growing abundance of evidence linking social isolation and limited support networks with parents as a significant risk factor for parents to abuse and neglect their children (Gracia & Musitu, 2003; Sidebotham, Heron, Golding, & ALSPAC Study Team, 2002).

A cross-cultural analysis between Columbian and Spanish cultures showed abusive parents have a tendency to be more socially isolated and their attitudes towards formal and

informal support are more negative compared to non-abusive parents (Gracia & Musity, 2003). However, not all studies found positive correlations between having a support network and the reduction or prevention of childhood abuse. Quirk and Rickwood (2015) found few significant associations between level of abuse experienced by young people living in Australia and the quality and quantity of their social support networks. However, Quirk and Rickwood (2015) found evidence that showed young people who had not experienced repetitive abuse reported having a better network in the areas of school and work compared to those who had experienced serious abuse. (Quirk & Rickwood, 2015). Other studies focusing on neighbourhood supports also had mixed results. Maguire-Jack and Showalter (2016) Found that an outcome of support networks such as neighbours in a mid-western county in the United States of America was protective factors with some forms of neglect, like helping to meet a child's basic needs, but not with more complicated factors like parental substance abuse.

In terms of the benefits of using support networks when children are returned back to their parents, research conducted by Balsells et. al (2017) showed when children came back into their parent's care, a social network was needed to aid the parents with unforeseen issues and providing a stable environment for their children after return. It appears that using safety networks in other child welfare cases was seen to be helpful in cases involving neglect and psychological maltreatment and children returning back to their parent's care. However not all studies had a positive correlation between utilizing safety networks and the reduction of child abuse.

Foster Care and the use of Safety Networks

In this section, I explore the utilization of safety networks in the foster care system. Leon and Dickson (2018) conducted a study looking at the children and youth within the Illinois foster care system. This study examined the child/ youth's inner strengths as well as the level/ type of relationship between them and their foster parents as well as their social supports. They also looked at if these were potentially significant factors in reducing maltreatment concerns for these children and youth.

Results of the study showed both low levels of support and high levels of support. The children and youth who had higher levels of social support from foster parents and other informal support appeared to be able to utilize this supportive framework to help with coping and increase overall wellbeing. It also appeared to be a buffer from negative mental health impacts caused by the maltreatment they received before coming into care (Leon & Dickson, 2018). This is important as other research has shown that children in care struggle with a variety of issues and, therefore support networks may be beneficial for the children to alleviate some of these issues while they are in foster care or when they are returned back to their parental home.

In another study by Brown (2008) asked foster parents in a central Canadian province what they needed to feel successful when fostering children. The results showed foster parents who had social support from sources like friends, family from both their own and the foster child's, neighbours and community resources has shown positive outcomes for foster parents. Foster parents also identified the need to get together with other foster families for support and opportunities for foster children to interact with other foster children.

There appears to be limitations associated with the current literature in regards to using safety networks within the foster care system. By reviewing other problematic behaviours often associated with child protection, I was able to draw on additional conclusions of the use of safety networks and how they relate to other fields like mental health, substance misuse and domestic violence.

Mental Health and Safety Networks

The following literature highlights the effectiveness of using safety networks with adults experiencing mental health challenges. Perry and Pescosolido (2015) found that people with secure networks reported better outcomes with their health status than those who had weaker and less consistent network ties. The authors also found that social networks have better influence compared to any particular individual or relationship in the life of the client. This network of key support people of those with mental illness are usually involved early on in the diagnosis, and are strong advocates who are involved with brokering health services and negotiating treatment options (Perry & Pescosolido, 2015). In another study Ackerson (2003) showed that participants with strong support networks were better able to cope with their mental health challenges and valued their network's ability to help them when they were experiencing mental health concerns. Participants who had limited or no support networks were more likely to have had their children removed from their care at least temporarily (Ackerson, 2003). Gelkopf and Jabotaro (2013) researched the benefits of social supports in helping mothers who were diagnosed with severe mental illness which showed that the greater the support network the greater the parents were able to effectively parent their children. Ostberg and Hagekull (2000) conducted research on 1,081 mothers to examine the relationship between social support and their perceived feelings of stress. The results were mixed but did show older mothers who had several children with little

social supports were more likely to self report having more stress in their lives (Ostberg & Hagekull, 2000).

Substance Use and Safety Networks

Safety Networks have been found in the literature to help or hinder parents in their recovery efforts and relapse prevention. Ellis, Bernichon, Yu, Roberts and Herrell (2004) showed that relationships with family members, friends and partners may help in relapse prevention after treatment is completed. Results shared that clients who had positive relationship networks post-discharge were less likely to relapse compared to those who did not. The study also looked at the networks surrounding the clients. The study found that after discharge from treatment, clients who surrounded themselves with people who exhibited negative activity like drug and or alcohol use were more likely to relapse than clients who surrounded themselves with people who did not engage in such negative activities. Results corroborated other studies (Kaskutas, Bond, & Humphreys, 2002; Moos & King, 1997; Gregoire & Snively, 2001) hat showed social support and the quality of the support network play an important role on treatment outcomes after discharge from treatment (Ellis et. al, 2004). This study also had similar findings about negative social networks, parental drinking and inappropriate physical discipline.

Freisthler, Holmes and Wolf (2014) stated that parents who had local social networks that favoured drinking away from the home may be more prone to using aggressive parenting techniques. The authors' findings continue to build on how child maltreatment can be influenced by individuals and negative social networks who support substance use and inappropriate physical discipline (Freisthler, Holmes & Wolf, 2014). McMahon (2001) communicated the importance of social supports in relation to relapse prevention in his study comparing male

cocaine users one year after completing residential treatment. This study highlighted that the lack of supports to provide assistance in coping with stressful situations and encouraging positive behaviors, rather than substance abuse, fed the likelihood of relapse (McMahon, 2001).

Domestic Violence and the Use of Support Networks

Domestic violence is a common concern in child protection work with families. The literature shows that women who experienced domestic violence often had people in their support networks that often experienced violence themselves (Katerndahl Burge, Ferrer, Becho and Wood 2013; Levendosky, Bogat,&Theran, 2004). Furthermore Katerndahl et.al., found that women in abusive relationships had fewer social contacts and provided more support than they received. The authors stated that women who experienced domestic violence may minimize their contact with their network because of factors like shame or embarrassment and control the flow of information that is shared with their network. Therefore, the networks may not be as useful for support or accessing resources and can further reinforce issues of emotional isolation, safety and input from their chosen network members (Katerndahl et. al, 2013).

Goodman and Smyth (2011) looked at informal compared to formal support networks and found that two thirds of women who experienced intimate violence accessed informal support networks to help them address the intimate partner violence issue. The participants also reported that even when they accessed more formal supports, they benefited more from long-term informal supports who helped them with their violent relationship (Goodman & Smyth, 2011). Coohey (2007) looked at mothers and their support networks of friends and the amount of support they received. Coohey compared mothers who had experienced severe physical assault from their partners compared to those who had not. The mothers who were severely assaulted

had few friends, fewer contacts with their friends, fewer long-term friendships and had fewer friends who actively listened to them compared to mothers who had not experienced severe physical assault (Coohey, 2007).

In summary, the above literature review examined the effectiveness of using safety networks in child welfare settings. This review resulted in limited research findings; therefore, I drew on a broader range of research literature to support these claims. Baginsky et.al (2017) shared that only eight percent of social workers used the tool of safety networks within their practice and the parents often viewed their safety network as valuable. The safety network often viewed their role as a support to the family who utilized them. Camberland et.al (2015) and Urgelles et.al (2017) highlighted the effectiveness of using safety networks in cases of maltreatment, which showed in some cases, that using safety networks aided in participants reducing child abuse and drug use after case closure. Not all literature found a positive correlation between having a support network and the reduction or prevention of childhood abuse. Further Leon and Dickson (2018) explored the effectiveness of using safety networks for children involved in the foster care system which presented that the use of informal and foster parent support resulted in better coping and overall well-being. Perry and Pescoslido (2015); Ackerson (2003); Ostberg and Hagekull (2000) and Gelkopf and Jabotaro (2013) showcased the effectiveness of using safety networks with people experiencing mental health challenges and found that the participants who had a support network were better able to cope with their mental health challenges and were able to effectively parent their children when engaging a support network to help them. Safety networks were also seen to be effective with people struggling with substance misuse issues. The literature also showed that women involved in domestic violence on average had few support people that they could use.

Theoretical Frameworks

Ecological Systems Theory

There are a number of key theoretical frameworks that guide the practice of using safety networks in child welfare. The first framework I would like to explore is the use of ecological systems theory (EST). Neal and Neal (2013) share that EST was first explained by Bronfenbrenner in 1979 and has been used by many developmental psychologists who are interested in having a deeper understanding of individuals and how they operate in their own settings. EST was originally described as different systems that are interconnected with one another. Within EST there are four environmental systems that influence an individual which include the microsystem, mesosystem, exosystem and macrosystem. The microsystem is when the focal individual directly socially interacts with others, shares common experiences and has a direct role with people around them. Mesosystems include social interactions between the focal person in which they may not have any influence on. Exosystems are settings that influence the focal individual, but the focal individual does not always participate in. Lastly, macrosystems are external factors that are out of the individual's control, such as a new legislative policy but its influence often trickles down to the individual (Neal & Neal, 2013).

Hong, Algood, Chiu and Lee (2011) go on to explain that EST is often an appropriate framework for the design of intervention approaches that address multifaceted issues. EST highlights the importance of social support as a protective factor for stressful circumstances. The authors go on to say using EST allows the worker to understand how social support is perceived, maintained and engaged with, which can help in understanding and implementing social support networks in many situations (Hong et.al, 2011). With regard to exosystems in EST, an

examination of how that system interacts with parents or children who utilize safety networks within the child welfare system is useful for the purposes of this literature review. Algood, Hong, Gourdine and Williams (2011) share that exosystems are both formal and informal which can include employment, social networks, neighbourhood features and how they connect with their community which influence factors like parenting stress, parents' social network and where they reside. As social supports have been highlighted to be a protective factor, it is therefore important to use this theory as a way of understanding how social support is utilised. At the exosystem level it is important for workers to address parents lack of social support and how it impacts their children and family (Algood et.al, 2011).

EST can be used to identify risk factors for each family as described by McManus, Almond and Hutton (2017); EST sees the child at the center of multiple systems that affect the child and create different experiences for them or their family. This theory highlights risk factors displayed by the whole family unit including: domestic violence, household instability and a lack of social support The authors continue to share that EST is a beneficial approach when a child's development can be assessed for harming factors at each level (McManus, Almond & Hutton, 2017). This also appears to be supported by Van Dijken, Stams and De Winter (2016) who shared maltreatment can be seen as a direct result of social-environmental factors. Different factors can contribute to the risk that a child may experience maltreatment. This may be a combination of individual, relational, community and social factors that can be seen as risk or protective factors. Van Dijken and authors identify these could include socioeconomic factors like income or education, demographic factors like family structure, or ideological factors like shared values amongst neighbours or communities and the availability of a social support system. It is thought that maltreatment occurs when certain groups or communities encourage

certain harmful parenting styles and when support networks fail to encourage positive parenting practices instead (Van Dijken, Stams & De Winter, 2016). Using the EST approach can help social workers and families have a better understanding of how the use of a safety network can have better outcomes for their children who are involved in the child welfare system. It also can help the worker understand the many factors that need to be considered when developing a supportive network for families to ensure that they will truly be a support to the parents and the children who use them.

Family Centered Approach and Strength Based Practice

Another theoretical model or approach that is used is the family centred approach (FCA). The model puts the families at the center of the child welfare process and shifts from the perspective that the child welfare worker knows best, to an understanding that families have the skills and resources to solve their own problems. Estefan, Coulter, VandeWeerd, Armstrong and Gorski (2012) go on to say that many child welfare agencies are moving to a family-centered model. Underpinned by a strengths-based approach, the family-centred model increases the participation of families when they are involved in the child welfare system. This includes acknowledging that families are experts in their own lives, and ensuring that each family member has meaningful roles that they can play, as well as providing opportunities for family members to actively participate in the shared-decision making process. The authors state that when using a strength-based FCA, families needs and wishes are taken into consideration and services are delivered in a manner with which parents feel comfortable, especially cases with very complex problems (Estefan et, al, 2012). When we use an FCA, in my opinion it allows the family the opportunity to come up with creative solutions to very complex issues. When given the opportunity, this model may allow the families to bring people like their friends, family and

other significant others to the decision-making table who can create solutions to child protection concerns.

The SOS model is strength-based as described by Oliver and Charles (2015) who detail that the approach laid the theoretical framework for a strength-based approach in child welfare. SOS is a widespread strength-based protection model, having been implemented across Australia, North America and Europe (Oliver & Charles, 2015). Using a strength-based framework allows families to engage in the child welfare process, which according to Sørensen (2018) was the motivating factor. That motivation allowed families to take responsibility for the children's safety, who together with workers and family networks could jointly develop solutions to build safety around the children (Sørensen, 2018). Utilizing safety networks is about solving the current child protection concerns, but also about building family capacity along with their safety network to address future child protection concerns so that the child welfare system does not need to be involved. By using FCA and strength-based approaches such as SOS, it allows the family to feel empowered. Rijbroek et.al (2017) shares that empowerment gives control to individuals over their lives and aids families in dealing with problems. It reinforces the ability for families to solve future problems, which makes them less dependent on child welfare agencies (Rijbroek et.al 2017). Strength-based approaches and FCA both allow the child welfare worker to see the family as a source of strength and the source of creating solutions so that they can help solve their own child welfare concerns. These models can be used as a framework for engaging families to take the first step in recognizing the child protection problem, and creating a network of people who can help them solve it. Turnell and Essex (2013) describe that the immediate and extended family are to take substantial responsibility for addressing the child protection concerns. Child welfare workers must initiate the assessment and planning process so that the

family can clearly understand the child welfare assessment and participate in the process of addressing the concerns. The planning process is designed to be started along with the family members, including the children, and is based on the premise that in order for the child welfare worker to close the case, the family members need to take ownership of the child protection concerns and implement the plan. The more difficult the case, the more the child welfare worker needs to honor and trust the family and network members to create and engage with the presenting issues. When this happens, families feel a sense of balance with their child welfare experience and are more likely to take responsibility and build solutions to the presenting child protection issues (Turnell & Essex, 2013).

Attachment Theory

Another important theoretical model is Attachment Theory. Attachment Theory is described by Levy and Johnson (2019) as emerging from Bowlby's clinical observations of children who had lost or been separated from their parents. Bowlby's findings suggested that the separation from their mother or other significant care-givers generated a sense of loss and anger within the children who experienced this. Bowlby theorized that this bond between infant and caregiver served an evolutionary purpose and the infants who stayed close to their caregiver were more likely to feel secure and protected, as well as received better care than those who were separated from their caregivers. Bowlby assumed that the bond developed between child and caregiver is functioning throughout the life span from birth until death. Bowlby shared that early interactions between child and caregiver were at the center of Attachment Theory and the bond that developed helped in the formation of the child's identity formation, intrapersonal regulation, and interpersonal attitudes. This attachment bond promotes comfort during stressful periods, limiting negative affects and allowing the infant to develop a healthy, realistic and clear sense of

self identity (Levy & Johnson, 2019). That being said Bowlby's Attachment Theory is very Westernized in its views and often does not take into account other collective cultures who use other significant family member like aunties, uncles and grandparents who often stood in place of a parental figure. As explained by Mirecki and Chou (2013) who state that concerns about Attachment Theory have been raised due to its cross-cultural applicability and that most studies of attachment apply Western theories and methods to observe non-Westernized cultures rather than apply more culturally appropriate ones.

Still I believe Attachment Theory is important because it shapes the child welfare worker's purpose on the importance of trying to preserve the family unit if possible. Lawler, Shaver and Goodman (2011) explain that interventions initiated by child welfare workers will focus on the repair or establishment of relationships between a maltreated child and their parents or surrogate parent relationships. A secure attachment relationship between child, parent or another significant parental figure can serve as a protective factor for barriers like addictions, poverty and mental health. Children often rely on their parental figures for protection and guidance. Cultivating this secure attachment style between child and parent is a template for forming healthy relationships with others. Lawler et al. (2011) point out that a child who has experienced maltreatment and has not been able to form a secure attachment to their parents may exhibit insecure or anxious behaviours towards their parents or other significant figures. The author continues to explain that if a child is removed from their biological family and placed in an 'out-of-care' home, a child who experienced maltreatment may face additional stressors when trying to form attachments to a new caregiver. The authors explain that children who are placed in out-of-care homes are at risk for developmental, health and educational problems compared to the general population of children. Establishing or re-establishing child and parent relationships

should be the main focus of child welfare workers. Based on Attachment Theory children rely on these established bonds for emotional stability, this stability can influence their ability to become healthy parents for a new generation of children (Lawler, Shaver & Goodman, 2011). I believe this framework can be used to guide workers and child welfare agencies in partnering with families to develop safety networks so that parental attachment to their child is not lost due to being removed from the home, or addressing the child protection concerns so that the child can return back home and the child and parent attachment can be re-established or repaired. Maintaining this framework at the forefront of their minds will hopefully motivate the worker, parents, and members of the support network to develop safety networks and create a plan so that the child and parent do not have to go through a traumatic removal experience. Melinder, Baugerud, Ovenstad and Goodman (2013) explain that Attachment Theory is a valid framework for trying to understand childrens' response to stressful experiences. Children who experience maltreatment and are removed from their home can have negative reactions to this separation from their parents, especially younger children as they are more physically dependant on their parents than older children. These reactions may range from tolerable coping to disorganized behaviour, emotional numbing and dissociative states. The authors go on to share that the actual removal itself can have traumatic consequences for both child and parent and will depend in part on the child's attachment quality and the parent's attachment alignment to the child (Melinder et.al, 2013).

Poor attachment may also have negative effects for children as they become adults. Pietromonaco and Barrett (2000) explain that people create internal working models based on expectations about one's self, significant others and the relationship an individual has between the two. Working models are thought to be created by recalling details of what happened, where

and with whom and the effect that interaction had on the person experiencing it based on past attachment interactions with significant others. These past attachment interactions influence what information individuals pay attention to, how they interpret life events that happen to them and what they remember (Pietromonaco & Barrett, 2000). All these interactions could be exhibited subconsciously by the individual (Pietromonaco & Barrett, 2000). If children had negative attachment experiences with significant others like their parents, as adults they could form unhealthy relationships or be unable to positively form attachments with other adults or even their own children. Attachment researchers have examined the importance of 'mind-mindedness.' The term mind-mindedness as described by Meins, Fernyhough, de Rosnay, Arnott, Leekam and Turner (2012) is an idea of the ability of caregivers to be attentive to what the child is thinking and feeling and then use that information to react and communicate appropriately with the child. Parents who is not attuned to their child may misinterpret the infant's internal state by communicating opposite information that the infant is exhibiting (e.g commenting that the baby is full when they are actively eating). Mind-mindedness hypothesizes that caregivers interact with their infants in two approaches. The first encapsulates the caregiver's traditional concepts of engagement, responsivity and sensitivity. The other highlights the caregiver's lack of awareness of the infant and their point of view and imposes the caregiver's own agenda despite the child's exhibited actions or emotions (Meins et.al, 2012). Through this type of interaction between caregiver and infant the child learns to express emotions that are socially acceptable. When a parent and child suffer from a significant detachment from one another this process may never be learned by the child, creating an adult who may be unable to attune to their own child's emotional and physical needs. Attachment Theory is a theory that that can be used when trying to preserve the family unit and create safety

networks, however it may be limited due to its often-Western views and concepts and should be applied to other collective cultures with caution.

Thematic Findings from the Literature Review and Areas for Future Research

Limited Research in Child Welfare Setting

This literature review looked at numerous articles that highlighted the use of support networks to mitigate child maltreatment concerns including physical abuse, sexual interference, substance misuse, neglect and mental health concerns. The literature identified how these networks can be used to keep the child in the home or integrate the child back into the home after a removal has occurred. Some gaps in this literature review were identified, which included limited research-based empirical studies to explore the efficacy of using support networks to mitigate the child protection concerns so the child may remain in the home or be returned back home. Other limitations include the need for larger sample sizes, further qualitative research and quantitative research that would strengthen other findings (Nelson et. al.,2017).Based on the literature review very few studies could be found that specifically examined utilizing safety networks in child protection cases. Turnell (2013) explains that there is an increasing emphasis on the importance of evidence-based practice in the child welfare field. With this there are considerable problems in applying evidence-based research to child protection practice. Such research standards of assigning randomised trials pose ethical and professional dilemmas because child welfare workers are mandated to provide protection. Furthermore, in child protection cases there are almost always multiple variables effecting the family where it becomes effectively impossible to draw definitive conclusions for the causative impact on any particular change in policy, guidance or practice (Turnell, 2013).

Sample Sizes

Using Safety networks within the SOS model resulted in studies using very small sample sizes and individual case studies. This can be problematic because the results may not be generalizable to other families involved in the child welfare setting. Ab Raham (2013) explains that when a population-based study or survey is done, the results of the study are usually generalized to a larger target population. Therefore, the sample in the research study needs to represent the population adequately. To ensure this is done the sample size should be random and adequate to ensure it has enough statistical power to prove the researcher's hypothesis. It is a general rule to avoid conducting research with insufficient statistical power, however, this may not always be possible when embarking on research that is relatively new (Ab Rahman, 2013). Although, small sample sizes may be more acceptable for qualitative research due to the intimate information a social worker may want to capture through their research. Lietz, Langer and Furman (2006) explain that in the field of social work researchers are using qualitative research with increasing rates.

Debates regarding qualitative inquiry and how it fits within social work research have led to an increased awareness on how qualitative methodology can provide a voice to underprivileged populations. The social work profession is recognizing the role it plays in our field as more and more social workers are using qualitative methodology in their research practice (Lietz, Langer & Furman, 2006). This could be because of a variety of reasons, one being that child welfare is often complex, personal and full of ethical dilemmas, which could impact quantitative research methods.

Culture and Ethnicity

Another gap through the literature review is research that took into consideration culture and ethnicity within their research sample and how that may affect the development and use of safety networks within the family. Some studies had culturally diverse samples, while others did not. Allmark (2004) elaborates on the importance of including diverse research samples when appropriate. Allmark (2004) states that research should respect the human diversity of culture and circumstances and take into account ethnicity, gender, disability, age and sexual orientation in its research design, undertaking and reporting. It is important that the body of research available reflects the diversity of the population and is accessible to those who create policy. (Allmark, 2004). When examining the literature on safety network implementation in child welfare some of the research may have not represented families and the different child abuse cases found in different cultures or ethnicities.

Meyers (2006) points out that having low ethnic or cultural representation may impede the researcher from generalizing their findings and prevents some populations from experiencing the benefits of new research ideas and receiving higher quality care. None of the studies using safety networks had Indigenous participants. Since Indigenous children are over represented in child welfare as previously mentioned in the introduction, this population may need to be further explored, if this tool is going to be used within Indigenous child welfare agencies, communities and or families.

Bywaters, Brady, Sparks and Bos (2016) share that child welfare inequalities are seen in at least four areas of practice. The first area is with families engaging with or receiving child welfare interventions that reflect diverse aspects of their social positioning. The second area is in

the nature of child welfare interventions for parents and or children across social groups or identities. The third area is in families experiencing childhood difficulties and receiving child welfare interventions for some groups compared to their counterparts in the larger population. The fourth area is in the disparities between adults and children who received child welfare interventions compared to those who did not receive such services. These inequalities have a systematic impact on broad social structures, like class status, based on economic and or social class, neighbourhood destitution and ethnicity on health outcomes. This has contributed to a gap in research, policy and practice that focuses on such inequalities for certain groups to access child welfare services, in patterns of child welfare interventions and in outcomes, instead the emphasises is put on the individual's behaviour. Research of child welfare systems that focus on multiple layers of identity remain low (Bywaters et.al, 2016).

Capturing the Family's Voices in Using Safety Networks

More research that captures the family's voices needs to be conducted on using the tool of support networks in their own families when addressing child welfare concerns, as only two of the studies reviewed, Nelson et.al (2017) and Ackerson (2003), captured the voices of participants. It is important for researchers to capture the participants voice in what is being researched as Aluwihare-Samaranayake (2012) explains that qualitative research is a way to capture participants experiences, meanings and voices.

However, these can result in ethical challenges for both participants and researchers. Participants in research should not just expect respect, courtesy and honesty when participating in research, they also are entitled to the social power, empowerment and freedom that comes from the gained knowledge and having their voices in research heard. It may not be possible for

a researcher to achieve a balance of power between participant and researcher, but it may be possible for a researcher to be comfortable with a continuous shift in power balance and dynamics with participants while recording their stories in research. The author goes on to explain researchers should engage in critical consciousness. Critical consciousness in a research setting should allow researchers and participants to both reflect and participate in what the research results means to them. Hopefully this will allow the participant to transform their position of being vulnerable or oppressed in the research to a point where they can find their own voice that can bring their own cultural and socio-political meaning of self and experience to the forefront. The author shares this allows the research to be presented as more than a snapshot of content gained from the participants, but rather a critical comprehension of reality (Aluwihare-Samaranayake, 2012).

Capturing Social Worker's Views in Using Safety Networks

Social workers' views of incorporating the tool of safety networks in their practice are important. Based on this literature review only a few research articles captured the views of social workers who used this tool. Ferguson (2016) states that there is a growing amount of research literature on child and family social work. However, little of this research has been applied to producing knowledge of what happens when social workers and children and families interact. Research that captures social work practice to advance our understanding of what social workers do, and do not do, and why is important to produce knowledge that can help to understand how to keep vulnerable children safe, promotes their well-being and helps parents (Ferguson, 2016). Further research on capturing the social workers views will need to be done in order to explore the strengths, barriers, limitations and possible solutions to using safety

networks in child welfare to determine if this tool is the most effective one in keeping the child at home or returning the child home when child welfare concerns have been identified.

Another gap relates to the thematic review of the literature using twelve electronic databases which resulted in varied publication dates. This may be due to a variety of reasons, including what was popular during that time regarding child welfare research which could influence publications to focused on other tools that are seen by funders and agencies as cutting edge, or the "revolutionary" idea. Regardless of the reasons it was difficult to locate articles that are more recent, so I had to rely on older articles to further examine the effectiveness of using safety networks in child welfare settings. More recent literature may be helpful in evaluating the effectiveness in using safety networks, as well as the limitations, views of children and families, safety network participants, social worker views and the agencies that sanction such tools to be used. In the next section I will explore the implications to social work practice in utilizing safety networks in child welfare.

Implications to Child Welfare Practice

Child Welfare Agencies

Utilizing safety networks to address child welfare concerns with families have several implications to child welfare agencies, social workers and the families they serve. Agencies who utilize the tool of safety networks within their own agency may have some benefits and some consequences. The benefits to keeping a child in their home or having the child return home could result in financial savings to the agency. According to MCFD (2019) on its expenditure data in the 2017/2018-year MCFD spent $306 million on Children & Youth in Care services. Potentially this cost could be lowered by keeping children and youth out of care services by

using other strategies like the use of safety networks to maintain children in the family home. Utilizing safety networks is a low-cost method, because the family creates and maintains the safety network, and the safety network is used to address or diminish the initial child welfare concerns with initial support and supervision of the child welfare social worker. Investing in preventative measures like utilizing safety networks may have some benefit.

Waldfogel (2009) goes on to share that historically child welfare agencies have spent their limited resources on children and families who have already been exposed to child maltreatment. This is highlighted by study that examined Child Protective Services in the United States that showed out of the 6 million cases reported to Child Protective Services about 600,000 go on to receive services, whose main focus is preventing further maltreatment.

Additionally, many families receive few services from child welfare workers beyond periodic visits due to high case loads. Families, especially those with mental health, substance misuse and domestic violence are at especially high risk, and could potentially benefit from more effective treatment and prevention services (Waldfogel, 2009). This point is further examined by Morgan, Hyslop, Seucharan and Sherlock (2019) who explain that when it comes to the child welfare system in BC, parents and social work experts state we are investing in the wrong end of the system; we should be focusing more money to support struggling families versus into the foster care system. Journalists from a variety of news outlets asked parents whether they felt they were receiving enough support ether financially or otherwise before their children were taken away by social workers. Twenty-nine of the thirty respondents reported they were not getting the support that they needed (Morgan et.al, 2019). There has been no research in terms of the potential cost savings for the agency that utilizes safety networks within the SOS model. In the ten pilot study by Baginsky et.al (2017) they discovered that without additional research

comparing agencies who did and did not use the SOS model the most they can conclude is that there is no direct link on the reduction of time spent on direct client contact by social workers who utilized the SOS model. So, at this point it is hard to determine if there is any significant cost savings in terms of social worker's time being spent on child welfare cases when applying the SOS model or safety networks within the SOS model. There are also additional costs that must be considered when implementing new tools and strategies into a child welfare agency. Social workers and managers need to be trained in any new tools that are being created which will cost money, not just in terms of salary, but also in facility costs, trainers and training materials.

At present, I suggest that child welfare agencies are focused on reactive responses instead of proactive responses or interventions, such as safety networks. As previously discussed, implementing a more strength-based approach like empowering families and their support networks to engage in the child welfare process and take responsibility for the children's safety by developing solutions will decrease the need for child welfare interventions. By implementing strength- based approaches it can help the family and their safety network build capacity to address future child protection concerns so that the child welfare system does not need to be involved. If successful, this method could see a reduction in the reliance of the child welfare agency, freeing up already limited resources.

Social Work Retention

Social workers may also see benefits in utilizing the tool of safety networks within their own child welfare practice. One of these benefits could be the reduction of stress and burnout that many child welfare workers face. McFadden, Campbell and Taylor (2014) share that child welfare social work is an occupation that contains higher amounts of stress and burnout which

leads to higher rates of staff turnover. This turnover leads to higher levels of inexperienced workers, which causes concerns, as competent and committed workforce is crucial for effective service delivery to vulnerable children and families. McFadden et. al. (2014) go on to say that child welfare workers experience high rates of burnout due to a variety of factors including poor working conditions, excessive paperwork, long working hours, little opportunity for advancement to higher positions and working within bureaucratic structures. Other factors that contribute to declining staff well-being include stress, trauma and experiencing vicarious trauma (McFadden, Campbell & Taylor, 2014). Using tools like safety networks may reduce the stress of having higher caseloads due to cases not being able to close quick enough because of outstanding child welfare concerns, or the constant stress of having it be your sole responsibility of ensuring that the children are always safe within the family home.

Turnell and Edwards (1997) explain that child welfare is often a process by which the worker is the expert and will assess the nature of the problem, the risk and the harm, and will create the solutions required to address the child welfare concerns. By utilizing safety networks, the worker is removing some of that stress of being the sole person ensuring that the children are always safe, and giving some of that power back to the family and their support network. Turnell and Essex (2013) state that the culture of child protection work is to often overlook family networks and instead prioritize professionally created interventions instead. If the safety network is to take on significant responsibility for addressing the child welfare concerns, the assessment and planning must be done in ways that involve the family. This is based on the logic that in order for professionals to remove themselves from the child welfare case, the family, along with their support network need to think themselves into and through the child welfare situation. The professional's job is not to deliver solutions but to facilitate the process of asking questions to the

family and the support network who will answer and consider the questions to find an appropriate solution to their child welfare situation (Turnell & Essex, 2013). In reference to previously noted theoretical frameworks, the EST model ensures that effective supports are put in place to increase positive outcomes for the children involved, and in doing so, could reduce the reliance on welfare workers, which would decrease their workloads, and in effect, reduce stress levels.

Children and Families Involved in the Child Welfare System

As previously mentioned, the whole point of utilizing safety networks is to hopefully assist the family along with their support network to address the current child welfare concerns so that their children can return home or remain within the family home. If this can be accomplished using safety networks then this would have significant impact not just on the parent's mental health, but also their children's. The children have not only had to deal with maltreatment, but also having the potential to be removed from their home, family, school and other supports, if removal was to occur. Taussig, Clymann and Landsverk (2001) explain that reunification with families is believed to be the most favourable option because adolescents who do not reunify with their family have less contact with their parents, which may impair their development. Adolescents who remain in the care system experience more placement disruptions and therefore less stability than adolescents who have been returned to their families. Despite these beliefs, there is little evidence to show that adolescents who get reunification after foster placement do better than those who remain in care (Taussig, Clyymann & Landsverk, 2001).

In contradiction to Taussiget. al. (2001) , the literature regarding Attachment Theory encourages workers to see the value in the bond between children and their parents, and how

parental attachment plays an important role in a child's development. Parents also struggle with the emotional impact of not having their children in their care. Kiraly and Humphreys (2015) also state that parents involved with the child welfare system have feelings of powerlessness, loss and grief and the difficulties of maintaining consistent contact with their children when they are in the care system.

Consequences of Childhood Abuse and Neglect

There are consequences for children who have experienced maltreatment as identified by Turner and Rogers (2012) who identify a number of consequences. Children who experience neglect demonstrate a variety of emotional, cognitive and physical impairments which include decreased academic achievements, lower IQ, memory issues and poor attention span. They also exhibit higher rates of violent behaviour, substance use and criminal offenses. Turner and Rogers highlight that children who experience neglect can also have problems with attachment issues in adulthood and display dismissive or fearful attachment styles as well as issues related to posttraumatic stress. Thompson, Kingree and Desai (2004) explain that physical abuse towards children have been associated with psychological and behavioural problems including posttraumatic stress disorder, poorer academic and intelligent outcomes, depression, substance abuse, personality disorders and increased aggression. Hornor (2010) shares that child sexual abuse has been associated with increased problems in children and adults that include posttraumatic stress disorder, anxiety, depression, suicidal ideation attention deficit hyperactivity disorder, obesity, increased violent behaviours in males and substance abuse. The author goes on to state children who experience sexual abuse within the context of a positive or social environment may be linked to a lower risk of experiencing adverse mental health outcomes. Safety networks may be utilized to address such abuse problems and prevent reoccurrence of

abuse from happening again and could lead to the reduction of children exhibiting such problematic behaviours mentioned above.

Social Work Perspective

As a social worker who has used the SOS model and in particular the safety network tool, I believe that using safety networks in child welfare reflects social work ethics and values. The Canadian Association of Social Workers (CASW) (2005) states "Social workers strive to use the power and authority vested in them as professionals in responsible ways that serve the needs of clients and the promotion of social justice" (2005, p. 6). Using safety networks draws on the main principal that parents and children involved in the child welfare system if possible are to remain as a family unit so that parents can have the opportunity to repair and maintain a positive bond with their child. Levy and Johnson (2019) draw on the Attachment Theory which suggests that trust is developed over time by a child and adults. By developing this trusting relationship it can show the child that adults are there to help and protect the child. If adults do not have the opportunity to develop this trust it can leave the child feeling unworthy of care and affect their ability to trust or rely upon others when needing support (Levy & Johnson, 2019). By creating a safety network that addresses child welfare concerns and allows parents to remain with their child, the hope is that the child and parental bond can be repaired and that their attachment can be strengthened or maintained.

In my experience I have seen safety networks have a positive impact on the parents, the child, the created network supporting them, the social worker and the child welfare agency. The literature has shown that within the EST, safety networks can have a positive impact within the microsystem level by creating a network around the individual that can address the child welfare

concerns through a combination of family focus, strength based and solution focus practices. The safety network also has impacts on the mesosystem level by pulling in the social worker who monitors the family and safety network created plan and provides support and guidance to the parents and their network by drawing on their own professional's skills and resources. By utilizing safety networks, it can change how the child welfare worker assesses and implements child welfare practices on the exosystem and macrosystem level. By implementing more preventative measures like safety networks it may save the agency and Province money that can be diverted to more preventative family programs within the welfare system. It may increase social work retention within the child welfare field by limiting factors like stress and burnout caused by higher caseloads and the primary responsibility being held by the social worker to ensure that children are always safe within the family home.

Conclusion

In conclusion, the ultimate goal when working with families is to have them address their child maltreatment concerns and create safety so that the children can stay in the family home or be reunified back into the home after removal has occurred. By utilizing safety networks, the hope is that this goal can be achieved, which will result in fewer children coming into the care system, less financial costs to the child welfare agency and less child abuse recidivism after case closure.

Through the literature review I was able to locate research in regards to utilizing safety networks in child welfare settings. This review resulted in limited research findings therefore I drew on a broad range of research to support these claims. The current results indicated that applying safety networks in child maltreatment cases may help in the reduction of re-

maltreatment after case closure and showed some promise in helping children integrate back into their parents care after a removal has occurred. The available literature also highlighted the views of social workers who have used the tool of safety networks in their own practice. These results showed that only a small percentage used the tool of safety networks, with another study sharing that some social workers did not always feel it necessary to use safety networks in all circumstances. Families views on utilizing safety networks was also explored. In one study it was found that only one-third of families felt social workers helped them to create their own support network and many families had fewer than two people that they could use in their own support network.

Researching the effectiveness of utilizing safety networks in the child welfare setting may be a way that MCFD and DAA agencies can achieve this objective set out by the TRC. It appears more research is needed to explore and capture social workers and family's views in applying safety networks in child welfare. Utilizing safety networks could have several implications to social work practice. This could include potentially keeping costs down for the child welfare agency by keeping children out of the care system, reducing social worker burnout by reducing case load sizes and complex cases that social workers often have to deal with in child protection. Safety networks may also help children and families with the emotional toll of being removed from their parental home due to child welfare concerns.

Furthermore, using safety networks has the potential to diminish current child welfare concerns that have been linked to many negative childhood experiences, or prevent future child welfare concerns from reoccurring after the case has been closed. More in-depth research needs to be conducted to validate the current research around this topic and establish if using safety networks as a tool can truly mitigate current and future maltreatment concerns with families

involved in the child welfare system. I also believe that more research needs to be conducted to further explore the views of the child welfare workers who implement this tool so it can be determined if they feel this is a valuable tool worth developing, or if a different approach should be implemented, for example the use of more formal professionals to mitigate child maltreatment risks. Additionally, further research that captures the views of the families who have utilized this tool to address their own child protection concerns need to be explored in order to capture their views on how effective they felt it was for them.

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