

# **Partnerships with Children in Child Welfare: the Importance of Trust and Pedagogical Support**

**Keywords:** children's participation, family social work, child welfare, partnership/empowerment

## **ABSTRACT**

**Within the context of Norwegian Child Welfare Services, children's best interests are often promoted through inter-professional collaboration. Although children have the right and desire to participate, research reveals that professionals do not listen to them. Based on qualitative interviews with ten children about their experiences collaborating with professionals, we have identified ways in which professionals can facilitate children's participation. The findings show that trusting relationships, emotional support and pedagogical approaches increase children's participation in their interactions with professionals. The results show the importance of including a relational understanding of participation as a theoretical concept in child welfare and an awareness that power and dominance are in play.**

## **INTRODUCTION**

Due to the likelihood of neglect, abuse and inadequate care, the children in contact with Child Welfare Services (CWS) often have multiple challenges that require the involvement of professionals from various agencies. In Norway, the CWS system is responsible for both child protection and family assistance (Seim & Slettebø 2017). To address the various needs of the children, professionals in different agencies must be able to collaborate across sectors, as well as with children and parents (White Paper 2011-2012, 2012-2013).

According to the UN Convention on the Rights of the Child, article 12.1, children capable of forming a viewpoint are entitled to voice their opinions and have them taken seriously in matters that affect them (UNCRC 1989). In 2003, the Norwegian authorities changed the Child Welfare Act to allow children in CWS the right to receive information and voice their opinion from the age of seven. Even younger children, once sufficiently mature, have the right to express their opinions (The Norwegian Child Welfare Act 1992). According to literature presented later in the paper, most of the research on children's participation has focused on

their experiences related to decision-making processes, but an understanding of how children in the CWS experience the inter-professional relationships is lacking.

The empirical data are based on a study of children who have been in contact with the CWS and their experiences of dealing with professionals from different agencies. Ten children, aged nine to seventeen, have been interviewed. The research question was: How do the children experience the collaboration with professionals in meetings, and how do professionals facilitate children's participation?

The objective of this article is to introduce the children's perspectives into a field often dominated by professional perspectives. Kelly and Smith (2017) have stressed the importance of listening to children and demonstrated their capability to provide useful feedback to improve service provision. A key message of this study is that innovative approaches are needed to facilitate children's participation in service development.

In the article, we present theoretical perspectives on children's participation and research about child participation in the context of CWS. In what follows, we outline the research methodology, present findings and conclude with a discussion on how to facilitate partnership work with children in a Child Welfare Services.

### **Theoretical Perspectives**

In studying children's experiences with professionals, we examine children's perception on how their participation was facilitated and the outcome of these processes. Theoretically, we draw upon theories about user participation. We define the concept of child participation as children's legal right to be involved in decision-making processes in matters that affect them (Lansdown 2010; Shier 2001). Our point of departure is that children and families should be partners in the collaboration with professionals and should be able to influence service development (Graham & Machin 2009). In the context of inter-professional social work practice, collaboration implies an active process of partnership to achieve a common goal (Meads & Ashcroft 2008; Whittington 2003). This process should also include the children. Shier (2001) perceives participation as an empowering process in which professionals can take actions to increase children's participation by sharing adult power with children. Shier uses a ladder metaphor, and the actions are described as: listening to the child, supporting the child in expressing viewpoints, considering the child's view, involving the child in decision-

making processes and finally, sharing adult power and responsibility for decision-making with the child. Shier's perception of children's participation can be criticized for positioning powerful adults and powerless children. We believe there is a difference in power between the two, since the professionals are mandated to take actions to protect the children. However, this does not imply that children are always passive victims of power. Children have their own opinions and they need and have the right to be listened to. We see this when children disagree and stage their personal power by opposition, disagreeing with the adults and not turning up for meetings or responding to phone calls. The issue of power is not only a question of who has power and who are the have-nots. In line with Foucault, Gallagher (2008) argues that power is a form of action, not a capacity possessed by adults or by children. He questions the idea that adults can 'give' power to children with participatory techniques. According to him, the question is not how to avoid using power, but how power can be used to resist domination. In line with this critique, professionals working in child welfare should be conscious of possible power-games in worker-child relations and try to prevent unnecessary subjection. Our theoretical perspective has also been inspired by writers who emphasize that children's participation must be understood relationally and in dialogical terms (Fitzgerald *et al.* 2010; Mannion 2007).

### **Children's participation**

Although children have the right to participate in decisions affecting them and social workers believe in this right (Archard & Skivenes 2009; Healy & Darlington 2009), both research and official documents reveal that children's participation in CWS is limited (Juil 2010; Lurie *et al.* 2015; Myrvold *et al.* 2011; Norwegian Board of Health Supervision 2012; Slettebø *et al.* 2010; Vis & Thomas 2009). In line with such findings, an international review concludes that most children involved with CWS experience limited opportunities to take part in decisions that affect them (Bijleveld *et al.* 2015).

Lack of participation may place children at risk. Children who are left out of decision-making processes often experience helplessness, low self-esteem and self-confidence (Leeson 2007), anger, guilt and worry (Winter 2010). Children want social workers to listen to them and take their opinions and wishes into consideration (Cashmore 2002; Pölkki *et al.* 2012; Thomas & O'Kane 1999b), which would promote children's well-being (Vis *et al.* 2011).

Children's lack of participation in CWS is due to various factors. For example, social workers often view children as being too vulnerable to participate (Bijleveld *et al.* 2015; Leeson 2007;

Vis *et al.* 2012), or they view the main purpose of children's participation as the gathering of information to make decisions (Archard & Skivenes 2009). Some social workers do not prioritize developing relationships with children (Winter 2009) and believe that involving children is unnecessary, as their opinions would not, in any event, affect the decision-making (Vis *et al.* 2012). Social workers also find it emotionally demanding to work with children in CWS (Ferguson 2017). Lack of competence in communicating with these children is another barrier (Healy & Darlington 2009; Leeson 2007), and it is claimed that social work training does not adequately address the importance of communication skills (Lefevre 2017).

Additionally, structural factors such as high caseloads, lack of time, and professional and organizational cultures make it difficult to facilitate participation (Pölkki *et al.* 2012; Winter 2009). Other barriers are related to the families' unwillingness to maintain a dialogue with the services, as well as to the structure of meetings that impedes children's participation (Myrvold *et al.* 2011).

When relationships with professionals are characterized by trust and understanding, they seem to promote children's participation in CWS (Bolin 2014; Dillon *et al.* 2016). A literature review by Gallagher *et al.* (2012) concluded that trust and respect, adequate information and an appropriate degree of support were the factors that favoured children's participation. This is similar to Bijleveld *et al.* (2015), who found that a personal relationship between child and social worker was crucial for children's participation, a criterion that has also been addressed by other authors (Archard & Skivenes 2009; Bessell 2015). Trust is also crucial with regard to disclosure of maltreatment (Jobe & Gorin 2013). The use of pedagogical resources such as play, games, and activities may enable the child to express views and build relationships with social workers (Archard & Skivenes 2009; Healy & Darlington 2009; Lefevre 2010; Ruch *et al.* 2017).

Children's participation in meetings is increasing (Bessell 2015; Thomas & O'Kane 1999a), but attending meetings can be burdensome (Bessell 2015; Cossar *et al.* 2016; Dillon *et al.* 2016). Weisz *et al.* (2011) found no evidence of harm to children who attended child protection hearings. As reported by Dillon *et al.* (2016) some even feel cared for at CWS meetings. According to Vis and Thomas (2009) children who participate in meetings are three times more likely to have an effect on decision-making than those who are simply consulted. Winsvold (2011) states that interprofessional collaboration can be improved if children are involved.

The review of the literature reveals some key issues regarding children's participation in CWS. Children's participatory opportunities are limited, which does not match well with their legal right to voice their opinions and to be heard. Participation can be obstructed due to organizational as well as human factors. Thus, the professional's ability to make meaningful connections and create trustworthy relationships is important. The quality of the relationship between the child and the professional is crucial in developing adequate services to the children, but the quality has been defined by the professionals and not by the children themselves (Kelly & Smith 2017). The aim of this paper is therefore to voice the children's perspectives on their interaction with professionals.

## **RESEARCH METHODOLOGY**

The methodological design of this study was explorative. The overall aim was to develop knowledge about the interactions between professionals (social workers, health workers, teachers, etc.), children and parents to improve practice as well as the teaching of social work students. The study was carried out in 2013 and 2014 within a framework of a research partnership between a University College and three CWSs in central Norway, and funded by the University College.

Social workers from the three municipalities identified families who met the inclusion criteria. The selection of families was based on the following criteria: i) children who were or had been CWS service users; ii) children burdened with complex problems (e.g., social-emotional problems or various forms of neglect and violence); iii) children who were involved with at least one other helping agency; and iv) children aged seven to sixteen. The rationale for including children seven years of age and older was due to the Norwegian Welfare Act stressing that children from the age of seven should be actively listed to by the CWS. Due to this, we were interested in finding out whether children from the age of seven were included as partners in interprofessional meetings, and how their involvement was facilitated. In particular, we were interested in developing knowledge from the children's perspectives. The families who wanted to participate responded directly to the researchers or were contacted by researchers based on consent given to the social workers. We made contact with 15 families, and among these, 20 children fit the inclusion criteria. Five of the children did not want to participate, and five of the children were not allowed because their parents felt it would be too stressful for them to participate in the interviews. We were left with a sample of ten children, all of whom had a Norwegian ethnic background, five girls and five boys. The youngest child

was nine and the oldest turned 17 during data collection. All the children were in contact with the CWS; seven children were living at home and receiving family support and three were living in foster care.

We conducted two qualitative interviews with nine children, which allowed time to expand on narratives. One talkative child was interviewed once. The interviews took place in the children's homes, in cafes or at the library and the average duration was one hour per interview. During the interviews, the children received a soft drink and snacks. The interviews were conducted by the first and last authors of this paper and were transcribed by the first author. All three authors participated in the analyses and the writing of the article.

The interviews were semi-structured, using a guide that consisted of four topics: (1) children's preferences in their daily activities, (2) their views on what could be difficult and troublesome in their life, (3) their contact with the professionals and (4) their views about what might help to make life easier. This paper examines the third theme: children's interactions with professionals.

The interviews were inspired by a narrative approach, and the researchers supported the children with open and reflective follow-up questions (Holstein & Gubrium 1995; Riessman 2008). The researchers used a piece of paper with four pictures to visualize the interview themes; the pictures were emoticons such as the thumbs-up signs and smiley face. When interviewing the younger children, paper dolls and drawing materials were used. Some of the children invited the researchers to take part in activities such as computer games, care of pets and trampolining. Play and the use of materials mentioned above, were helpful in developing relationships and in encouraging the children to talk.

None of the children knew the researchers in advance, but they seemed comfortable in the interview situation, and some presented detailed accounts of their relationships with professionals. One girl (Sophia) was particularly talkative and analytical. Two children did not remember much about the adults who had helped them, and one did not want to talk about adults in the CWS and in the mental health services. Perhaps the questions challenged their loyalties or raised sensitive issues, or perhaps they felt stigmatized for being in contact with these services. However, all children talked openly about their teachers. None seemed to be troubled during or after the interviews. The children seemed to enjoy sharing their experiences; they smiled and laughed during the meetings.

The interviews were subjected to a thematic analysis, following the stepwise deductive-inductive method by Tjora (2012). This analysis began by staying close to the text, followed by working inductively, making analytic categories, and deductively understanding the data using the theoretical framework presented at the beginning of this paper. To help with the coding, the software programme NVivo was used.

Although an analysis based on ten informants cannot support a generalization in the traditional sense, the strength of qualitative studies lies in their level of details (Geertz 1973). The children's specific and local experiences have provided us with important knowledge of general issues with regard to their contact with professionals and the opportunities for collaboration.

Informed consent was obtained from the children and their parents. The children received a child 'friendly' information brochure before they participated in the interviews, and they had to confirm in writing whether they wanted to take part in the study. They were also told that they could end the interview and withdraw from the study whenever they wanted without any repercussions. Name on children in this paper are pseudonyms and the information has been anonymized. Ethical clearance was granted by the Norwegian Social Science Data Service (NSD).

## **RESEARCH FINDINGS**

The analysis highlighted three main themes: (1) meetings between professionals and children (2) children's experiences of factors that facilitated and strengthened participation and (3) the importance of trust in developing relationships with children. These themes are discussed below.

### **Meetings between professionals and children**

The children met the professionals mainly one-on-one and oftentimes several adults from the same agency attended the same meetings. The professionals included teachers, social workers, pedagogical psychological counsellors, school counsellors, school community workers, general practitioners, psychologists and psychiatric nurses.

Four children (Tylor, Sophia, Ian and Erik) had participated in meetings with professionals from more than one agency. The main goal of these meetings was to coordinate and evaluate

the involvement of various agencies. Only Sophia (17) and Tylor (16) presented detailed accounts of these meetings. Sophia referred to a number of meetings, while Tylor mainly talked about the last conference he had attended and situations in which he was not being listened to or supported in expressing his views. Ian (15) talked about one meeting with the CWS and the school. Erik (16) referred to meetings in general, without being able to recall too many details, instead noting that the meetings were too long and ‘full of nonsense’. However, he enjoyed being involved in decision-making, but when asked if he wanted to be a part of coordinating meetings, he said ‘no’.

Sophia (17) had attended coordinating meetings on and off, and she described her experiences this way:

There is one part of me that likes to be part of the meetings, just to get to know what they say about me. I took part in a meeting last fall, but it was overwhelming. There was my new caseworker and others from the CWS, two new psychologists from the psychiatric centre plus the old psychologist and the nurse. Then, there was also my new teacher, the doctor and dad.

It was uncomfortable for her to be present, but at the same time, she wanted to be informed and listened to. The rest of the children referred to individual meetings with professionals. Their experiences with inter-professional collaboration was limited, and they believed that it was mainly their mothers who communicated with the professionals. Apart from this, the children did not reflect on their non-involvement in the professional meetings. To sum up, the children did for the most part refer to individual encounters with professionals and very few questioned why they did not take part in inter-professional conferences.

### **Children’s experiences of participation**

Children's experiences of participation varied. The overall impression was that the children were not informed about the services provided; at least, they could not recall receiving such information. They found it difficult to recall situations where they had been involved in meetings or in decision-making processes. These findings are consistent with the research findings referenced earlier in the paper. However, there are exceptions, and we will present examples in which professionals did facilitate children’s participation.

#### *Listening to children*

Some of the professionals were described as skilful listeners. Angela (10) referred to a teacher she liked, and when being asked about the teachers listening skills, she said:



She listens to us and has time whenever a pupil is having a hard time. She wants us to be happy and not walk around thinking about difficult things.

Angela described a teacher who showed solidarity with the children and addressed the children's concerns and problems. Angela identified the qualities when describing an alert and sensitive teacher.

Sophia (17) reflected upon the differences between being or not being listened to in her encounters with professionals from the mental health care services.

It hurts not being listened to when you are promised help. Although I tried to reformulate what I said, I was not taken seriously. They seemed to be deaf. The difference was great when I met an adult who listened to me. Suddenly I looked forward to the meetings; I felt I was receiving help. The other adult took me seriously, almost as if we were at the same maturity level. You must actually show that you are listening.

These reflections indicate that listening is more than just being able to physically hear what children are saying. It's more about being a careful listener.

Careful listening was associated with showing respect for the wishes of the child. Sophia believed that an example of a good working relationship was when a professional had supported her in developing her goals for the future. Sophia (17) described her experiences with a professional in child psychiatric services as follows:

I said that I wanted go into a helping profession in the future. Instead of doing as many people before had done – giving me a strange glance and starting to talk me out of such plans – he said that he would help me realize these plans.

In this case, the helper demonstrated that he believed in Sophia and supported her in pursuing her goals with regard to undertaking higher education.

#### *The importance of emotional support*

Ian (15) described his collaboration with the CWS as if they were teammates with a joint mission to help his parents stop drinking. When a meeting was held with his social worker, the teacher and his parents, he felt that he had the authorities on his side, which encouraged him to talk freely without his parents controlling him:

There and then, I was able to say what I wanted and express my thoughts. I was not discriminated. If my parents had something to say, they were not allowed until I had told my story.

Sophia (17) described how eye-contact with one professional had helped her to speak up in a meeting between the school, the general practitioner and her parents.

I didn't want to go into everything about my parents, but then I looked at the school outreach worker who was the only safe person there. She was a rock for me during the entire meeting.

In dealing with the professionals, the children often struggle with their loyalty to their parents. In Sophia's case, the presence of a particular person who supported her through non-verbal communication enhanced her ability to tell her viewpoints.

#### *To be offered pedagogic resources*

Some of the children requested professionals to get more involved in activities together with them. Peter (10) thought it was boring to spend time with adults without having anything to do. He and Tylor (16) believed that adults who wanted to help must spend time with children and take part in play and computer games:

Perhaps the grown-ups ought to be more interested in PCs and video games. When they see me playing they think, oh what rubbish, so many colours it makes me dizzy and so on. They should try to get involved and see what it's about.

Angela (10) appreciated participating in a support group where activities and play were combined with group discussions.

We play with regular toys and then there are two adults talking to us about things. It's fun.

Angela stressed the importance of adults being physically active and having fun; she said that such behaviours are essential if children are to become engaged in conversations with adults. Play seems to be an effective tool to make this happen.

Another child, Emily (9), used to make drawings when she attended meetings at CWS with her mother.

When I visit CWS with my mother, I have access to drawing materials and I can draw while the adults talk. I do not care what they are talking about, but when I hear them mentioning my

name, I listen. I'm always told not to speak and interrupt, but I cannot avoid talking when I hear they talk about things I know.

The professional working with Emily had drawing materials in her office. In one respect, this seems to be a child-friendly gesture, but at the same time, the professional did not pay attention to what Emily had to say when she interrupted the conversation with her mother.

According to the children, pedagogical resources can play an important role in facilitating communication between children and professionals, but it can also keep the child busy when adults have to talk. In addition, tools and play encourage children to talk about their experiences, thoughts and feelings, something we, as researchers, also experienced during our interviews with the same children.

### **Relational Work with Children**

The children described their relationships with the professionals differently, but a trusting relationship fostered participation. The development of trust was dependent on how the professionals approached them and invited them into partnerships. In the process of developing trust, the children found the following elements to be crucial.

#### *Seeing signals and interpreting children's expression of feelings*

Several of the children emphasized that professionals should be able to notice when the children were having a hard time. Angela (10) said:

My teacher knows when we are unhappy. She understands that something is wrong because she knows what we normally are like. She notices that there is something – if we are bored or happy.

If professionals want to know how the children are feeling, Peter's (10) advice was that they should look for signs, for example if children flush, speak softly and rub their eyes. He meant that these signs can indicate that the children are having difficulties and struggling not to cry. The children emphasized that the professional should be alert to their body language.

#### *Dare to talk about difficult matters*

Talking to professionals about difficult matters was considered to be both a relief and a challenge. Several found it difficult to talk openly about problems they experienced at home or at school, but when they managed to talk, it felt good.

Mia (16) talked about conflicts among the girls at school and described how a teacher demonstrated courage and the ability to act. The teacher understood that there was a disagreement, took hold of it, talked with them, and they managed to sort it out. Sophia (17) had been feeling depressed. Instead of going home after school, she stayed, and a teacher noticed her:

She was the one who came to me wondering why I was sitting there, and then she sat down and talked with me, while the others just walked by.

The children appreciated encouraging professional listeners who had noticed when they were emotionally upset and took the time to talk and listen to their feelings.

#### *Understanding and recognizing the child*

Children also appreciated professionals who understood them and showed empathy. Sophia (17) said, 'I ended up with such a good contact with my teacher that I could borrow books from her. I don't think anyone has understood me as well as her'. Angela (10) was very pleased with a teacher, whom she could talk to about everything. She described this teacher as being very kind and she understood all the pupils in the class.

Being understood was crucial for Sophia and Angela when they described good relationships with professionals.

The children experienced both rejection and recognition from professionals. Again, Sophia (17) had some positive experiences. A health worker had paid attention to her and responded:

Things went really well between us. I know that if it hadn't been for him, I wouldn't have coped. I can't talk to anyone like I can talk with him. He is the only one who really listens and tries to help me. We are working together to make it better in the future. Time after time, he says that he will not give up on me.

This quotation demonstrates that the children need to feel valued in professional relationships.

Another example is Emily's (9) experience. She placed her teachers in two categories: the kind ones and the bad ones. Her reflections reveal how she identified the characteristics of a good relationship:

She helps me a lot. She likes almost everything I do. She is also very kind to me. If I have done something wrong, she speaks with me, and does not yell at me.

Emily described this teacher as a caring, affirming, supporting and respectful person, and she distinguished between talking and yelling. She had felt that adults yelling at her created a feeling of rejection, while talking or real dialogue created space for recognition and acknowledgement.

According to the children, they felt recognized when they were being listened to but also valued and cared for.

### *Trusting relationships*

Some of the children described trusting relationships with professionals. Sophia (17) was the most reflective on this subject. She believed that openness and honesty were important elements in these types of relationships.

I have gained confidence in many professionals because they inform me in advance when they contact my parents or my teacher. When the school counsellor and the school community worker sent a referral to the CWS, they looked me in the eyes and told the truth.

Social workers are usually trained not to disclose personal matters to service users. However, Sophia emphasized professionals' willingness to share private narratives.

When I talk to a person about my private life, it helps a lot if the person tells me a little about himself; that way I get to know something more than just name and profession. How can I trust a person I do not know anything about?

The younger children were less vocal and outspoken, but they showed confidence when describing agencies and professionals in friendly words. Peter (10) said: 'The system is called child protection and they have helped our family'. The service was to be trusted because it had been living up to its name by assisting his family. Hanna (12) talked about having met three social workers after entering the CWS, and the last one was the best: 'I wish I could keep the one I have at the moment because she is so kind to me'. Care and friendliness among the professionals seem to be an important factor for creating trust in children.

Another trust-building pathway in encounters with children was to be inclusive, which meant giving the child a seat at the table and providing a space for dialogue. Sophia said (17):

He said we were like a combat team. It wasn't a matter of one being the boss over the other. It's a matter of showing that you are listening, that you actually respect the person who is talking with

you and that this is mutual. It functioned because we listened to each other and showed each other respect.

Emily (9) came to feel like part of a team in this way:

The social worker is kind. We talk together and she asks: How are you? She is *my* Child Welfare Services.

Through ‘the eyes of the children’, a trustworthy professional is an encouraging listener, honest, willing to share stories from his/her own life, caring, respectful and collaborative.

## **DISCUSSION**

The aim of this study has been to explore CWS children’s experiences with participation when dealing with professionals from multiple agencies. The research suggests that the children were hardly involved in teamwork settings. Single encounters with the professional were typical. This means that most of the children did not participate in developing services together with professionals who collectively were responsible for providing these to them. This calls for more child-centred CWS professionals who perceive the child as a partner in the meetings. As previous research has illustrated, children’s participation at meetings strengthen their influence as does the agency teamwork (Vis & Thomas 2009; Winsvold 2011).

Our study also indicates that to facilitate children’s participation in meetings, the professionals must be able to enter into close relationships with the children, which is consistent with other studies (Bessell 2015; Bijleveld *et al.* 2015). Children that experienced neglect and violence may lack trust in adults, something that could be a challenge in worker-child relationships. This suggest that the professionals should make sure the child always has a trusted adult present in meetings. As this study shows, children found it difficult to speak freely with parents present in the same meetings.

A third important finding is that the children called for professionals to make more use of pedagogical resources to involve them, and they called for professionals who could interact through play. This is consistent with Ruch *et al.* (2017), who found that most professionals in CWS were unfamiliar with the use of creative resources dealing with children. When knowing how activities may promote child participation in the context of CWS (e.g Lefevre 2010; Shier 2001), the predominant focus on verbal communications skills can be a problem, especially if this overlooks the importance of developing worker – child relationships based on play and creative activities (Petrie 2011b: 79)

One last important finding in our study is the identification of what the children see as the central elements of trustful relationships with professionals. The children wanted professionals who could pay close attention to their problems, challenge them about their worries, but also listen to them with empathy and recognition. This calls for professionals being skilled in careful and encouraging listening (Petrie 2011a: 53-54). On the other hand, professionals should also be prepared to share some private narratives with the children. Sophia phrased it this way: ‘How can I trust a person I do not know anything about?’.

Overall, the professionals should be collaborative, and for the children this means that they look for dialogical relationships. There is a call for humble professionals who avoid being too powerful or dominant in the participatory processes with children in contact with the CWS. However, the asymmetric power balance between the children and the professional still remains. The professional’s interventions may restrict children’s participation; however, the children’s views are to be considered, and they should receive a proper explanation whenever their wishes are not followed by action. To fulfil children’s participatory rights, the professional mission is to facilitate for children to become active participants in meetings and professional encounters. Excluding the child from teamwork makes the professionals become the dominant part in terms of action plans and service objectives. The child may experience that his own needs are overlooked. We believe that children should be invited to take part in inter-professional meetings, and this demands the use of more creative forms of communication. Perhaps it would be useful if the arrangement of meetings could be planned with each individual child beforehand. One example of this is to make a Pecha Kucha presentation together with the child to present at the upcoming meeting. This format allows the child to give a brief presentation (ca. six minutes) utilizing power point slides with pictures, video clips, drawings followed by a personal story. This format can be an effective tool, creating space for the child to set the agenda and gain the opportunity to have a dialogue with the adults about themes that the children thinks is important in their everyday life. In this way, the inter-professional meetings may become an enjoyable forum for children and perhaps for the adults as well. However, this calls upon professionals to think non-traditionally about how the bureaucratic case process can be carried out.

It seems like the most important building blocks whenever the aim is to enter into true partnerships with children in contact with the CWS; is the professional’s ability to develop a trusting relationship, but also, as this study highlights in particular, to provide emotional support and apply pedagogical approaches in their interaction with the children.

## Acknowledgement

The authors thank the children who took part in this study for their time and for sharing their experiences.

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