

Finding Strengths out of Problems: A Qualitative Study of the Social Workers Experience in Family Initial Assessment for High-Risk Family

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Abstract:

The purpose of this study is to explore the experience of the social workers in High-risk family initial assessment process and factors that affect the initial assessment. This study uses the case of the Service Program for High-risk Family in a county in central part of Taiwan to inquire the questions stated above. Using in-depth interviewing method, the researcher interviews six social workers of the program and analyzes their experiences with qualitative research method. The discussion of the results will focus on the following three aspects: (i) the initial assessment of high-risk families by social workers; (ii) awareness and reflection from social workers; and (iii) factors that affect the initial assessment. The study finds that in the initial assessment for high-risk family, social workers not only identify the risk factors in the family, but also see family's strengths and opportunities. Other findings related to social workers' professional competence are: while confronting with the limitations of professional competency as well as constraint of external environment, social workers are nonetheless managing to find strengths and possibilities from themselves and external environment. The study will propose implications and suggestion for practices in providing services for high-risk family.

Keywords: high-risk family, family initial assessment, family strength

1. Introduction

Taiwan High-Risk Family Intervention Service Program is related to the growing of child abuse incidences. The main purpose of the program is to early detect the hidden risk in families through the Social Workers services and resources involved, avoid tragedies coming from child abuse events. However, since this service has been enforced, both in practice, professional training or service mechanism on the establishment of many are worth discussing and improving. This paper studies the initial assessment of social services and looks forward to further understanding the service dilemma of high-risk family intervention program, take the exploring experience of Social Workers initial assessment a reference for future program adjustment.

2. Literature Review

2.1 Taiwan High-Risk Family Intervention Services Program

Taiwan High-Risk Family Intervention Services Program was enforced in 2006. The origin of this plan has its social background—the increasing of domestic violence and child abuse cases and frequent children-carrying suicide events. Many children became victims of parent's stress. And the incidences are often related to children care-taker problems, such as unemployment, alcoholism, drug abuse or marital breakdown. Therefore, the purpose of this Program is mainly to early detect and screen out high-risk families; take the initiative to intervene and assess their problems and needs; provide the children-centered, family-objected preventive, counseling and supportive services to prevent child abuse, family violence and sexual abuse (Social and Family Affairs Administration, Ministry of Health and Welfare (SFAA, MOHW), 2015).

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The services include: Careful visits by professionals, assist children's class-tutor and after-school care, parental education, children-care services, employment assisting, health care and rehabilitation, and financial subsidies, etc. The designer and main driver of this Plan is the SFAA_MOHW, local government's Social Affairs Bureau / Departments are the Plan Competent Authority of this Plan's enforcement, Social Workers at private social welfare entities assigned by the undertaking Competent Authority provide most of the direct services. Social Workers' main job is to assess family problems and needs, connect resources and strengthen the family's ability to help families get out of trouble (SFAA_MOHW, 2015).

2.2 The initial assessment for High-Risk Family

To promote the service mechanism and the notification of high risk families, the government has defined the "High-Risk Family Assessment Form", which includes: (1) relation among family members is complicate or family is under members' conflict, (2) parents or main care-takers of home children/juveniles engage in special business or suffer from mental illness or alcohol/drug addiction and not under medical care or not with continually medical treatment, (3) family member has suicidal tendency or record, (4) in poverty, single parent, dependent education or other unfavorable factors, (5) involuntary unemployment or repeatedly unemployed, (6) family burden-taker is dead, has left, seriously ill or imprisoned. This assessment is primarily used as children welfare or, the family-service-related worker making screen on report task when finding the high-risk family (Jane Hui-Juan, 2014; SFAA_MOHW, 2015). Based on the work flow set by the SFAA, local Competent Authority screens the reported case and decides whether it is a child abuse one; after associating with private agency that visits the problems and needs, it will decide whether making initiating service or not. Initiate indicators of high-risk family are: (1) main care-taker function is lacking, there is alternative care-taker but with poor function, (2) main care-taker performance is lacking, there is alternative care-taker who has made good care performance, main care-taker has the potential to enhance the performance, (3) children have behavior or emotional problems, family lacks of responding methods and skills, (4) children have behavior or emotional problems, which have caused negative impact on the family. Non-initiating statuses are: family-violated children-protection cases, simple financial cases, cases that already have accepted services from social welfare entity, and the alternative care-taker with good performance and have improved the cases difficulty in main care-taker performance (SFAA_MOHW, 2015).

Since the enforcement of high-risk family-service program and reporting amount are low, and the case-setting percentage is also not high after social worker's visits. Jane Hui-Juan (2014) took 2013 as the sample, found that the accuracy of high-risk reports in 2013 was less than 80%; we can see that the high-risk family identifying knowledge of network staff still has room for improvement. This situation has increased the social workers' service loading in the initial assessment; it not only has increased the initial assessment amount, but also consumes time and energy making. In addition, although the initial indicator can exclude the domestic violent and children-protection cases, but the actual situation is often difficult to do it; on one hand, may be the reporters do not know this requirement or do not want to inform them to the Center of Family Violence, on the other hand, for case valid or not, there is recognizing difference existed among the varied entities involved (Song Li-Yu, 2012), which result in many unqualified, excluded cases still enter the of the high-risk family service scope. Moreover, the effectiveness of the high-risk family service is related to the complexity and severity of its problems; when a family has crisis and it lacks of support and resources, possibility of children-carrying suicide or suicide-after-killing children increases (Zheng Li-Zhen, Wu Shu-Yun, Chen Yi-Zhen, 2016); sometimes, even after the service is granted, family members and overall family improved, care-taker mood and poor physical and mental condition still need to worry about, more supply of resources is the necessary post service (Song Li-Yu, 2012). These cases often challenge the social workers' professional and resource-connecting ability.

3. Research Methodology

3.1 Research design and methods

This study aims to explore the social worker's experiences on initial assessment as well as factors that affect such assessment in the Service Program for High-risk Family. This study targeted on six social workers who implemented the Service Program for High-risk Family in a county of central Taiwan. A semi-structured, in-depth interview method was conducted on those social workers to collect their working experience in the stage of initial assessment, along with the dilemma they faced and their relevant responding ways. Furthermore, an extension interview was carried out depending on the interview contents of subjects, in which the whole interview processes were recorded and written into transcript.

This study adopted qualitative research method to conduct analysis. After completing interview data reading, the researcher dismantled the data, named the meaning units, and clustering similar units to constitute sub-topic and topic. During the analytic process, the interview texts and analyzed data were repeatedly read in order to grasp the situations and contexts described by the subjects.

3.2 Research Subjects

Subjects of this study are six social workers who implemented the Service Program for High-risk Family in a county of Taiwan, including five females and one male. The service qualification of these six social workers in the Service Program for High-risk Family were ranging from six months to eight years, of which two social workers had participated the implementation of this Service Program Intervention since 2006. Prior to engaging in the Program concerned, six social workers had working experience in other social welfare areas (including women, domestic violence, the elderly, community, etc.).

4. Research Results and Discussion

4.1 The initial assessment of social workers on high-risk families

4.1.1. Evaluation basis

4.1.1.1 The indicators set by the authority are only the basis for assessment, of which many items still require the subjective judgment of the social workers:

At the beginning of implementing the intervention of the Service Program for High-risk Family, the indicator for the notification and social worker initiation were already set out. However, while facing the diversity and complex of families, such indicators can only serve as assessment basis for how to draw a line between initiation and non-initiation, and that many a times still need to rely on social workers' subjective judgments. L clearly pointed out that "the objective judgment at least accounts more than half. The so-called objective judgment is: the index. Then coming the individual willingness of doing or not, this part will account for about thirty to forty percent. (L1066-1067)"

Yet, some social workers argue that, since the assessment of family cannot be determined momentarily, it might be better to initiate the service first. "Implementing the service first and, if nothing happened, the case would be closed, or if the case's notification factor is not there, then put the case out. The problem is, sometimes there will be some problems in the middle. (F1086 -1088)"

4.1.1.2 Do not deny the possibility that child's rights may be ignored is the biggest consideration of social workers:

Most of the interviewed social workers expressed that the interests of children was their most important consideration in conducting the initiation or not. Whether or not children are being adequately cared or their self-care ability are assessment requirements; furthermore, under the condition of not being able to assess the situation of children care when the data cannot be collected completely, social workers are willing to carry out initiation to avoid the interests of children being affected.

"If there is a struggle between, I tend to initiate it, and when my information is insufficient or I haven't completely visited the case to collect the relevant information, I think it will be better to let the case be initiated based on the child's care, the rights and interests. (S1062-1063)" "We will start with the human part to consider. The first example is the child's age, that is, the child's own ability to ask for help.

The second is the age and functional part of alternative caregiver, including his/her economic function, and the ability to cope with the condition of mentally illness. Since the main consideration is focused on child's personal safety, a tract will be initiated first. All in all, child's best interests are the primary consideration. (L1032, L1039)"

4.1.1.3 Unless the resistance of case family, all cases shall be initiated:

The initial indicator for high-risk family service clearly stipulate that cases involving domestic violence, childhood dropouts and simple economic needs should not be included in the scope of services. In this respect, most social workers are also trying to screen cases in such service range. However, different institutions have their own consideration in actual implementation. F might think that unless the case's family strongly refuses, all established cases shall be initiated for the sake of pull up initial rate as well as lengthen the information collecting time. In this stand, there is no struggle for F since she believes that even if only doing the goods delivery service is worth for the initiation. (F1016-1133)

4.1.1.4 The tendency of no-initiation under the condition of multi-resource intervention:

When several network units have involved in the provision of services to cases, the social workers might not consider the initiation. “Even if her condition is not OK, but considering that she has got supports from three or four units, there is no necessary for initiation (C1062)”. “It is a bit cruel for not initiating, for example, a family of child-care case in a county, a case of early treatment and of Foreign Spouse Family Service Center. (U1057)”

4.1.2. Struggling in Initiation

4.1.2.1 The assignment of cases falling in the gray area between child protection and high risk family:

High-risk social workers may not be able to refer a case that they classify of being in the category of child protection. For some cases falling in the gray area between the child protection and high risk, the child protection unit always occupies the favorable position in such decision. “We will discuss this case with the supervisor before we report to the child protection unit, but if the child protection unit does not initiate, we will do it and continue to serve (C1034)”. The situation of unequal power gets social workers a bit emotion as well as a sense of concern and worries about case family that needs for public power to be sacrificed. “Sometimes I feel a bit angry and emotional, because case family’s interests are affected. (C1048)”

4.1.2.2 The flexibility in facing the unequal power position between social workers of child protection and high-risk family:

When facing social workers of child care, the social worker serving high-risk families often feel their inferiority, however, they do not have to fully comply with this situation. S’s approach is trying to make her own voice; however, when situation cannot be changed even through all kinds of communication channels, she accepts it.

“I think it’s up to social worker’s gut, a case should be the case it should be, I will write down sufficient reasons to persuade him to take the case (laughs). On the contrary, if this case is considered to be denied by me but the personnel in charge tends to accept, I will find his supervisor to discuss and, if the latter one still insists, I then look for the chief, and all of them are insisting, well, I will then accept it. I personally will do some protests to the existing system, but if people really want us to accept, we will silently take it down. (S1035-1038)”

4.1.2.3 Providing professional competency and evidences to persuade the other side when there is a disagreement with the notification network unit:

Social workers in high-risk families are often required to comply with the expectation of notification unit. Sometimes, when there is a disagreement about the assessments between both sides, the social workers must demonstrate their professional competency and evidences to convince the other side to agree with their own assessment. “I will resolutely advise the school about what kind of resource I offer and what the subsidy qualifications for social welfare are (S1046). I will first clarify, I will first clearly explain to the network unit and mention: What services are we currently offering, what we can do, and what channels he should seek if he is going to place and, if there is a difficulty in the notification, he can notify it once, and then I will conduct the assessment. Furthermore, I will also notify the child care issue if I feel necessary. (S1051)”

4.1.2.4 The actual consideration of the expectations and the rate of initiation of the competent and notified units:

As a commissioned unit, the high-risk family service agencies often face the pressure from the competent units. Under this condition, professional social workers have no choice but surrendering to the administrative bureaucratic system. Under the pressure of supervising unit, L has to conduct the initiation. She adjusts herself first and then communicates with the supervisor of unit, she says: “I know that there will be a pressure, but I will make an adjustment in this part and then discuss with you for confirmation. (L1025)” F’s institutions have a high rate of initiation, one of the factor to this has been worried about no longer being commissioned by the competent unit. “If we are picky, we will be afraid of no more case coming, as a commissioned unit, we are always worried about that people would not pay. (F1138, F1147)”

In addition, the response to the expectations of the notification side also brought certain pressure to social workers, such as the pressure and metal burden from schools of without initiating their notifications mentioned by S and C (C1082-1084).

4.1.3. Difficult cases

4.1.3.1 Even if the capability of social workers is limited, they would not give up any case as long as there is any space available:

When the professional judgment of social workers is indecisive, whether the family can be changed has become the main concern of social workers. "My relationship with this family, what kind of follow-up intervention I will like to provide, the estimation of how they would be changed, is there any approach to work with them. (L1063-1064)" But even if the performance is limited, social workers will still endeavor to find the space where they can contribute. "Even if the case is out of our capability and there is almost nothing we can do for it, I still initiate it despite there have had being some hesitation. Just thinking of giving it a shot, simply asking what I can do for it and what shall I do after the initiation. (C1057-1058, C1060)"

4.1.3.2 Thinking about referral resources and giving a thought about cases that are not able to be handled by social workers:

Social workers often need to assess whether a referral resource is in place to some cases that are beyond their professional capacity such as mental illness or drug/ alcohol addiction.. "We are not so familiar with the psychological field, so when encountering this type of case, we usually will think about what kind of resource can be referred before action and an initiation can only be conducted when the assessment shows the necessity. (L1030)" Even if no assistance can be provided to young caregivers, the social worker will also try to find resources from the community system. "Mainly because I think there is still something I can do. If I have no way to change or enhance the main caregiver, then I will check if his main support system can be more serious in this matter. (U1050-1051)"

4.2 The individual's perceive reflection and self-adjustment of social workers

4.2.1. The goal is to reduce the risk that can be dealt with within individual capability rather than to solve all the problems:

When the problems of the case reoccur again and again, social workers shall rethink the meaning of the end of the service and the purpose. "Returning to the concept of original high risk is that I reduced the risk, but the question is, did I solve all the problems? (U1040)" It is not necessary to ask oneself to solve all the problems of the case, but to achieve the purpose of the program - to reduce the risk of the case and to readjust social workers' service concept.

4.2.2. Self-dialogue to adjust the sense of powerlessness

The social workers will feel powerless when facing case family that is difficult to be changed. In this regard, a positive self-dialogue can help social workers to change their mentality, such as "I think I should help their families more, however, under so many complex reasons, I could only provide little assistance, I cannot convert a lot of factors and some causes inside their original family structure, I feel a deeper powerlessness, but now is okay. Now I will say just let it be and meet again in the future! (S1073-1076)"

4.2.3. Recognize the limit of social workers, understand self-own ability, and learn that some professional service might be able to do better job for something.

After accumulating more experiences, the social workers will understand more about the limit of their capability. Recognizing this will lead social workers to focus on and utilize other professional capabilities. "High-risk social workers should not engage in field where they cannot provide benefits for children. They may need to consult a teacher or counseling teachers who can really provide something they actually expect, and such professional authority is surely better than our social workers. And if you put your own social work function too complicated, I will say in the end, you will be fussing around without a single success.

We often remind ourselves to respect the profession of others, and most of the time we must admit that social workers are not omnipotent, there are a lot of things that we are incapable to complete, and that is the fact we have to accept. (U1073,1078)" In addition to recognizing self-own limitations, social workers also need to be aware of their strengths in the service process. For example, L understands that he is more able to handle family of female caregivers than families of male caregivers. (L1072-1073)

4.2.4. Be able to feel comfortable when there is a little change of family so as to reduce the negative energy remained in the mind:

Social worker inevitably feel frustrated after facing the plight of case family for a long time. However, such negative feeling might be turn to great encouragement when there is some positive change occurred in case family. “It’s possible to be discouraged and disappointed of finding no change of them after working for a long period of time. Thus, whenever they appear a bit change, you will be very happy. (C1066)”

In addition, social workers have also learned how to put away the case temporarily and put the pressure down to reduce the negative energy staying in their minds. “To us, the high-risk cases are all negative energy, and we do expect not to be affected by such impact. I used to bear the child’s event in my mind, but now I have gradually learned how to reduce such pressure on me. (L1046)”

4.3 Facts that affect the initial assessment of social workers

4.3.1 Social workers’ service beliefs and professional knowledge

“Children rights and security are the first”, “Seek for possible from impossible” can be deemed as the two important beliefs for social workers in high-risk family services. Assess family problems from the advantage perspective, not limited to the family plight, instead, find the possibility of family changes from the impossible condition; the purpose of using advantage prospect in social work aims to assess the original advantages and resources of the family; use it as a basis for treatment (Saleeybey, 1997). In the initial assessment, children’s rights and interests are mindful-concern issues on the social workers; in this premise, social workers are often cautious to avoid child rights and safety from being damaged. However, lacking professional knowledge of physical and mental illness and drug addiction case often let social workers feel hesitant and retreat, whether able to find the changeable case or not often affect the willing and attitude of social workers service. Have the positive view help the social workers turn from “problem” to “possibility” , believing that people can see hope and change beyond adversity (Rapp & Goscha, 2006; excerpted from Song Li-Yu, Shi Jiao-Yu, 2010); So, even if the personal ability is limited, go forward and do not give up.

4.3.2 Network and resource involving condition:

Several social workers have referred to the negotiations with reporting entity, especially the stress from the Competent Authority and the school. Competent Authority actively plays a supervisory role that makes the undertaking entities keep in tense and get professional support; however, when the Competent Authority passes the initial stress (e.g., from a delegate’s request) to the high-risk family social workers by the supervisor power, it becomes the burden that social workers had to bear. Similarly, reports from schools also bring great stress to social workers, especially when social workers choose non-initiate the case, on one hand they bear the school’s questioning and blame; on the other hand, they stick on their professional assessment, trying to persuade the school. In addition, the dilemma of certain high-risk families cannot be solved merely from the social worker’s services, but the limited or even in-short referral resources (such as dealing with mental illness and suicide cases) make social workers worry about affecting the decisions of initial assessment.

4.3.3 Influence from the structural factors of service system

In interviews, social workers’ biggest complaint came from the perception of children-protection cases. When there is a cognitive gap between children-protection social workers and high-risk family social workers, the lack of equal and effective coordination mechanism is the biggest sore and grievances of high-risk family social workers.

While the professional meets the bureaucracy, it is often difficult to really play a useful role, in the administrative bureaucracy system that focuses on the “power level” situation, the high-risk family social workers from the commissioned entity often have to put away their professional assessment, comply with the judgment made by the Competent Authority or children-protection social workers. In addition, the fear of case amount, initial rate, and the stress of evaluation , are the hidden indicators for small private agency undertaking this Program of in making initial assessment.

5. Conclusions

Social worker of high-risk family often feel that their work are heavy and trivial, not only the referral of cases involving in protective issues according to the law, but also family’s problems as well. However, social worker still

cannot stay out for cases that are not being able to be clearly identified by the indicators. The complex and diverse family problems are also testing the professional knowledge and personal frustration of social workers. How to find their own beliefs that can keep them continue to move forward as well as to seek support and refinement in the work that is full of powerlessness has become a compulsory class to high-risk family social workers. Besides, the pressure from the competent units and the network units often make social workers feel aggrieved and uneven. Thus, learning how to communicate and adjust between the conflict of professional and administrative bureaucratic is a challenge to survive for social workers and institutions.

Nevertheless, it still can be seen how the social workers find their way out in the context of pressure and challenge through interviews. Adjusting individual emotion and changing cognitive; bravely adhering to self-own professional assessment and carrying out communicate on supervisors and network units; actively linking to the resources and trying to find the possibility of changing the case family in tasks that seemly impossible; more importantly, always persisting the priority of the children interests and right. In the course of work, social workers are not only struggling to find the potential of the family, but also demonstrating their strengths and energy too.

Yet, factors of structural in the service system are often not be easily shaken by the social workers in the first line, it need a further reflection and adjustment from government department. The following two recommendations are provided for government reference: 1. Provide a set of systematic professional knowledge training for high-risk family social workers. 2. Construct peer-to-peer cooperation mechanism and coordination dialogue platform for child-protection system and high-risk family system. It is expected that a more smooth and effective service mechanism can be established for the services of future high-risk families services.

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