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UNDERSTANDING THE PRACTICE OF FRONTLINE CHILD PROTECTION SOCIAL WORKERS WORKING WITH BLACK, ASIAN AND MINORITY ETHNIC (BAME) FAMILIES

HIU TUNG VIVIAN CHAN

A thesis submitted to the University of Huddersfield in fulfilment of the requirements for the degree of Master's (MSc) by Research in Social Work and Social Policy

The University of Huddersfield

April 2019
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Abstract

Introduction

All social workers, regardless of their cultural or ethnic background, have to work with Black, Asian and minority ethnic (BAME) families. Cultural competency is of considerable importance in social work practice. Existing literature has focused on the reasons why BAME families come into contact with children’s services, the challenges social workers face when working with these families and the numerous meanings attached to cultural competence. There is limited research on how, and whether, practitioners in England (and elsewhere) practise cultural competence in frontline child protection contexts. Focusing on child protection, the present research aimed to understand current cultural competence practice among social workers working with BAME families.

Methods

Nine current or former social workers took part in one to one, semi-structured interviews. Inclusion criteria for participants was at least five years’ experience in child protection social work. Participants had an average of ten years social work practice. Five social workers identified themselves as ‘White’, three as ‘Asian or Asian British’, and one as ‘Black or African or Caribbean or Black British’. All but one of the participants were working or had worked as social workers in the Midlands; the remaining participant had worked in London. All the participants, between them, were working, or had worked in four different local authorities. Six participants were currently employed as frontline staff, two as managers and one was now a University social work lecturer. Six of the participants reported having worked with 60 or more BAME families. Thematic analysis was used to analyse the interview data.

Findings

Six major themes emerged from the data. The present study found that social workers, when working with BAME families, had to: (i) understand the BAME family’s unique experiences, networks and knowledge of public services; (ii) value community as a resource, while acknowledging how community may
have ‘hidden’ problems, and understand communities better; (iii) explore culture by realising culture is not an excuse for abuse, learn about cultural differences, and recognise the influence of culture on roles within families; (iv) use interpreters to ensure accurate communication with BAME family members, maintain the quality of interpreters, assess relationship between interpreters and families, use an interpreter skilfully and have training in using interpreters.

To improve their cultural competency in child protection practice, social workers have to: (v) engage in continuing professional development - using online resources, conducting their own research, and consulting with community organisations or ethnic-specific services, specialised teams and interpreters; (vi) reflect as a practitioner, no matter whether a BAME or White social worker, and reflect on one another’s practices to ensure BAME families are treated equally and fairly.

**Conclusions**

Social workers need to acknowledge the uniqueness of each BAME (and White) family and their experiences. The present study recommends that participants incorporate intersectionality and the social model of child protection when working with BAME families. In terms of policy, consideration should be given to greater public education on public services or supports available, and on “acceptable” child-rearing practice. A community’s resources should be utilised to help ensure the wellbeing of children. Social work educators should train would be social workers on how to work effectively with interpreters and how to take an experiential learning approach to improve their ability to work with BAME families. In practice, social workers need to learn more about, and better understand, BAME families, communities and cultures. Social workers also need to use interpreters appropriately, and to continuously learn and reflect as a practitioner. Further research is needed to fully appreciate the different aspects of social work practice with BAME families, to understand these children and parents' perspectives on child protection interventions, and to improve partnership working with ethnic-specific agencies to identify better ways to support these families.
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Chapter 1 – Introduction

The role of social workers has been defined as: "respect for the inherent worth and dignity of human beings, doing no harm, respect for diversity and upholding human rights and social justice" (International Federation of Social Workers, 2014). It is of fundamental importance that social workers value and respect diversity in a multicultural society. The Code of Ethics for Social Work (British Association of Social Workers [BASW], 2012) and the Standards of Proficiency - Social workers in England (Health and Care Professions Council [HCPC], 2017) make it clear that social workers have to learn about working with a diverse group of service users and understand different cultures. At the same time, it is of vital importance that social workers challenge discrimination and promote social justice. Child protection work is, however, never straightforward, so how can social workers demonstrate these values within their practice?

It has been more than 15 years since the Victoria Climbié Inquiry was published. Lord Laming (2003), who led the inquiry, pointed out explicitly that professionals work within a culturally diverse society and should safeguard children from all ethnic groups. Social work researchers internationally are endeavouring to improve social work practice with ethnic minority families nationally and cross-nationally (Katz & Sawrikar, 2014; Križ & Skivenes, 2010a, 2010b, 2012 & 2015; Nadan, 2017; Sawrikar, 2013 & 2015). Studies on this subject in the United Kingdom (UK) have often been focused on the reasons ethnic minority families have been referred to children's services (Chand et al., 2005). Far too little attention has been paid to social work practice when working with Black, Asian and minority ethnic (BAME) families. In a recent study, Križ and Skivenes (2010a, 2010b, 2012) compared the practice of social workers working with ethnic minorities in the UK and Norway. They found that issues between social workers and families in connection with the “cultural gap” (“differences in values” and “differences in system understanding”) (Križ & Skivenes, 2010a), language (Križ & Skivenes, 2010b), and the focuses of practitioners (child focused or family focused) (Križ & Skivenes, 2012), and that these were the main
challenges that arose in practice in both countries. Focusing on the UK, the present study aimed to increase understanding of the practices social workers adopt in working with BAME families, which are specific to the child protection context. In addition, social workers’ views on how to improve their cultural competence in child protection practice was also examined. The present study adopted a qualitative research approach. Using a semi-structured schedule, nine social workers were interviewed about their practices with BAME families.

The following chapter begins with an explanation of terminology and definitions in relation to ethnicity/ethnic group, ‘race’ and racism, and culture. It then goes onto provide an overview of current knowledge regarding social work practice with BAME families in England and a summary of the issues that this existing research has highlighted. Chapter 3 describes the research methodology, including: its ontological stance and epistemological position; the research strategy; ethical issues; data evaluation and data analysis. Chapter 4 presents the findings from the interviews with the social workers. Chapter 5 discusses these findings in the context of the wider literature and highlights the limitations of the present study. The last chapter presents the conclusions from the current work and provides recommendation for further research.
Chapter 2 – Literature review

2.1) Terminology

Opinions are divided as to what terminology should be used to describe minority ethnic groups (Ford, 2015). Various terms are used and interchangeably so in the UK. Examples of the terms that have been used include ‘ethnic minorities’ (House of Commons Library, 2017), ‘ethnic minority groups’ (Department for Work and Pensions, 2010), ‘minority ethnic groups’ (Office for National Statistics [ONS], 2012), ‘Black and minority ethnic’ (BME) (Equality Commission for Northern Ireland, 2014) and ‘Black, Asian and minority ethnic’ (BAME) (Ministry of Justice, 2018). There has been an extensive debate on the merits and drawbacks of each of these terms (Aspinall, 2002; Bhopal, 2004; Sandhu, 2018).

‘BME’ and ‘BAME’ are the terms more commonly used across the health and social care sector, including by the Social Care Institute for Excellence (SCIE, n.d.), Community Care (n.d.) and National Institute for Health and Care Excellence (2018). It is, however, necessary to acknowledge the limitations with both terms. For example, both terms overgeneralise minority ethnic groups into one homogeneous group and also label people – denying them the opportunity to self-identify (Equality Challenge Unit, n.d.). Use of the term ‘BME’ was regarded as a politically-influenced decision and Universities Scotland (2010) noted that ‘BME’ was “an attempt at comprehensive coverage… but can be unpopular with those who find it cumbersome or bureaucratic”. For the purpose of this study, the term ‘BAME’ has been adopted instead - thereby, ensuring a consistency of terminology with the health and social care sector. The terminology authors used in the original text will be utilized when referring to the literature.
2.2) Definitions

People often conflate the terms ‘ethnicity’, ‘race’ and ‘culture’ (Cornell & Hartmann, 2007; Malik, 2017). It is important to unpack the differences between these three terms.

2.2.1 Ethnicity/ethnic groups

There is a voluminous literature on the meaning of ‘ethnicity’. The term ‘ethnicity’ is derived from the Greek word ‘ethnos’ (nation, people) and ‘ethnikos’ (national and foreign). In a more modern world, ethnicity refers to social identities that are socially constructed by “descent and culture” (Fenton, 2010). People build on these perceived shared attributes to form different communities. Ethnicity can, therefore, be understood as a form of collective identity whereby people have “common racial, cultural, religious or linguistic characteristics especially designating a racial or other group within a larger system” (Fenton, 2010, p. 13). Fenton’s definition is built on Max Weber’s conception of ethnic groups1. Weber (1978) emphasised that ethnic groups are künstlich (socially constructed) due to the belief in shared gemeinschaft (community). The key idea, here, is that people from the same ethnic group have a perceived sense of belonging.

Another influential development regarding the concept of ethnicity was provided by social anthropologist Fredrik Barth (1969) in Ethnic Groups and Boundaries. Developing on from Weber’s stress on social construction, Barth regarded ethnicity as a social organisation, which is formed by self-ascription and external ascription. He explained that ethnicity is not given but created when individuals become self-conscious of their own identity. There is no set list of attributes to be considered when determining this identity. However,

---

1 Weber stated that an ethnic group is

...those human groups that entertain a subjective belief in their common descent because of similarities of physical type or of custom or both, or because of the memories of colonization and migration; this belief must be important for the propagation of group formation; conversely, it does not matter whether or not an objective blood relationship exists. (1978, p. 389)
construction of identity can depend on factors like having similar symbolic features such as "dress, language, house-form, or general style of life" (p.14), or sharing similar believes and values of what is normal and appropriate. People acknowledge their own and other people’s ethnic membership through interaction with other people. Members within the same group will evaluate and validate their own shared characteristics. Barth stated that ethnic differences result from ongoing negotiations around boundaries between ethnic groups. When interacting with another group, there will be distinguishable differences in understanding and values\(^2\). There is also an expectation of negotiating difference by formulating a consensus in values.

2.2.2 ‘Race’ and racism

As with ethnicity, there has been great deal of discussion around the definition of ‘race’. The word was originally used to distinguish people by their genetic or biological characteristics, for example, blood and skin colour (Gilborn, 1990; Hall, 2000). This scientific classification was challenged by those who argue that race is socially, economically and politically constructed (Malešević, 2004). Using the word ‘race’ is controversial, though, due to the ambiguities surrounding its definition. Hence, Huxley and Haddon (1935) proposed abandonment of the term and its being replaced by the term ‘ethnic group’. Moreover, the concept of race is often related to power, control, oppression, exploitation and exclusion (Gunaratnam, 2003; Miles and Brown, 1989). More recently, ‘race’ has been referred to within legislation in order to eliminate unlawful discrimination (racism). In England, the Race Relations Act 1976, Race Relations (Amendment) Act 2000 and Equality Act 2010 were enacted to promote the equal treatment of people regardless of race, colour, nationality (citizenship), or national or ethnic origin.

---

\(^2\) Barth notes there is "a recognition of limitations on shared understanding, difference in criteria for judgement of value and performance, and a restriction of interaction to sectors of assumed common understanding and mutual interest" (1969, p. 15).
2.2.3 Culture

‘Culture’ is the social behaviours, customs, norms and values people have or which they have learnt. A much cited definition refers to culture as the “complex whole which includes knowledge, belief, art, morals, law, custom and any other capabilities and habits acquired by man as a member of society” (Taylor, 1873, p.1). As mentioned above, different groups can possess different cultural characteristics that result in cultural differences. In social care, there are notions that social workers need to more be ‘culturally competent’ (Nadan, 2017). This will be further explored in section 2.11.

2.3) Ethnic minorities

In the latest England and Wales census, in 2011, individuals were asked to select from 18 options under five broad categories as to which ethnic group they self-identified with (Figure 1). A large majority of the population (86%) identified themselves as ‘White’ (ONS, 2012). Within the ‘White’ broad category, there were (as a proportion of the whole population) ‘White British’ (80.5%), ‘White Irish’ (0.9%), ‘White Gypsy/Traveller’ (0.1%) and ‘White other’ (4.4%). The ONS (2014) considered all ethnic groups other than ‘White British’ as ‘ethnic minorities’. The remaining 14% of the population were in one of the four other broad categories – namely, ‘Mixed/Multiple’, ‘Asian/Asian British’, ‘Black/African/Caribbean/Black British’ and ‘Other’, and all of these are regarded as minority groups. Asian/Asian British was the largest minority group and it was made up of Indian (2.5%), Pakistani (2.0%), Bangladeshi (0.8%), Chinese (0.7%) and other Asian (1.5%). Black African/Black Caribbean/Other Black (3.3%) was the second largest and it included African, Caribbean and Other Black. Mixed/Multiple ethnic group (2.2%) consisted of White and Black Caribbean, White and Asian, White and Black African, and other mixed. The ‘Other ethnic group’, which comprised Arab and any other ethnic group, was the smallest category and accounted for 1.0% of the population. More up to date figures, from the Annual Population Survey 2017, showed that 13.4 % of
the population in England were from a minority ethnic background (Nomis, 2018).

It is worth noting that these ethnic categories were chosen based on the UK legal definition of ethnic group and public consultation (ONS, 2009). They represented a combination of people’s skin colour, ethnicity and nationality. That is to say, the ‘ethnicity’ that was measured was not necessarily in line with the definition that was explained earlier. The ONS (2009) has acknowledged that there are limitations to the categories it uses.

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3 The House of Lords has defined 'ethnic group' as a group that regards itself, or is regarded by others, as a distinct community by virtue of certain characteristics that will help to distinguish the group from the surrounding community. Two of these characteristics are essential:

1. A long shared history, of which the group is conscious as distinguishing it from other groups, and the memory of which it keeps alive; and
2. A cultural tradition of its own, including family and social customs and manners, often but not necessarily associated with religious observance.

Other characteristics are relevant but not essential. Relevant characteristics are:

3. Either a common geographical origin or descent from a small number of common ancestors;
4. A common language, not necessarily peculiar to the group;
5. A common literature peculiar to the group;
6. A common religion different from that of neighbouring groups or from the general community surrounding it;
7. Being a minority or being an oppressed or a dominant group within a larger community.

Understanding the practice of frontline child protection social workers working with Black, Asian and minority ethnic (BAME) families, Chapter 2 Literature review

Note: The bar chart does not show data for 'White British'.

2.4) Features of child protection referrals among BAME families

The United Nations Convention on the Rights of the Child 1989 (Article 19) states that all children have the right to be free from any form of violence regardless of race, colour, sex, language, religion, national or social origin. This principle is embedded within the Children Act 1989 and the Children Act 2004, which are the legal cornerstones of child protection policy in England (Department for Education [DfE], 2010). These pieces of legislation make clear that the welfare of children is paramount. All children have an equal right to be safeguarded and have their welfare promoted. The Children Act 1989 places a duty on a local authority to offer support to children in need and to their families (Section 17), and to make enquiries where there is a "reasonable cause to suspect that a child… is suffering, or is likely to suffer, significant harm (Section 47) (Brammer, 2015). Following referral and assessment, a child can be identified as a 'child in need' (CIN) or at significant risk of harm, which means they may be subject to a child protection plan (CPP) (Wilson et al., 2011).

There were 11.3 million children under the age of 18 years in England and Wales (ONS, 2011). The child in need and child protection statistics for 2017-2018 showed that 53,000 children were subject to a CPP. Non-white\(^4\) children made up 23%\(^5\) of the CPP population (DfE, 2018a). Table 1 shows the proportions of the child population (0–17 years) by ethnicity in the general population and those subject to CPP in England (DfE, 2018; ONS, 2011). Children from White and Asian/Asian British backgrounds are under-represented in CPP data (each by approximately 4%). By contrast, the proportion of children from the ‘mixed’ ethnic group is almost twice the proportion who are in the general population. Black/Black British and Other ethnic groups are only slightly over-represented in the CPP population.

---

\(^4\) Mixed black, Asian or Asian British, Black or Black British and Other ethnic group.

\(^5\) This is calculated by the number of non-white children subject to CPP over the total of children with known ethnicity, rounded to nearest one decimal place.
based on existing data is challenging as there are limitations with the data. For instance, most up-to-date census data is from 2011 and the ethnicity of some children on CPPs is not known. Despite these limitations, the comparison does give some insight into the current situation, which is similar to that discussed by Chand and Thoburn (2006). They completed an extensive literature review of the research on British child welfare services for ethnic minority families. White children had a higher rate of being subject to CPP due to neglect (Owen & Statham, 2009). Minority ethnic children were more likely to be referred to children’s social care due to physical abuse, particularly because of inappropriate physical chastisement (Middleton & DeSoysa, 2016). Sexual abuse was more likely to be reported in White families than it was in non-White families. There are concerns, though, that sexual abuse may be under-reported in families where English is not the first language or where they are from cultures where discussion of sex is less common. This under-reporting may be due to the sense of shame and the fear of rejection from family or community that can surround reports of child sexual abuse (Akhtar & Gilligan, 2006; Sharp, 2015; Ward & Patel, 2006). Chand and Thoburn (2006) found that cases of emotional abuse were more likely to be reported in White families than they were in non-White families. Unlike Chand and Thoburn’s analysis, though, recent data (Table 1) suggests children from minority ethnic backgrounds are being referred, for emotional abuse, at higher rates than other ethnic groups. The statistics for ‘multiple abuse’ require further analysis to be properly understood. In particular, more information is needed on each of these documented multiple abuse cases to understand what causes the under-representation of Asian/Asian British children and the over-representation of ‘mixed ethnic group’ children. (Asian/Asian British make up 10% of the general child population but account for only 6.7% of multiple abuse cases in CPP data. ‘Mixed ethnic’ group children make up 5.2% of the general child population but 8.5% of multiple abuse in CPP data).

Much of the reason why children are being assessed by professionals to be ‘at risk’ will be because of the challenging situations their families find themselves in. Bywater et al. (2017a), however, queried the relationship between child
protection enquiries and levels of deprivation. They found that minority ethnic children are more likely to be living in deprived areas than White children. They also showed, though, that Asian and Black children from the same area, in terms of levels of deprivation, are still less likely to be subject to child protection measures than White children (Bywaters et al., 2016a). Bywaters et al. argued that the features of child protection referrals for ethnic minority families need to be looked at in greater detail. Exploring disparities in children’s service interventions for different ethnic groups needs to take into account the interplay between ethnicity, racism, socio-economic status, service availability and policy (Bywaters et al., 2017b). Nonetheless, the data from Table 1 raise questions as to how social workers work with ethnic minority families to address concerns of abuse and neglect.
Table 1. Proportions of the child population (0–17 years) by ethnicity in the general population and subjected to child protection plans in England (DfE, 2018; ONS, 2011)

<table>
<thead>
<tr>
<th>Ethnicity</th>
<th>General child population: Census 2011 (%)</th>
<th>Total children who were the subject of a child protection plan as of 31 March 2018 (%)</th>
<th>Initial category of abuse(^1)</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>----------</td>
<td>----------</td>
<td>----------</td>
</tr>
<tr>
<td>Ethnicity not known(^3)</td>
<td>N/A</td>
<td>3.6</td>
<td>4.3</td>
<td>3.9</td>
</tr>
<tr>
<td>White</td>
<td>78.5</td>
<td>74.2</td>
<td>77.8</td>
<td>62.4</td>
</tr>
<tr>
<td>Mixed</td>
<td>5.2</td>
<td>9.0</td>
<td>8.1</td>
<td>10.0</td>
</tr>
<tr>
<td>Asian or Asian British(^4)</td>
<td>10.0</td>
<td>6.2</td>
<td>3.8</td>
<td>10.7</td>
</tr>
<tr>
<td>Black or black British</td>
<td>5.0</td>
<td>5.5</td>
<td>4.7</td>
<td>9.7</td>
</tr>
<tr>
<td>Other ethnic group(^5)</td>
<td>1.3</td>
<td>1.6</td>
<td>1.3</td>
<td>3.2</td>
</tr>
</tbody>
</table>

Notes:
1. Category of abuse as assessed when the child protection plan commenced.
2. 'Multiple' refers to instances where there is more than one main category of abuse. These children are not counted under the other abuse headings, so a child can appear only once in this table.
3. Excludes children of refused/not known ethnicity.
4. In the England and Wales census, Asian or Asian British comprises Indian, Pakistani, Bangladeshi, Chinese and any other Asian background. In CPP data, Chinese is counted as Other ethnic group.
5. In the England and Wales census, Other ethnic groups comprise Arab and any other ethnic group. CPP data includes Chinese as other ethnic groups.
* Percentage for CPP data is rounded to nearest one decimal place.
2.5) Current policy in England

As mentioned in Section 2.4, the Children Act 1989 sets out the statutory duty for social workers in promoting children’s wellbeing and safeguarding them from harm. The Act requires local authorities to consider a child’s “religious persuasion, racial origin and cultural and linguistic background” when making decisions (Section 22.5c). The legislation does not make specific reference to BAME families but simply lays the foundation of a practice framework for working with communities in general. The practice guidance, *Framework for the Assessment of Children in Need and their Families* (Department of Health [DoH], 2000), reminded social workers that assessment work needs to consider children and families’ ethnic and cultural background, and these should be embedded within the assessment.

The murder of Stephen Lawrence, the investigation of his murder by the Metropolitan Police Service (MPS) and the public inquiry into the MPS’s investigation (Macpherson, 1999) marked an important development in policy surrounding BAME families in Britain. Stephen Lawrence was a Black British teenager who was murdered in a racist attack in London in 1993. The inquiry found the response of the MPS to be incompetent and that the MPS was institutionally racist: “the collective failure of an organisation to provide an appropriate and professional service to people because of their colour, culture or ethnic origin” (Macpherson, 1999). One of the major findings of the inquiry was that public authorities had to be much more concerned about racial equality. It was in this context that the original Race Relations Act 1976 was amended by the Race Relations (Amendment) Act 2000 (Field & Roberts, 2002). A decade later, the Equality Act 2010 was introduced to strengthen protection against form of discrimination.

Another major development in policy followed the murder of 8 years old Victoria Climbé by her carers in 2000, again in London. This murder occurred despite the fact that Victoria was known to numerous organisations as a result of
safeguarding concerns. Lord Laming (2003), who led the inquiry, emphasised that professionals work within a culturally diverse society and should safeguard children from all ethnic groups. Laming acknowledged there was some evidence to suggest that Victoria’s ethnicity (Black African) may have caused professionals to hesitate in asking necessary questions of her carers regarding her welfare. The report stressed that professionals should not be fearful of being accused of being racist and should always challenge any suspicions of harm towards children (Laming, 2003). After Lord Laming’s report, the government published its Green Paper *Every Child Matters* (Department for Education and Skills, 2003), along with subsequent related documents\(^6\), and passed the Children Act 2004, in the hope of bringing about positive changes in the child protection system. Other practice guidance in the form of *Working Together to Safeguard Children* (WTSC) and its subsequent iterations (DfE, 2006, 2010, 2013, 2015, 2017, 2018), made clear that safeguarding all children required the combined efforts of different agencies. Professionals needed to share information with each other to ensure they obtained a clear picture of the child’s situation. An examination of these documents, however, reveals that there is little focus and no explicit measures to address BAME families’ needs. Chand (2008) expressed a similar view and believed that child welfare policy and legislation failed to recognise the impact of child safeguarding interventions on children from different ethnicities.

Although there was no specific mention of BAME families in the *Munro Review* (Murno, 2011), her work has had a critical role in re-shaping the child protection system in England (Brammer, 2015). The *Munro Review* stressed that professionals’ expertise should be valued in assessment work rather than a practitioner just following practice guidance or procedures. Social workers with enhanced knowledge and skills, and critically analysing the circumstances of families, can become more responsive to the diverse needs of children and families (DfE, 2011). These arguments indicate that social workers should use professional judgment to consider each and every child’s specific

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\(^6\) *Every Child Matters: Next Steps* (Department for Education and Skills, 2004a) and *Every Child Matters: Change for Children* (Department for Education and Skills, 2004b)
circumstances, including their ethnic background. The Children and Families Act 2014 was another important development in children’s welfare policy. The Act transformed adoption practice, in particular, as there is no longer a requirement for ethnic matching of BAME children to parents.

Despite increased effort in considering diversity within policy and social work practice, there has still been ‘scandals’ over the handling of concerns over BAME children - such as Khyra Ishaq (Radford, 2010) and Daniel Pelka (Lock & Fraser, 2013) - by organisations involved in safeguarding. Since the establishment of National Case Review Repository in 2013, by the National Society for the Prevention of Cruelty to Children (NSPCC), there is clear documentation that at least three inquiries each year in England are in relation to BAME families. Bernard and Harris (2019) argue that an analysis of serious case reviews, particularly those involving Black children, reveals that practitioners’ consideration of race and cultural/religious beliefs on children’s lives is still inadequate. They recommend that more effort needs to be invested in addressing issues of culture, ethnicity and language when safeguarding children from a BAME background. It is hoped that the Child Safeguarding Practice Review Panels, established by the Children and Social Work Act 2017, along with the revision of WTSC 2018, will be able to address some of the above policy and practice gaps (Bernard & Harris, 2019). These panels are expected to review child deaths and serious safeguarding cases nationally, in England, making recommendations to improve safeguarding practice and policy (DfE & Zahawi, 2018).

7 The following are examples of serious case reviews that includes BAME families.
2013: Child H (Brent), Hamzah Khan (Bradford), Child H (Wiltshire), Child 1 (Bolton)
2014: Child H (Tameside), Jamilla (Tower Hamlets), Child A (Peterborough), Child D (Coventry), Hiers (Surrey)
2015: Child B (Kingston), Child J (Cambridgeshire), Child R (Harrow)
2016: Rose (Hammersmith and Fulham), Child S (Greenwich), Family HJ (Herefordshire)
2017: Child S (Birmingham), Siblings W and X (Brighton and Hove), Child YT (Enfield), Chris (Liverpool)
2.6) Challenges faced by BAME families

Understanding the difficulties BAME families encounter can help social workers gain a more holistic view of children's circumstances and offer appropriate interventions (Ventress, 2018). Poverty, 'migrant context' and racism can be complicating factors for BAME children being subjected to child protection interventions.

2.6.1 Poverty

The *Race Disparity Audit* (Cabinet Office, 2017) reported that ethnic minorities are more likely to be in poverty and living in a deprived neighbourhood than their White British counterparts. The correlation between child maltreatment and poverty is well established in the social work field both nationally and internationally (Berger & Waldfogel, 2011; Macmillan, 2009; Pelton, 2015). Bywaters et al. (2016b) argued, though, that there is not enough research evidence in the UK on the extent of the exact relationship between family poverty and child abuse. However, poverty is likely to be a risk factor for child abuse. Challenging socio-economic circumstances within families may lead to stress on parents and have an impact on their parenting capacity (Gupta et al., 2014). Parents from minority ethnic backgrounds can experience difficulties in parenting their children as a result of low income, lack of employment and resources, and overcrowded living environments (Barn et al., 2006). Chand (2000) also drew attention to the possibility of poverty resulting in ethnic minority families' higher exposure to greater surveillance by children's services.

2.6.2 'Migrant context'

BAME families may experience adverse effects from their migration. The Government Office for Science (2011) pointed out that economic (for example, work-related), political (for example, war and persecution), demographic (for example, overpopulation), social (for example, education and family) and
environmental (for example, climate changes) factors are reasons for migration. While some economic and social migration is often voluntary and planned, political migrants, such as asylum seekers, maybe forced to move away from their home country to countries, such as the UK, and have no familial connections in this country. Despite the reasons for migration varying, BAME families in these circumstances are quite highly likely to encounter stress as a result of these experiences. They will, for example, need to learn about, and adjust to, and fit in with their new environment (Carballo & Nerukar, 2001; Carswell et al., 2011). These parents may feel isolated, lack understanding of the UK systems' and organisations' roles, be low in confidence in approaching services and have limited support networks (Brookes & Coster, 2015). On the other hand, some BAME families may receive support from their communities but this support maybe problematic. There might be pressure, value-laden expectations and restrictions placed on families, from communities, which stem from concepts of 'honour' and 'shame' (Chimba et al., 2012). Families might, as a result, conceal their problems from their community and wider society rather than admitting difficulties and seeking the help they need. The migrant experience may lead BAME families to lack confidence and hesitate to engage with local support, including child protection system (Barn & Kirton, 2015). As Sawrikar and Katz (2014) remark, some ethnic minority families can be unaware of child safeguarding laws and systems and be fearful of authorities. Yet, explaining child protection procedures to, and building relationships with, families can be essential in promoting children’s welfare (Chimba et al., 2012).

2.6.3 Racism

Experienced or perceived racism is another issue that BAME families may face. Križ and Skivenes (2012) found that English social workers are less likely to pay attention to children’s experience of racism and social integration when compared to Norwegian social workers. Stereotyping, prejudice, bullying and harassment are some forms of discrimination that individuals from BAME backgrounds can face. Reports by the Equality and Human Rights Commission (2016) and the Cabinet Office (2017) both highlighted that racial inequality
exists in different areas of ethnic minorities’ lives including education, employment, health and judicial systems. There is an increase in reported race or ethnicity-based hate crimes and more individuals from Mixed, Asian and Black ethnic groups are crime victims and reported to be in fear of crime than are people from White ethnic groups (Home Office, 2017a, 2017b & 2017c). Ethnic minority parents have to protect themselves and their children from racism (Barn et al., 2006). There is also institutional racism, where organizations and professionals fail to treat BAME families appropriately (Macpherson, 1999). BAME families may be anxious about practitioners being racist and cultural oppressive, and may therefore be distrustful of the ‘system’ (Singh, 2006).

2.7) Obstacles for social workers

Social workers can face a lot of barriers when engaging with families in child protection. Social workers can face additional barriers when trying to engage with BAME families than with White families. For instance, cultural differences and language barriers are two of the main issues highlighted in the literature (Križ & Skivenes, 2010a, 2010b & 2015).

2.7.1 Cultural differences

It is commonplace for social workers to mention cultural difference as a challenge in working with BAME families. Križ and Skivenes (2015) compared social work practice with ethnic minorities in England, the United States and Norway. The majority of interviewees from all three countries raised differences in culture as an issue. Parenting or disciplining approaches, expectations of children, parents not understanding the child welfare system and language barriers were some detailed examples of problems that social workers highlighted (Križ & Skivenes, 2015). There was a cultural gap between practitioners and families due to the "difference in values" and "difference in system understanding" (Križ & Skivenes, 2010a). Families from different
cultures have their own set of ‘appropriate’ and ‘proper’ values in terms of child-rearing and child care. The ‘acceptable’ method in BAME communities may not be similar to the views of the majority group in the society. For instance, in some cultures, parents and carers are keen not to overprotect their children but rather leant through being exposed to ‘risky’ situations (Lancy, 2016). Physical chastisement remains a particularly sensitive and controversial subject. Straus, Douglas, and Medeiros (2014) analysed data from 32 nations and concluded that smacking children is still acceptable in some cultures. Not all BAME parents will be aware of the English Law on chastisement\(^8\), unless social worker or someone else points this out to them. Social workers are also facing increasing safeguarding issues in relation to specific culture harms, such as like Female Genital Mutilation (FGM) (Home Office, 2016), forced marriage (Foreign and Commonwealth & Office Home Office, 2018), breast flattening (National FGM Centre, n.d.-a) and child abuse linked to witchcraft and beliefs (DfE, 2012). Be that as it may, excessive harm towards children is not tolerated in any culture and all children must be safeguarded (Krug et al., 2002).

2.7.2 Communication barriers

Communication is vital in gathering and passing on information (Parrott, 2010). Communication enables social workers, children and parents to convey information and establish mutual understanding with one another. It is not unusual for practitioners to work with BAME families who speak more than one language, but who have limited English proficiency or who are non-English speaking. The NSPCC (2014) summarised learning from serious case reviews in terms of communicating more effectively with people whose first language is not English. It summarised how language difficulties can be a risk factor that leads to missed opportunities in engaging families, and identifying abuse or neglect. The NSPCC put forward recommendations for improving practice. These included making use of professional interpreters. Using interpreters is in line with recommendation from the Laming Report (2003). The report

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\(^8\) Section 58 Children Act 2004 outlines that it is unlawful for a parent to smack their child, except when it amounts to ‘reasonable punishment’.
highlighted the importance of acknowledging the service user's first language and of ensuring children (or adults) are 'heard' in their own language. There can be issues, though, in using interpreters (Alaggia et al., 2017a & 2017b; Chand, 2005; Jones & Westlake, 2018; Križ & Skivenes, 2010b; Sawrikar, 2015). All of these researchers highlighted issues in social workers' use of interpreters. These included: interpreters not understanding the child protection system or its terminology; information being lost in translation; collusion between interpreters and parents; the availability of interpreters; and the poor quality of interpreting services. Pugh (2011) developed detailed practice guidance for *Community Care Inform* that provided detailed suggestions on using interpreter appropriately.

2.8) **Ethnically matching workers to families**

To overcome the cultural differences and communication barriers for BAME families and social workers, some authorities have raised the possibility of ethnically matching children and families with social work practitioners (Cox & Ephross, 1998; Maitra, 2003; Perry & Limb, 2004; Sawrikar, 2013; Weinfeld, 1999). This matching could be based upon factors such as speaking the same language, having a common culture or sharing life experience as an ethnic minority.

2.8.1 **Benefits**

It is thought that matching workers and BAME families on the basis of a shared ethnicity can lead to these families being engaged more effectively. Weinfeld (1999) analysed the views of 45 minority health and social care workers in Canada on ethnic matching. Weinfeld recognised that ethnic matching could be beneficial because of workers' competence in language and culture, as well as their ability to gain trust from service users. One of the more recent studies on ethnic matching in child protection was by Sawrikar (2013). Sawrikar (2013) who noted that both Australian families and social workers prefer ethnic
matching as it enables greater understanding of cultural norms and more accurate child protection assessments. There is limited research in the UK on ethnically matching children's social workers to BAME families. Nonetheless, in terms of ethnic matching’s advantages, Gray (2002) reached a similar conclusion to those above when studying a family support service in London. Matching was deemed to be one of the major reasons for the success of the service. Family support workers were able to overcome the challenges of language barriers and cultural difference. Workers were also able to establish practical and emotionally supportive relationship with families, and offer accurate culturally sensitive interventions (Gray, 2002).

2.8.2 Risks

The potential risks of ethnically matching in child protection work should not be overlooked, though. Social workers have pointed out that over-identification, “the process of increased familiarity and empathy leading to risk minimization”, is one such risk (Sawrikar, 2013, p. 322). Matched practitioners may assume – inappropriately so – that a situation is ‘culturally acceptable’ and they may downplay the risk of harm compared to non-matched workers. This view is supported by Maitra (2003) who argued that assessments require more than a matched worker with personal cultural experience - practitioners should look for evidence, refer to the literature, consult with the community and experienced workers, and not being afraid to challenge dominant assumptions. Social workers in a Canadian study contended that there was an over reliance on BAME social workers. BAME social workers with bilingual languages skills may have to take on cases that involves BAME families without proper training or guidance on working in another language (Alaggia et al., 2017).

In Sawrikar's review (2013), service users suggested their biggest fear was workers from the same community breaching confidentiality. Some of these service users expressed the view that they would rather talk to workers outside their community, explaining that they preferred not to "communicate with the
same nationality", and believed that there was a problem with their own culture and that workers from these cultures "don't understand" (Sawrikar, 2013, p.325). BAME families may, then, be reluctant to engage with, or disclose any information to, an ethnically matched social worker.

2.8.3 Possibility of matching workers to families

In addition to the substantive advantages and disadvantages of ethnic matching, researchers have also debated the practicality of matching. Perry and Limb (2004) pointed out that the matching practice occurs in the public child welfare sector in California. A social worker who identifies as American Indian, Asian American, Caucasian and Hispanic/ Latino(a) is more than twice as likely to work with families who match their race or ethnicity than is a White worker. With regards to the situation in England, as mentioned earlier, there is no known study on the extent of ethnic matching among social workers in child protection. Some family group conferences in London arrange ethnic matching of coordinators with families to facilitate cultural sensitivity (Barn & Das, 2016). Table 2 presents the ethnic origins of children's social workers, the general child population and the number of children subject to CPPs and CIN arrangements in England (DfE, 2018a & 2019; ONS, 2011). Disregarding the unknown data, the statistics show that there are major differences in the ethnic makeup of the different groups.

One of the major criticisms of ethnic matching is that there are other variables, such as age, gender and social class, on which social workers and families could be matched (Cox & Ephross, 1998). Chand and Thoburn (2005) reasoned that it is difficult to achieve a perfect match between social workers and families in the UK, with social workers having to work with service users with diverse characteristics. Ultimately, working with BAME children and families is not just the responsibility of social workers from the same ethnic background (Chand & Thoburn, 2005).
Understanding the practice of frontline child protection social workers working with Black, Asian and minority ethnic (BAME) families, Chapter 2 Literature review

Table 2. Proportions of children and family social workers, children in the general population and children subjected to Child Protection Plan in England by ethnicity (ONS, 2011; DfE, 2018a & 2019)

<table>
<thead>
<tr>
<th>Ethnicity</th>
<th>Children and family social workers by ethnicity based on headcount at 30 September 2018 (%)</th>
<th>General child population: Census 2011 (%)</th>
<th>Children who were the subject of a child protection plan as of 31 March 2018 (%)</th>
<th>Children who were the subject of a child in need plan as of 31 March 2018 (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ethnicity not known</td>
<td>17.2</td>
<td>N/A</td>
<td>3.6</td>
<td>4.5</td>
</tr>
<tr>
<td>White</td>
<td>65.5</td>
<td>78.5</td>
<td>74.2</td>
<td>69.4</td>
</tr>
<tr>
<td>Mixed</td>
<td>2.8</td>
<td>5.2</td>
<td>9.0</td>
<td>8.0</td>
</tr>
<tr>
<td>Asian or Asian British</td>
<td>4.4</td>
<td>10.0</td>
<td>6.2</td>
<td>7.0</td>
</tr>
<tr>
<td>Black or black British</td>
<td>9.2</td>
<td>5.0</td>
<td>5.5</td>
<td>8.3</td>
</tr>
<tr>
<td>Other ethnic group</td>
<td>1.0</td>
<td>1.3</td>
<td>1.6</td>
<td>2.9</td>
</tr>
</tbody>
</table>

2.9) Resources

Working with BAME families is the responsibility ultimately of every social worker regardless of their ethnic background and consequently, social workers require resources to help them learn about practices or issues in relation to particular ethnic groups (Chand, 2000; Chand & Thoburn, 2005). The Professional Capabilities Framework (PCF) (BASW, 2018) and the Knowledge and Skills Statement for Child and Family Practitioners (KSS) (DfE, 2018b) play vital roles in social workers’ learning. Domain 3 of the PCF expects social workers to understand diversity and promote equality. Requirement 6 of KSS places an emphasis on a social worker’s ability to consider children and families’ social circumstances in assessments. Hence, both PCF and KSS form a baseline of as to social workers can take a holistic approach to work with
2.9.1 Practice guidance

There is a belief that manuals cannot inform social workers of all the up-to-date religious, faith and cultural practices as well as ethnic identities (Gunaratnam, 1997; Littlechild, 2012). However, the London Safeguarding Children Board (LSCB) made an attempt to produce *Practice Guidance for Safeguarding Children in Minority Ethnic Culture and Faith (often Socially Excluded) Communities, Groups and Families* (2011). The guidance points out that social workers need to pay attention to six areas when working with minority ethnic groups. These comprise “child development, listening to children, sound holistic assessments, cultural competence, informed practice and partnership with specialist services and parent, communities and faith groups” (LSCB, 2011). These are useful principles to remind social workers of to ensure they understand the unique circumstances of children and families, and at all times.

2.9.2 Training

Training can enable social workers to acquire knowledge and skills for when they work with BAME families. Local authorities usually offer training. For example, Birmingham Children Safeguarding Board (2018) provides sessions for all professionals on “Safeguarding Children & Cultural Awareness”. Other organisations, like the National FGM Centre (n.d.-b), educates professionals on FGM. Africans Unite against Child Abuse (AFRUCA, n.d.) specialises in training about child abuse linked to belief in witchcraft & Juju, and Every Child Protected Against Trafficking (ECPAT UK, n.d.) delivers trainings regarding child trafficking. Training sessions can introduce specific issues to practitioners about which they may have little awareness. In addition, training for organisations can provide specialised consultancy and guide social workers to useful resources. The NSPCC (2017) has also developed a training resources
pack that can be delivered by any practitioners to raise BAME communities’ awareness of safeguarding children from abuse.

2.10) Intersectionality

Within social work education, there is an increasing focus on the importance of intersectionality (Conley, et al., 2017; Robinson et al., 2016). Intersectionality originated in feminist theory. The term was coined by feminist academic Kimberle Crenshaw (1989) to conceptualize the simultaneous oppressions African American women faced, during the 1990s, due to their gender and race. Intersectionality was subsequently extended to take into the account how a person’s different socially constructed identities, like ethnicity, ability, age and socio-economic class, intersect with each other and how the person’s complex social identities impact on his or her experiences of privilege or oppression (Collins & Bilge, 2016; Symington, 2004).

Different scholars interpret intersectionality in different ways (Collins, 2015). Some authorities consider intersectionality as a theory, concept, framework, paradigm or perspective (Carbin & Edenheim, 2013; Davis, 2008; Hulko, 2009). Collins (2015), by contrast, argued that intersectionality is essentially based on similar core principles. Her contention was that intersectionality fundamentally considers fluid, socially constructed categories (identities), such as race, class, gender, sexuality, age, ability, nation and ethnicity simultaneously, since they are intersected and should not be viewed in isolation (Collins, 2015; Hankivsky, 2012). There should be emphasis on the understanding of complex power dynamic embedded within these identities that contribute to the oppressions, social inequalities and privileges people experience (Collins, 2015; Davis, 2008). One should also acknowledge the multilevel aspect of intersectionality by analysing the effects of identities from a macro- (global and national-level structures), meso- (regional-level structures) and micro-level (individual, community and grassroots-level structures) (Hankivsky, 2012; Winkler & Degele, 2011). In the field of social work, intersectionality is considered to be a
valuable analytical approach for practitioners to critically reflect on the power
dynamic and oppression families face in their lived experience (Mattsson, 2014).

2.11) Cultural competence

Recognising diversity and its impact on practice are principles embedded within
the values and standards of the social work profession (BASW, 2012; HCPC,
2017). Although anti-discriminatory practice (ADP) and anti-oppressive practice
(AOP) are central principles of contemporary English social work, the notion of
cultural competence is a more recent focus for social work (Furness, 2005;
Parrott, 2009). ADP requires social workers to be non-discriminatory, value
diversity, promote equality and social justice (Thompson, 2016). AOP, on the
other hand, focuses on concepts of power – social workers have to understand
families’ experiences of being oppressed, work in partnership and empower
families, challenge structural imbalance and promote social change (Dominelli,
2002). While both ADP and AOP are considerable importance to social work
practice, Furness (2005) and Parrott (2009) argue that the two principles alone
are not sufficient to address issues in relation to culture.

The national and international literature (predominantly American literature)
provides numerous definitions of cultural competence. At the very least, all
existing definitions of cultural competence refer to working effectively with
people from a different cultural background. A frequently quoted definition
refers to cultural competence as “a set of congruent behaviours, attitudes and
policies that come together in a system or agency or among professionals that
enable effective interactions in a cross-cultural framework” (Cross et al., 1989,
p. iv). Practitioners, organisations and policy makers are expected to work
together in order to provide a service that truly accommodates service users’
cultural needs. Focusing on the practitioner level, social workers have to
acknowledge cultural differences (cultural awareness), acquire knowledge of
BAME groups, and use skills in responding to the cultural diversity within BAME
groups through assessments and intervention (cultural sensitivity) (Nadan, 2017; Sawrikar & Katz, 2014).

How can a child protection social worker practising with BAME families achieve cultural competency? There is no definitive way to acquire cultural competency. Weaver (1998) and Conley et al. (2017) believe that cultural competency is accomplished through experiential learning – having self-awareness, exposure to diverse groups and learning through different situations. In the UK, Research In Practice (2015) concluded that social workers need to respect and understand the individual identity of children and families; challenge oppression, stereotypes and prejudice; maintain cultural awareness; be mindful of the interplay between culture and engagement with services; link families to appropriate support; and discuss and learn about culture continuously. Barn and Das (2016) emphasised, in addition, the need to seek advice on culture, religion and language from within BAME communities, in order to develop cultural competency. To put it simply, and borrowing from the conclusion of Mbarushimana and Robbins (2015): “adopting a respectful, open and humble approach” is the best way to work effectively with BAME families, regardless of a social worker’s own background.

Some individuals regard teaching cultural competency as a massive challenge and “an elusive journey” (Teasley et al., 2014; Saunders et al., 2015). Dean (2001) even criticised the “myth of cultural competence” and suggested a person is more likely to maintain awareness of their lack of competence, through such teaching. Dean’s argument is not without validity, as culture is not static and it is impossible for one individual to master knowledge about “all culture”. However, knowing there is a gap in their knowledge, practitioners should be prompted to continue learning. The Knowledge and Skills Statement for Child and Family practitioners (DfE, 2018b, p. 4) expects social workers to “assess the influence of cultural and social factors on child development”.

2.12) Present research

What are the effective practices social workers can adopt in working with BAME families that are specific to the child protection context? It is important that this practice knowledge of English frontline child protection practitioners is researched. There is little knowledge about how and whether practitioners in England practise cultural competence in frontline child protection contexts. The present study hoped to draw on the experience of child protection practitioners to shed some light on how others can improve their practice in this realm. The aim of this empirical research was to understand current practice among social workers working with BAME families. Like other research, careful consideration was needed to achieve the researcher's aim successfully. A researcher needs to acknowledge and reflect on research philosophy as this aids in determining approaches to social research (Bryman, 2012). Philosophy is the centre of research design and it has an overarching influence on how research should be undertaken. The philosophical foundation of research involves thinking about what is the nature of reality (ontological stance) and how to know what is valid knowledge (epistemological position) (Neuman, 2013). Hitchcock and Hughes (1995, p.21) further emphasised that "ontological assumptions give rise to epistemological assumptions; these, in turn, give rise to methodological considerations; and then in turn, give rise to issues of instrumentation and data collection". The next chapter discusses the ontological and epistemological stance adopted in this research, along with the sample, research instrument and research procedure that were used in this research. Ethical issues will also be discussed in the next chapter, as will data analysis.
3.1) Ontology and epistemology

As mentioned earlier in Chapter 2, section 11, a researcher’s ontological stance influences her epistemology position. Ontology is the understanding of what exists or what is the fundamental nature of reality (Neuman, 2013). Epistemology concerns what it means to know and if any acquired knowledge is acceptable in a specific field of study (Whittaker, 2012). Different ontological and epistemological positions can either match or conflict with one another. An objectivist ontological stance is often paired with a positivist epistemological position, as they agree with each other’s concepts. Similarly, constructionism is often paired with interpretivism. These two sets, however, have very competing perspectives.

An objectivist ontological stance argues that there is a single reality, an immutable natural law, waiting to be discovered by the researcher from an objective viewpoint (Bryman, 2012). This stance aligns with the natural sciences model, holding that reality is external and fixed, with people defining the world in a uniform way. Positivism is associated with objectivism, and it is an epistemological position that holds that knowledge can be measured externally, independent of the beliefs of an individual and through scientific inquiry (Neuman, 2013).

In contrast, the constructivist ontological stance focuses on reality being constructed and individuals having different perceptions on the same phenomenon (Crotty, 1998). There is, according to this perspective, no absolute truth, with people actively conceptualising knowledge via their own experience and interaction with the world (Sarantakos, 2012). Hence, interpretivism is an epistemological position linked to constructionism. Interpretivism values the drawing of conclusions from people’s different
interpretations. This perspective looks for “culturally derived and historically situated interpretations of the social life-world” (Crotty, 1998, p. 67). Max Weber (1981), in particular, supported the view that social science should understand social actions in their context by gaining a deeper insight or explanation of human behaviour rather than just discovering laws or formulae. A constructionist ontological stance and interpretivist epistemological position fit the aim of this study more appropriately. Care professionals need to acknowledge there is not just one consistent, measurable and standardised way to work with BAME families (Jeffery & Nelson, 2009 & 2011). Therefore, listening to social workers’ impressions of working with BAME families and processing their interpretation of experiences will add meaning to the ‘realities’ of current practice.

3.2) Research strategy

There are two specific research questions that guide this study:

- What are the practices social workers adopt in working with BAME families that are specific to the child protection context or to working with BAME families?
- How can practitioners improve their cultural competence in child protection practice?

A qualitative research strategy was judged to be more suitable as opposed to a quantitative research in order to ‘construct’ a meaningful picture of current social work practice. Quantitative research focuses on the collection of numerical data to measure and analyse information (Neuman, 2013). The present empirical study was interested in examining social workers’ understandings and experiences of working with BAME families. Social workers’ experience provided the empirical evidence for this study. Making statistical generalisations does not lend very much meaning to the complexity and context of social work practice (Neuman, 2013; Whittaker, 2012). Thus, a quantitative research strategy was considered inappropriate. In addition, quantitative research usually uses a deductive approach, with the formulation and testing
of hypothesis (Bryman, 2012). Starting the present research with a hypothesis would have limited the value of the findings as this would have involved only testing only one proposed perspective or model of practice.

By contrast, qualitative research can involve the analysis of text, words, narratives and images, as data, to interpret interactions between, and the behaviour of, individuals (Flick, 2014; Maxwell, 2006). Qualitative research usually takes an inductive approach, constructing outcomes from available data (Bryman, 2012). The present study’s research questions required seeking insight into social workers’ interaction with children and families who come from different backgrounds and cultures. It was anticipated that using a qualitative research strategy, rather than a quantitative one, would help the researcher to adequately reflect and compare the meanings of different practitioners. A qualitative strategy is useful for researchers in exploring how, and why, practices exist. It was felt that drawing on the experiences and perspectives of social workers from interviews with them would provide invaluable data in answering the research questions.

3.2.1 The literature search strategy

A literature search was undertaken using the ProQuest, Social Care Online, Oxford Journals Archive and Community Care Inform Children electronic databases to identify empirical research on social work practice with BAME families. Varying combinations of the following keywords were used to conduct the searches: “Black, Asian and minority ethnic “, “Black and minority ethnic”, “ethnic minorities”, “minority ethnics”, “culture”, “cultural competency”, “child protection”, “child abuse”, “child maltreatment”, “neglect”, “social work”, and “United Kingdom”. The researcher appraised the search result by considering the year of publication, location of studies, journal details, methodology, findings, conclusion and recommendations. The researcher gave special attention to studies that were conducted within the last 15 years in the UK.
3.2.2 Method

Qualitative research predominantly uses talk as data (Flick, 2014). The present study hoped to invite social workers to talk about their practice and analyse their professional knowledge. One to one semi-structured interviews were chosen to acquire the detailed, verbal empirical data needed for this research. Rune (2016) described an interview as two persons purposefully having a conversation to exchange their views on a topic. This method could provide comprehensive information on how social workers currently work with BAME families. Semi-structured interviews use a set of open-ended questions as a guide, yet still have a high degree of flexibility. Not only do semi-structured interviews allow interviewees to express their views, the researcher (interviewer) can also adjust or add questions according to the interviewee’s responses (Becker, Bryman & Ferguson, 2012; Flick, 2014). In the present research, when some of the issues or practices brought up were uncommon or the researcher had limited knowledge of them, it was useful for the researcher to ask amended and additional questions. Interviewees could then clarify, give examples or explain their experiences and thoughts in more detail.

3.2.3 The sample

There were nine participants in this study. They had, between them, worked in a total of four different local authorities in England. The targeted sample was restricted to social workers who had practised for at least five years in child protection. This criterion was included to ensure that social workers had an appreciable level of work experience and had developed some skills in working with BAME families. Social workers with five years of working experience were likely to have completed their practice educator training and/or have more in-depth knowledge of the child protection field. It was hoped that this criterion would enable the findings to represent a more meaningful learning resource for less experienced social workers, such as students and social workers who are
completing, or who have just completed, their Assessment and Supported Year in Employment.

Of the nine social workers who took part in the study, eight were female and one was male. The median age (range) was 40-49 years old (Table 3). Five social workers described themselves as “White” (55.6%), three social workers described themselves as “Asian or Asian British” (33.3%) and one social worker described herself as “Black or African or Caribbean or Black British” (11.1%). None of the participants identified themselves as “Mixed or multiple ethnic group” or “other ethnic group”. Eight of the participants were working or worked in the Midlands and the remaining one had worked in London. Six participants were currently employed as frontline staff, two as managers and one was now a University social work lecturer. Seven participants held Masters’ degrees and two had a Bachelors’ degree. The participants had ten years of post-qualifying social work practice on average. The number of years qualified ranged from five to twenty years. Most of the participants (six social workers) reported having worked with 60 or more BAME families.
Table 3. Overview of participants

<table>
<thead>
<tr>
<th>Participant (pseudonym)</th>
<th>Location</th>
<th>Age</th>
<th>Gender</th>
<th>Ethnicity</th>
<th>Education level</th>
<th>Qualified for (years)</th>
<th>Worked in the current local authority for</th>
<th>BAME families currently working with</th>
<th>Background of BAME families ever worked with</th>
<th>Background of BAME families currently working with the most</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amy</td>
<td>Midlands</td>
<td>60+</td>
<td>Female</td>
<td>Asian</td>
<td>Masters</td>
<td>15</td>
<td>5 years</td>
<td>60+</td>
<td>5 to 9</td>
<td>Mixed</td>
</tr>
<tr>
<td>Beth</td>
<td>Midlands</td>
<td>40-49</td>
<td>Female</td>
<td>Asian</td>
<td>Masters</td>
<td>10</td>
<td>4 months</td>
<td>60+</td>
<td>0 to 4</td>
<td>Asian</td>
</tr>
<tr>
<td>Chris</td>
<td>London</td>
<td>30-39</td>
<td>Male</td>
<td>White</td>
<td>Masters</td>
<td>10</td>
<td>N/A</td>
<td>40-59</td>
<td>N/A</td>
<td>Black, Mixed</td>
</tr>
<tr>
<td>Diana</td>
<td>Midlands</td>
<td>40-49</td>
<td>Female</td>
<td>White</td>
<td>Bachelors</td>
<td>7</td>
<td>4 months</td>
<td>60+</td>
<td>15+</td>
<td>Black, Asian</td>
</tr>
<tr>
<td>Elaine</td>
<td>Midlands</td>
<td>30-39</td>
<td>Female</td>
<td>White</td>
<td>Masters</td>
<td>7</td>
<td>Less than 1 year</td>
<td>60+</td>
<td>5 to 9</td>
<td>Asian</td>
</tr>
<tr>
<td>Fiona</td>
<td>Midlands</td>
<td>40-49</td>
<td>Female</td>
<td>Black</td>
<td>Masters</td>
<td>20</td>
<td>6 years</td>
<td>60+</td>
<td>0 to 4</td>
<td>Black</td>
</tr>
<tr>
<td>Gina</td>
<td>Midlands</td>
<td>30-39</td>
<td>Female</td>
<td>Asian</td>
<td>Masters</td>
<td>10</td>
<td>5 years</td>
<td>60+</td>
<td>10 to 14</td>
<td>Asian, Black</td>
</tr>
<tr>
<td>Hannah</td>
<td>Midlands</td>
<td>40-49</td>
<td>Female</td>
<td>White</td>
<td>Bachelors</td>
<td>9</td>
<td>8 years</td>
<td>20-39</td>
<td>5 to 9</td>
<td>Asian</td>
</tr>
<tr>
<td>Iva</td>
<td>Midlands</td>
<td>30-39</td>
<td>Female</td>
<td>White</td>
<td>Masters</td>
<td>5</td>
<td>5 years</td>
<td>0-19</td>
<td>0 to 4</td>
<td>Black</td>
</tr>
</tbody>
</table>

n = 9

Social workers’ current situation:
- Frontline staff (n = 6)
- Managers (n = 2)
- University lecture (n = 1)
3.2.4 Research Instrument

The empirical data for this research were collected through individual face-to-face, semi-structured interviews with the nine social workers. Use of semi-structured interviews ensured that the interviews were neither too informal nor concerned only with closed-ended questions (Kvale & Brinkmann, 2015). In addition, use of an interview schedule with a set of pre-designed questions was used as the guide for the interviews. The interview began with social workers being asked about their sociodemographic backgrounds and their work experience. Interview topics then comprised a comparison of social workers’ practice with families in general and BAME families; examples of challenges social workers faced working with BAME families and how they overcame these barriers; and training or support to improve cultural competence (see Appendix 5).

The question design mainly drew upon the study conducted by Križ and Skivenes (2010a, 2010b, 2012, 2015), which compared the practices of social workers working with ethnic minorities in the UK and Norway. Križ and Skivenes’ study (2010a) also utilized semi-structured interviews and asked social workers about their views on differences in working with ethnic minority families as against White families. Responses from participants in Kriz and Skivenes’ study focused on challenges around language (Križ & Skivenes, 2010a), “cultural gap” (Križ & Skivenes, 2010b), focus of practitioners (Križ & Skivenes, 2012), and difficulties faced by BAME families. Although the interview schedule in the present study was developed according to the above mentioned themes analysed by Križ and Skivenes, questions were added regarding social workers’ cultural competence training and support. This last questions were designed to obtain a more comprehensive picture of how social workers might continuously develop their practice knowledge of the differences working with BAME families as against White families. The interview schedule was revised slightly on three occasions following feedback provided by the present author’s research supervisors.
3.2.5 Research procedure

The researcher and her supervisors approached four different local authorities in England to recruit participants for the research. Each local authority was sent an information sheet for the organisation to explain the research (see Appendix 1A) along with an email (see Appendix 3). However, only one local authority agreed to participate. This latter local authority appointed a liaison person as the researcher’s point of contact within the local authority. Once this local authority awarded research governance approval for the study, the liaison person from the local authority sent an internal email along with the participant information sheet (see Appendix 1B) to different teams within the organisation. Interested participants contacted the liaison person via email if they wished to take part in the study. The researcher and the liaison person then discussed and arranged with participants the most convenient interview dates and time. Although five social workers responded, only four social workers were able to participate on the day of the interview. On the day of the interview, the researcher met up with participants in the local authority’s office, ensured that they understood the purpose of the research, and double-checked whether they had any more queries. Participants were asked to sign a consent form (see Appendix 2) before the start of the interview.

The remaining five participants were recruited via the researcher’s personal network. The researcher sent potential participants an information sheet regarding the study (see Appendix 1B) via email (see Appendix 4). Once they agreed to participate in the study, the researcher discussed and arranged the most convenient interview dates and times for the interviews with participants. These interviews were conducted in the participants’ homes. One of the participants, however, had to, leave her home for an emergency meeting about two-thirds of the way into the interview. The rest of the interview was, at the insistence of the participant, continued in the participant’s car while she drove...
to this meeting. Participants were asked to read and sign the consent form (see Appendix 2) at the start of the interview.

The average duration of interviews was 41 minutes with the shortest 34 minutes and the longest 50 minutes. All interviews were conducted between December 2018 and March 2019.

3.3) Ethical issues

Ethical approval for the study was obtained from the School of Human and Health Sciences' Research Ethics Panel, University of Huddersfield. The Economic and Social Research Council's (ESRC, n.d.) ethical guidelines for research was the underlying ethical framework for the present study. The six principles in the guidelines were embedded within the design of this research. Research should be of benefit to people and cause minimal harm (ESRC, n.d.). The present researcher felt that the results of this study would be of benefit to fellow social workers in gaining a better understanding of how to work with BAME families in child protection.

3.3.1 Informed consent

Participants have to take part in research voluntarily, no matter how the sample is obtained (Boynton, 2016). Boynton further makes it clear that participants can give informed consent only when they have all the possible information that allows them to have a clear understanding of the research. In the present study, participants were first provided with a participant information sheet that explained the purpose and procedures of the research. The information sheet emphasised that participants had the right to withdraw from participating in the study at any time and without giving a reason. They also had the right to not answer particular questions and the right to withdraw their data up to two weeks after their interview. Participants were given time to consider joining the study.
or not, and were given opportunities to raise any queries. On the interview day, participants were asked to sign a consent form confirming that their participation was voluntary and they understood their rights. The interviewer also checked the participants’ understanding of the research and asked if they have any concerns before proceeding with the interview.

### 3.3.2 Confidentiality and anonymity

Robson and McCartan (2016) pointed out that a participant’s privacy should be respected even if they have given informed consent. Participants were reassured that all the information they provided would be treated in the strictest confidence. Any names were replaced with pseudonyms and any locations or potentially identifying features were changed. However, participants were informed that confidentiality was not absolute and might have to be breached where the researcher was informed of an individual being at risk of harm or of poor practice on the part of any worker. Participants were also to remain anonymous in any verbal or written report, subject to the aforementioned exemption.

### 3.3.3 Data use and storage

Data storage procedures were in compliance with the Data Protection Act 2018, the European Union’s General Data Protection Regulation (GDPR) and the University of Huddersfield’s requirements. The researcher recorded the interview session with an encrypted audio recording device. Only the researcher and her supervisors could view the transcribed interviews. The audio files of the interviews were stored securely at the University of Huddersfield.
3.3.4 Other ethical issues

When planning the present study, the researcher considered the possibility of other ethical dilemmas that might arise from the interviews. For example, participants might disclose concerns about safeguarding children or poor professional practice. The researcher arranged that she would discuss such concerns with her research supervisors in the first instance if they arose, with concerns being reported to the relevant local authority if needed. However, these issues did not arise during data collection.

3.4) Data evaluation

The completeness of data, accurate interpretation of the data’s meaning and consideration of alternative explanations of the data, are the three main components to good quality qualitative research. Guba and Lincoln (1985) stated that ‘credibility’, ‘transferability’, ‘confirmability’ and ‘dependability’ are necessary to ensure the trustworthiness of qualitative data.

Credibility refers to whether or not research truthfully reflects the participants’ perceptions (Guba & Lincoln, 1985). All participants in the present research participated voluntarily. The researcher had explained the participants’ rights to withdraw, as well as their right to refuse to answer particular questions at the point of recruitment and before the interviews. These were measures taken to encourage participants to be honest when they were providing data (Shenton, 2004). In addition, all interviews were audio recorded and transcribed to ensure the data were as accurate as possible.

Guba and Lincoln (1985) explain that transferability as a concern with how people can transfer and apply the result of research to other situations. The researcher should use a “thick description” in order to enable readers to
understand the results presented. Thick description means providing sufficient information about participants’ experiences as well as the context in which they occurred (Guba & Lincoln, 1985). Providing thick description helps readers relate to the information presented in the research and apply the findings to their own practice.

Confirmability means checking and re-checking findings to make sure that they are a non-biased interpretation of the data (Tobin & Begley, 2004). Dependability means findings should be stable and consistent over time. To achieve both confirmability and dependability, the present researcher applied the code-recode strategy\(^9\) and made use of supervision sessions to reflect on her interpretation of the data.

### 3.5) Data analysis

The data were subject to thematic analysis. Braun and Clarke (2006) explain that thematic analysis is a method of identifying, analysing and reporting themes within the data set. Researchers take an active role in the development of coding and the formation of themes through analytical observations. Attride-Stirling (2001) and Boyatzis (1998) argue that thematic analysis is ambiguous when compared to other data analysis methods, like grounded theory, which is linked to a particular theoretical framework. However, the flexibility of thematic analysis accommodates the needs of different studies regardless of their theoretical standpoint (Braun & Clarke, 2018; King, 2004). At the same time, thematic analysis enables researchers to draw all kinds of possible interpretations from the themes generated from the data.

Thematic analysis encouraged the present researcher to examine social workers’ different views of working with BAME families. This is due to the fact

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\(^9\) Code-recode strategy will be further explained in the following section.
that thematic analysis requires the researcher to look beyond the superficial meaning of data from a semantic level and explore the themes with a more in-depth approach at a latent level (Boyatzis, 1998). A latent level means the researcher examines the different aspects or ideas underlying the obvious semantic content. As informed by her constructivist ontological stance and interpretivist epistemological position, the researcher hoped to interpret the underlying meanings of participants’ accounts. Therefore, thematic analysis was a suitable choice for data analysis with the researcher able to unpick the key features of social workers’ practices from all the interviews. The researcher could also consider the influence of the socio-cultural and/or structural context of a social worker’s practice, based on how participants articulated their answers to interview questions. Using thematic analysis did, in turn, answer the research question and achieve the research aim of understanding current practices among social workers.

Braun and Clarke (2006, p, 35) proposed six steps for carrying out thematic analysis. The present research utilized this guidance to process the data collected from the semi-structured interviews. The six steps and what actions the researcher took during each step were as follows:

- Familiarizing herself with data: the researcher transcribed all the interviews and read the data repeatedly.
- Generating initial codes: the researcher first applied coding to the interview transcript. (Coding helps the researcher to reduce, summarise, condense and interpret meanings from the data set (Robson & McCartan, 2016). Since the research intended to use the code-recode strategy, the researcher coded the same data again, one week after the initial coding and compared the results to ensure consistency.)
- Search for themes: themes are ‘central concept’ that act as a component to the overall analytical observation (Braun & Clarke, 2018). The researcher looked for relevant codes and grouped them together to establish themes using NVivo 12 software. Using qualitative data
analysis like NVivo enabled the researcher to organize and handle data effectively (Robson & McCartan, 2016).

- Review themes: the researcher reviewed the existing themes and moved appropriate codes to support the themes. The researcher then reviewed the existing themes to ensure they support the entire data set.
- Defining and naming themes: each of the themes was refined and the researcher established sub-themes wherever appropriate.
- Producing the report: the researcher wrote up the results of the analysis by explaining the themes in a coherent, written format.
Chapter 4 – Findings

While the interviewed social workers worked with BAME families from different ethnic backgrounds, six consistent themes emerged when they talked about their practice. These themes related to (i) understanding BAME families, (ii) valuing community, (iii) exploring culture, (iv) the use of interpreters, (v) engaging in continuing professional development and (vi) reflecting as a practitioner. Table 4 shows the six themes and 20 sub-themes that emerged from the data. The first four themes (i, ii, iii and iv) captured the important elements of working with BAME families. The remaining two themes (v and vi) relate to the ways in which social workers can improve their cultural competence.

Table 4. Overview of themes

<table>
<thead>
<tr>
<th>Themes</th>
<th>Sub-themes</th>
</tr>
</thead>
<tbody>
<tr>
<td>i. Understanding BAME families</td>
<td>1. BAME families’ experience</td>
</tr>
<tr>
<td></td>
<td>2. BAME families’ networks</td>
</tr>
<tr>
<td></td>
<td>3. BAME families’ knowledge of public services</td>
</tr>
<tr>
<td>ii. Valuing community</td>
<td>4. Community as a resource</td>
</tr>
<tr>
<td></td>
<td>5. Hidden problems</td>
</tr>
<tr>
<td></td>
<td>6. Understanding communities</td>
</tr>
<tr>
<td>iii. Exploring culture</td>
<td>7. Culture not being an excuse for abuse</td>
</tr>
<tr>
<td></td>
<td>8. Cultural differences and adjustments</td>
</tr>
<tr>
<td></td>
<td>9. Culture’s influence on roles within families</td>
</tr>
<tr>
<td>iv. Use of interpreters</td>
<td>10. Ensuring information is being communicated accurately</td>
</tr>
<tr>
<td></td>
<td>11. Quality of interpreters</td>
</tr>
<tr>
<td></td>
<td>12. Relationships between interpreters and families</td>
</tr>
<tr>
<td></td>
<td>13. Using an interpreter</td>
</tr>
<tr>
<td></td>
<td>14. Training in using interpreters</td>
</tr>
<tr>
<td>v. Engaging in continuing professional development</td>
<td>15. Training during qualification</td>
</tr>
<tr>
<td></td>
<td>16. Post-qualifying training</td>
</tr>
<tr>
<td></td>
<td>17. Learning resources</td>
</tr>
<tr>
<td>vi. Reflecting as a practitioner</td>
<td>18. Reflections on being a BAME social worker</td>
</tr>
<tr>
<td></td>
<td>19. Reflections on being a White social worker</td>
</tr>
<tr>
<td></td>
<td>20. Other groups of practitioners</td>
</tr>
</tbody>
</table>
4.1) Understanding BAME families

All participants endorsed the importance of understanding BAME families. One social worker commented that practice with BAME families is similar to work with other families but with a larger number of factors that have to be taken into account. These factors include BAME families’ experiences, the composition of their family network and their knowledge on public services.

4.1.1 BAME families’ experiences

Every family has its own unique experiences and all participants mentioned this in one way or another. Social workers spent time trying to unpack the complexity of families, trying to understand their history. As two social workers put it:

Don’t just go in … and thinking that you understand … Cause you don’t. Try and understand from their perspective. Don’t think you can [understand them]. (Beth - pseudonym)

Social work ultimately is collaborative, or it should be, so kind of taking prompt from the families that you're working with as to what is their normal? (Elaine)

One social worker, Fiona, believed that it is inappropriate to make assumptions about a family based upon one’s knowledge of the particular ethnic background from which the family is drawn. Fiona said:

The core of your family will be completely different to your next-door neighbour who comes from the same village as you. So, I try very much to individualise my intervention with people based on where they are at and what’s important to them in their culture, or religion or their family lives. (Fiona)

Another social worker stated that she works restoratively with BAME parents to understand their experiences. Restorative practice places an emphasis on
building and maintaining relationships, working in partnership “with” families to identify and create change. Adopting the restorative approach means social workers provide families with encouraging support, rather than doing it “to” or “for” them (Strang & Braithwaite, 2001). This social worker explored parents’ own childhood and experiences of being mistreated, how they felt about this, how their current behaviours affect their children, and how to ‘resolve’ and ‘repair’ the harms they had done to their children.

Another focus in social work practice with BAME families was on helping parents understand the differences between their experiences (especially when growing up) and those of their children. One social worker explained how she had worked with two parents who were born outside the UK (first generation immigrants), whose values and culture were quite different to those of many people in the UK. Their son was brought up in the UK (second generation immigrant) and had been exploited by a local gang. The parents struggled to understand how their child had been influenced by his environment. The social worker had to work very hard to explain the differences between growing up in the parents' home country and in the UK different, and the influence different societies could have.

Intersecting inequalities had a considerable relevance in BAME families’ lived experiences. Another social worker, Chris, had a strong believer that social workers needed to uphold a commitment to social justice. He firmly felt that the impacts of “inequality”, “deprivation”, “social class”, “poverty” and “social exclusion” on families’ lives was not taken into account in social workers’ practice:

If a single mother from BME [background] and living in poverty. She got three children and struggling to get them all to school on time. She experienced domestic abuse and she still lives with him. How do we understand the experiences? Do we work with all those intersecting problems and try and really understand? Do we work with all inequalities or focus solely on the incident of concern? (Chris)
Chris added that social workers had to consider the impacts of intersecting inequalities on families’ lives in child protection practice. In another interview, a social worker talked about her understanding of why Roma and Gypsies are vulnerable to being trafficked. She related Roma and Gypsies’ experiences to make sense of their vulnerability - being discriminated and marginalised in their home country, and being unemployed and living in poverty within the UK. In both cases, the two social workers acknowledged intersecting inequalities and how they can create difficulties for BAME families.

Participants believed that understanding BAME families’ experiences enables social workers to build rapport with families. Iva, a social worker, said she built trusting relationship with families by listening to families’ experiences. Families were saying to her:

We [the BAME family and social worker] have built this relationship.
We [the BAME family] will listen to what you [social worker] are saying because you respect what we are saying. (Iva)

4.1.2 BAME families’ networks

Some social workers pointed out that BAME families tend to have extended family members who are likely to offer support when it is needed. Some social workers witnessed Black and Asian parents, and their respective wider family networks coming together to prioritise children’s safety and wellbeing. For example, one social worker talked about how opening up assessments to include wider family networks had greatly reduced the level of concerns towards children’s safety. In the worker’s experience, an African Jamaican child often spends time with uncles and aunties whether they are blood-related or not. A child could have multiple attachment figures who fully understood the concerns of children’s services and took turns to care for the child. Hence, the close relationship with the wider network contributed to a safety plan. Other participants also talked about how families having support from wider networks made a difference in improving outcomes for children. These participants gave
examples where there were people to help improve a child's living condition, support victims of domestic abuse, or even to look after a child if s/he needed to go into the care system.

Although a family's network can be regarded as a possible strength for BAME families, the participants suggested that this is not always the case. One social worker explained: “it depends really on each family. You can also say the same about White families as well”. Three participants used the same scenario to demonstrate that not all BAME families have support from the wider family network - someone could have left their home country, moved to England alone and got married, becoming isolated and only receive support from their in-laws. Participants are cautious, therefore, not to generalise that families from BAME background will all have the same level of support from family network:

Because even within ethnic groups, it is not homogeneous - what is normal for one family might not be normal for another family. (Elaine)

4.1.3 BAME families’ knowledge of public services

A few participants highlighted the importance of checking on a family’s knowledge of the various UK public services. These services included, for example, children’s services, education, the benefits system and the criminal justice system. Participants stated that not all families, particularly those comprising first generation immigrants, had the knowledge of how the child protection system, for instance, worked in this country.

Informing BAME families, who were born outside of the UK, about public services become one of the first tasks participants undertook. Gina said some families did not understand the role of a social worker because children’s services did not exist in the family’s country of origin. Beth gave an example of how she started off the first home visit by explaining the meaning of “child protection”, “a plan”, “support”, and “what is acceptable and what is not” (in
terms of parenting). She remarked that it was vital to provide these explanations, “otherwise, you are setting them up really to fail”. Gina went on to underline the importance of this work. She had explained the benefit, housing, education and immigration systems to a parent with ‘no recourse to public funds’ [NRPF] (first generation immigrants). A number of participants stated that many BAME families came to the attention of children’s services due to their immigration status and their having NRPF. Participants reported that they found explaining the various public services systems challenging as the large majority of these parents had a very different perception of what their entitlements were. This meant that the social worker had to manage families’ expectations of the English public services. In addition, participants felt that there was only limited support social workers could offer for BAME families with NRPF status, even where there were concerns regarding the living conditions for children.

On the other hand, Amy pointed out that some BAME families were knowledgeable about the legal and public services already. She stated that some BAME parents (non-first generation immigrants) had had education within the UK and had acquired this knowledge. Amy believed that “these are children of migrants [BAME families] that had to survive”, so they would learn quickly and be resourceful by helping each other in times of difficulties.

Social workers also had to consider how power dynamics within a family could be affected by a lack of knowledge of public services. Beth explained this sometimes arose in cases of domestic violence where the males were the perpetrator:

I suppose it’s still a struggle for women who aren't born in the UK. They don’t know the system. They rely on their husband for money. So, it is quite scary to go into a refugee. And when we try to encourage them to do that, it is difficult for them to do because of the fear of being on their own and coping on their own. (Beth)

In Beth's example, victims of domestic abuse were fearful of leaving the family home with their children because of potential financial difficulties and isolation.
She explained that passing on knowledge of what public services were available could be a way of empowering BAME family members to access appropriate support.

4.2) Valuing community

The subject of ‘community’ was one that was frequently raised by participants. Social workers recognised the value of communities in supporting BAME families and the relevance of considering communities within interventions with BAME families.

4.2.1 Community as a resource

Individuals often set up organisations and advice centres to support their own communities. One participant cited Karma Nirvana as an example. Karma Nirvana is an organisation that provides ethnic-specific service to support victims of honour-based violence and forced marriage. This participant believed that organisations and advice centres like Karma Nirvana were formed because individuals identified issues within their communities, then united with others to form organisations to offer support and protection for their members. Many social workers said that they found it useful to have these resources available, especially when they could make use of the organisation's local knowledge and link BAME families to these supports. Similarly, some participants believed that having community-based groups would strengthen families’ support networks. For instance, Hannah spoke about an organisation that offered social gatherings (like coffee mornings) for BAME women. BAME women were able to meet with other members of the community and integrate themselves into the community, and thereby lessen their social isolation.

A few participants noted how some people from a BAME background were more likely to accept support from ethnic-specific services offered by their
community compared to mainstream services. Gina stated that ethnic-specific services were "more catered to understand the community, the background of the family, and also in terms of language as well". Another social worker said:

There might be a group or their own [BAME] community that they get support from because they understand each other. If you step outside of that, then we [professionals] don't understand their experiences, where they come from and all their culture. (Fiona)

Iva stated that she had worked with an Oromo [Ethiopian ethnic group] family in the past. Iva found the family reluctant to engage with children's services as they said having social work intervention “just doesn’t happen and we [Oromo families] just sort things [out] through community”. Members of the Oromo community, including extended families, neighbours, and community leaders, took the initiative to hold regular meetings with the family to address a number of concerns it was facing, which included domestic abuse. The community had provided a network of support to ensure the children’s safety and was offering this support for the family before any social work intervention.

4.2.2 Hidden problems

Although the community was viewed as a strength for families, social workers also recognised that the community could be a challenge. One participant reported that BAME families were sometimes fearful of having their privacy breached within the community. Families believed that if they disclosed any issues, then this information would spread quickly within the community. The shame and stigma from the community knowing about social work intervention could also make it difficult to engage with BAME families. Iva, for example, talked about working with a parent from an Asian background regarding domestic abuse concerns. The mother was very reluctant to work with children’s services:

She [the parent] didn’t want anybody to know. She was saying within her community and culture... if her parents know that social care is involved, it will be a huge problem... That was really difficult because
she [believed that] “nobody can know” [her family is working with social services], it was so shameful and hidden. When I [social worker] was going around [to conduct home visits], I would always be respectful and not wear my [social worker’s identification] badge.

Beth provided another example to illustrate how issues were ‘hidden’ within the community:

I found with the Bangladeshi families, there is a lot of drug use and alcohol use. As we know, it’s concealed in the culture. In Pakistani families, there is a lot of drug use but when there is a mixture of alcohol use which that ethnic minority group don’t tolerate in that community. They don’t mean to be drinking alcohol …. I suppose it is about having them to want to accept support with agencies/services. In a lot of homes, I found that they don’t. (Beth)

Beth believed that communities could refuse to acknowledge a lot of issues, and she believed that communities needed to start talking about existing problems, like gambling and substance misuse. Just acknowledging problems, she felt, could encourage BAME families to engage with services. Amy revealed a very fundamental challenge, however, that some cultures do not even have a “language” for these problems. Amy stated that there is no word for “mental health” in Urdu or Hindi. She argued that when there is not even a term for the issue, it is very hard for it to be recognised and addressed within a community. Some participants felt that the lack of specialist services (like drug and alcohol services) provided for BAME groups was due to a perception that these issues did not happen in those communities.

One social worker argued that overly positive stereotypes of BAME communities could also be harmful. A lot of participants mentioned negative stereotypes that can surround BAME families. Elaine pointed out that a seemingly complimentary perception of a community can then make matters more difficult for a family that needed support.

If you are a Black woman, you’ve been told that you’re supposed to be very strong and sort of self-resilient, kind of a strong Black women,
“whatever concerns and I can deal with it”, then it might be more difficult to ask for support… It is a positive stereotype but it can be harmful as well. (Elaine)

4.2.3 Understanding communities

Some social workers highlighted the importance of understanding how BAME families see their identities within the community. Chris stated throughout his interview that social workers needed to understand communities better. He argued that there is a need for social workers to understand the history of local communities, including the migration history, local conflicts and political movements, if any. This understanding would give social workers an insight into the difficulties and discrimination that families experienced in the community. He added that families and communities do not trust social workers as children’s services do not attempt to understand families’ experiences in the community in which they live:

Maybe some understanding of the community they [social workers] were working with, like some training on the history of the communities that were working in. The issues they faced? Are there any issues in housing at the moment? Are families feeling under pressure? Have there been cuts of resources? Understanding the community, understanding the experience of a community, I think it is the key. (Chris)

The ethnic composition of the community overall is another important consideration when looking at the lived experience of BAME families. Elaine worked in an area with predominantly White families. She had a case where a parent from a BAME background and living in the area refused to give consent for information to be shared with the school about a distant family member who had been radicalised in the past:

I can understand that he [the father] wouldn't want this [information about radicalisation] more attached to them because people probably
Elaine stated that it can be difficult to understand BAME families’ challenges and their decisions making unless one puts oneself in a family’s position, to understand the social context for the families. Several participants said that social workers needed to take into consideration the discrimination and isolation BAME families might face in the community. Fiona reflected on the reasons why some of the BAME young people she worked with were displaying challenging behaviour. She stated that these young people encountered discriminatory attitudes and behaviours from not only members of the public but also professionals. Fiona explained that regardless of whether these attitude or behaviours were unconscious or intended, they had an impact on young people. Amy summarised the importance of workers acquiring a good understanding of communities:

> Unless you actually get to know communities and work with communities, and try and embrace diversity, you are not going to develop as a practitioner. (Amy)

### 4.3) Exploring culture

Culture was a recurring topic across all the interviews and it is clear that all of the social workers had an appreciation of the influence of culture on BAME families.

#### 4.3.1 Culture not being an excuse for abuse
In the participants’ experiences, some child protection concerns are more prevalent within particular cultures. When asked to compare what concerns are more frequently seen in BAME families compared to White British families, most social workers could readily think of examples. Most of them, however, went on to quickly add that the concerns they raised were not exclusive to BAME families but occurred within White families also. They were cautious not to be prejudiced, saying that a concern might not be linked to one particular group. For instance, one participant pointed out that while radicalization, FGM and forced marriage are more prominently seen in BAME families, it is important not to lose sight of the fact that these forms of maltreatments may occur in White families as well. Another worker stated that it was problematic associating culture with a particular form of abuse. He said that he had overheard some social workers arguing that domestic abuse is “part of the culture, a subservient type of culture that can lead itself to quite abusive relationships”. He argued that not everyone within a culture would behave in the same way and it is “quite lazy in assessment” to see form of abuse as a part of someone’s culture. Participants stressed, in short, that social workers should not be biased against particular cultures and make stereotypical assessments.

Participants spontaneously mentioned that professionals might have a different tolerance for violence or abuse when it comes to families from certain cultures. They added, however, that abuse was still abuse and should not be tolerated. Participants expressed a concern that sometimes social workers practised anti-discriminatory and anti-oppressive inappropriately. Elaine, for example, revealed that some social workers had a tendency to say trafficking in the Roma and Gypsy community was a “cultural issue” and is, therefore, “normal” and expected by professionals. She pointed out that there should not be double standards for BAME families even when a culture may regard certain behaviour as ‘normal’, such as a 13-year-old girl being pregnant being considered “okay”:

Sometimes social workers can be a little bit too open-minded almost, as if they don't want to step on anyone's toes and be accused of being racist…. Even though you wanted to take up differences into account, you have to be able to apply the same standards to everybody. (Elaine)
Amy also spoke critically about the double standards of professionals, referencing perceptions of physical chastisement of children by parents and school corporal punishment. She stated that "abuse is abuse, [it] does not matter where you are from". She added that if these behaviours were considered as illegal within the UK, then why do people “seem to think that if a person from an ethnic minority does it, then it is part of their culture [and should be accepted]? Which is not right!”. Fiona stated that the safety of children needed to be prioritised over considerations of culture:

You could use FGM as an example, if something is in somebody's culture is neglectful or damaging to a child, then the cultural element of it has to take a second place to the safety of a child, doesn't it? We've been drawn to that [argument of] "it's my culture" over the years and we need to balance it - safety of a child against the culture of that family.

4.3.2 Cultural differences and adjustment

Participants considered various aspects of ‘cultural differences’ when working with BAME families. These included “language barriers”, “parenting style”, “cultural background”, “cultural identity” and “cultural norms”. As one participant commented, this means social workers trying to “understand where they [BAME families] are coming from”. Participants agreed that people from different cultures may have different values, norms and ways of doing things from one another. That said, there was a tendency for the discussion of cultural differences to focus upon child-rearing practices. Many of the social workers used the example of physical chastisement to illustrate the cultural differences they encountered. One participant explained why, in some Asian cultures, using physical chastisement to discipline children was acceptable “probably because it happens in Pakistan, it happens in India, it's the norm, it seems to be okay because no social care involvement than it is here [in the UK]”. They all stated, nonetheless, that social workers had to make BAME families aware of what is “acceptable” within the UK and help them change their attitudes and behaviour where necessary:
Cultures are evolving, cultures are changing. It is about educating and letting people know that they can’t do this, they can’t behave in that manner. (Amy)

Some participants emphasised the importance of social workers appreciating cultural differences. Fiona talked about her experience of being a newly qualified social worker and conducting her first home visit to an Asian family. She observed that there were not many toys in the family home and pointed this out to her practice educator. The practice educator reminded her “toys is quite a Western thing” and helped her to reflect on how different cultures stimulate their children in different ways. A few social workers also talked about respecting a BAME family’s culture. One participant, for example, discussed social workers being respectful to a BAME family’s culture by asking if they should take off their shoes when going into their home:

Because I have visited a family home before with a student social worker. She will never do it again… but she basically walked into their living room where they had a prayer mat, and she walked in with her shoes on… The family was so lovely [and forgiving] about it but they might not have been and that could have created a massive barrier. So, always be mindful about those things [practical details like taking off shoes]. (Iva)

Accommodating BAME families’ cultural needs, whilst at the same time carrying out child protection work was a topic raised by a number of participants mentioned during their interviews. Gina said some BAME families believed that social workers were not being fair to them and did not understand their culture. She, however, argued that she had always been sensitive about culture within her practice rather than just offering an interpreter:

Especially when children are on a child protection plan, there are strict guidelines when to [carry out a child protection] visit, and even those we [social workers] tried to be as flexible as possible to make sure that we don’t interfere with people’s festivals and things like that. There are
some cultures that have more festivals than others, it becomes a bit of 
a challenge but we always make conscious effort to try and find the 
best possible way. (Gina)

Social workers also recognised that migrant BAME families were learning and 
 adapting to the culture within the UK. One participant said that the process of 
 adjusting to culture happens naturally, especially in intercultural relationships 
 (between an individual from White British ethnic background and an individual 
 from a BAME background). She argued that a person from a minority 
 background would usually adopt the culture of the person from the majority 
 background. Another participant doubted, though, if the cultural adjustment is 
 always positive. Beth encountered some young British Pakistani individuals 
 who were influenced by the British drinking (alcohol) culture. This behaviour 
 had caused many problems within some families, particularly with their parents 
 and partners who were not born in the UK, since Muslims are prohibited from 
 drinking alcohol.

4.3.3 Culture’s influence on roles within families

A few participants mentioned how culture could shape gender-role expectations 
 within a family. The participants believed that social workers needed to 
 understand how these gender-role expectations affect social work interventions 
 with a family. They observed that in some Asian cultures women were 
 traditionally seen as “a property”, and the expectation of them was described 
 as follows: "staying at home, clean, they don’t talk back to their husbands". 
 Women, in addition, are often expected to look after the children and would be 
 blamed for children’s misbehaviour. These perceptions of women were 
 connected to their lack of power within the family. These women’s 
 powerlessness was highlighted when other child protection concerns arose. 
 Beth gave an example to demonstrate how social workers’ cultural insensitivity 
 could put BAME women in very difficult situations. She said that some social 
 workers placed a lot of responsibility on these women, when they were victims
of domestic abuse, in preventing the male (perpetrator) returning to the family home. She said that women in BAME families very often have no influence within the family and even less power to protect or change situations:

Some women and certainly in some cultures can’t just stand up and react to situations, be strongminded and remove themselves. A lot of ethnic minorities’ women struggle with that. (Beth)

Beth also stressed the importance of knowing who else is living within a family. In some cultures, there is a tendency to have several generations sharing a home. In some situations, BAME women will live with their in-laws. BAME women may, in such instances, lack control and privacy within their home. This may make it even harder for them to be honest and comfortable when speaking to social workers about their difficulties.

4.4) Use of interpreters

All social workers mentioned the use of interpreters when working with BAME families. In their opinion, using interpreters helped them overcome language barriers when communicating with families but using interpreters was not without problems.

4.4.1 Ensuring information are being communicated accurately

Some social workers stated that information needed to be communicated in a family’s first language to ensure they understood it. One practitioner, in particular, explained how language could be a critical tool in communication. She related her own experience becoming a minority ethnic group when travelling to other countries:

I felt not being able to understand on the other side, so I know what it feels like when people don’t understand what I am saying and when I can’t communicate what I am saying - the frustration that leads to and the emotions that bring. (Amy)
The above quote illustrates the importance of using interpreters so families can understand clearly why social workers are involved and can express their views. Amy, on the other hand, highlighted the importance of using interpreters so that families cannot use communication problems as an excuse for not addressing the child protection concerns. This was said to be especially important when cases were escalated to care proceedings.

Participants had experiences where BAME parents declined interpreting services. Fiona stated that she had to work with a parent who had refused to use interpreters. It was apparent, to Fiona, that the parent did not fully understand the complex information given by professionals. She commented that social workers needed to offer interpreting services repeatedly to BAME families who refused to use them.

Although social workers used interpreters to convey information, some participants mentioned that an interpretation might not be entirely correct and that information might be “lost in translation”. Some social workers commented that they would double check a family’s understandings to minimize the possibility of misinterpretation or missing information.

4.4.2 Quality of interpreters

Professional interpreters are often provided by local authorities. Most participants said that “in-house” interpreters are usually experienced and know their role in the child protection context. Gina stated that interpreters had their own set of guidelines on what to do during a visit. For instance, interpreters should go into a family home only when they were with a social worker with whom they were working with (rather than going in on their own if they arrived first). Gina and Hannah highlighted the importance of briefing an interpreter before conducting a home visit. They would talk to an interpreter briefly about the context of the case and about the social worker’s expectations of the
interpreter. Hannah believed that social workers should be clear about the expectations of interpreters, such as the interpreter needing to interpret everything the social worker said.

Amy emphasised how professionally trained interpreters can aid communication. She had been qualified for 15 years and explained how problematic it was when children were being asked to act as an interpreter for their parents. Amy said it is inappropriate to have children taking on the role of interpreter due to the embarrassment and stress it could involve. Fiona also felt that social workers should not use family members as interpreters. Iva, however, pointed out that where it was necessary to visit a BAME family at short notice and a professional interpreter was not available, she would ask a family member to interpret short conversations. Iva also pointed out, though, that she would – where matters were important - always follow up this visit by repeating the same information through an interpreter during the next visit.

4.4.3 Relationships between interpreters and families

Some participants discussed the factors that should be taken into account when requesting an interpreter. Participants believed that social workers needed to think about the gender of interpreters based on the nature of the concern. For instance, social workers said they would request a female interpreter when discussing concerns of FGM and domestic abuse with female service users. Another factor to consider was the possibility of providing families with the same interpreter over time. Such consistency could enable a family to build trust with the interpreter and enable the interpreter to have a better understanding of the family’s situation. This, in turn, could benefit a social worker’s intervention as interpreters could better communicate concerns and families might then be more likely to address them.

Some social workers raised concerns over interpreters being too “close” to a family. Iva observed that some families might have a better rapport with an
interpreter especially if they were from the same community or a similar ethnic background (and the social worker was not). Gina argued that having the same interpreter, who was also from a similar ethnic background to the BAME family could, over time, lead to "boundaries being blurred". She had provided a family with the same interpreter who was from a similar ethnic background on all of the visits. When that particular interpreter was not available for a visit, the family refused to speak to Gina. She felt that the family regarded the interpreter as "working with them [interpreter being ‘on their side’] but in fact, the interpreter should be an independent person". Gina stated that social workers should make a professional assessment to determine if a different interpreter (in terms of ethnicity or over time) was required, especially when an interpreter appeared to be too familiar with a family and started to lose objectivity.

Interpreters are usually from the same communities as BAME families and it can be difficult to avoid using interpreters who know a family. One social worker provided an example of her colleague having to use an interpreter who was related to the family. This social worker expressed concerns over the interpreter’s objectivity in this case. Two other participants brought up a similar scenario and questioned whether families would be comfortable speaking to an interpreter who knows the family personally. Gina pointed out, however, that interpreters would usually bring it to a social worker’s attention if they knew a family. She added that social workers could request a different interpreter to avoid any conflict of interest:

Certain languages may not be that popular [i.e. not that widely spoken] or it may be a very small community. That interpreter maybe part of the community. At the beginning of the conversation, I would always make sure that the interpreter doesn't know the family.... I always would try to check with families, especially the families from smaller communities, to make sure that they [the family] don’t know the interpreter. (Gina)

Some of the social workers said that they noticed interpreters sometimes would begin their own conversations with families. This was evident when interpreters were not interpreting their conversations with family members back to social workers. The participants were able to identify this as they were ‘actively
listening’, and through this became aware that the interpreter and family were having a more extensive conversation than was indicated by the interpretation that was provided. Social workers stated that they would, in these cases, challenge the interpreters and ask if they were interpreting correctly.

Hannah explained that some families were not comfortable speaking to an interpreter from the same community because they were worried about their privacy being breached. Hannah reported that she would, in such cases, explain to a family that the role of the interpreter was to support communication between the social worker and the family. She would also explain that the interpreter would not relay the conversation to anyone else and that they worked to strict professional guidelines in order to comply with confidentiality.

4.4.4 Using an interpreter

A few social workers mentioned that difficulties could arise during the process of using an interpreter. One social worker commented that it could be frustrating having to use a third party to pass on information. Some social workers felt that their train of thought and the flow of the conversation had to be slowed to wait for the interpretation to take place. Elaine illustrated how such a delay could be troublesome when parents became emotionally upset. As the social worker did not understand what the parent was saying, she was not able to respond until the interpreter could inform her of the conversation. This difficulty also created barriers to social workers conveying empathy in a timely manner.

Some social workers doubted, in addition, whether interpreters could interpret the emotions of social workers and BAME families fully. Fiona found that, unlike the use of sign languages, which require a lot of facial expressions, it was hard to tell if verbal interpretation was conveying messages in the way she wanted:

> I think sometimes, in terms of how you are speaking or how you want to come across, got “lost in translation”, especially when talking about safeguarding issues. There are things that I think need to be stern and strong in my tone to get the message across, of how vital it is…
whether that would translate with an interpreter would be a different issue. (Fiona)

Gina stated that she knew a few languages other than English. Although her command of these languages was not good enough for interpreting, she was able to use her language skills to understand the context and emotions of family members within conversations. She would, for example, know the times when a parent was using a vocabulary that displayed anger or sarcasm. Gina stated that interpreters did not interpret the "details in between the lines" very often, like voice inflexions. Some social worker stated that, as a result, non-verbal communication became more important when working with BAME families via interpreters. The participants would always remind themselves to maintain eye contact with the BAME family. They would speak directly to the family rather than speaking to the interpreter. One social worker talked about the fact that she would pay more attention to the body language of the BAME family members. She would, for instance, try to understand what families were trying to communicate by observing their eye movements and hand gestures.

4.4.5 Training in using interpreters

Social workers were asked if they ever had training on using an interpreter. Only two participants said that they had training in this area. This training focused on, for example, the roles of interpreters, and the need to be mindful as to how long a parent speaks and to compare this with the interpretation provided by the interpreter. The rest of the social workers had had to learn about how to work with interpreters via experience. One social worker remarked that using an interpreter is “just a quick technical fix” and suggested that there should be more focus on other aspects of practice instead, such as the lived experiences of BAME families.
4.5) Engaging in continuing professional development

When asked about having any training regarding cultural competence, social workers unanimously agreed there were gaps in the training they had received both during qualification and post-qualification.

4.5.1 Training during qualification

All but one participant reported that they had some sort of training in relation to cultural competence during their qualifying training. They remembered being taught about anti-oppressive practice, anti-discriminative practice, diversity, and social inequalities. These topics were distributed among different modules rather than being under any single one. All of the social workers implied that they were not taught much on practical skills in working with BAME families. Although social workers were taught associated theory, they did not see themselves as being guided to apply this knowledge within their practice. One social worker, for instance, said that students were taught by university lectures about social inequalities in general. The students were not taught, however, about how social inequalities, like poverty and discrimination, are reflected in BAME families’ lives or what social workers should be doing to address the effects of these social inequalities. One social worker said:

I would not say I have any specific training even at the university; it is more theories and methods around working with ethnic minorities groups. But that is more academically, so no certain training. (Beth)

Another participant stated that he could not recall being taught any particular skills for working with families from outside the UK other than the need for an interpreter. Two participants thought the training they had had was very general. One of them speculated that the curriculum may have been quite generic as it was hard to predict and teach specific knowledge tailored to the socio-demographics of a group that a student might eventually work with. Another
social worker argued that social work skills, like communication skills, are transferable and enable them to work with families from any ethnic background.

4.5.2 Post-qualifying training

Participants agreed that there were, overall, lots of continuing professional development opportunities available in their employing organisations. Although training is not necessarily culture-specific, training is often on topics that can be more relevant to certain communities than the others. Social workers mentioned training on female genital mutilation (FGM), forced marriage and Prevent (counter-terrorism). These sessions invariably provided considerable information that social workers could utilize in practice. One social worker, for example, made use of the knowledge on the prevalence of FGM in different countries a potential indicator that a child might be at risk of FGM.

Some social workers perceived that the training they had received had been an important element in improving their cultural competence, particularly when working in an ethnically diverse local authority. Two social workers used the term “cultural shock” to refer to how difficult it can be for some social workers who have previously worked in a less diverse area to work in a more multi-ethnic area. Although the socio-demographic characteristics of an area was not something social workers could control, they could attend training to compensate for their lack of knowledge regarding different cultures. Two social workers, for instance, stated that they had attended specific training on how to work with Gypsy, Roma and Traveller communities, as they frequently came across this group in the local authority in which they worked.

4.5.3 Learning resources

Participants stated that they had used multiple resources to improve their cultural competence. This had included learning from online resources, doing their own research and consulting other people.
4.5.3.1 Online resources

Numerous online resources were available for social workers to access. The following resources were highlighted by social workers across the interviews:

1. Guidance on FGM (Home Office, 2016)
2. Guidance on forced marriage (Home Office, 2018)
3. Resources on children from Gypsy, Roma and Traveller backgrounds (Department for Children, Schools and Families [DCSF], 2009)

4.5.3.2 Doing their own research

One social worker added that doing her own research was helpful, even though there was no ‘resource pack’ readily available:

> I had a case years ago and there is a case where the family believe in Fudo-ism…. So I had to read up about that. I don’t think there is particular resources but it about being sensible and doing your research in that particular area. (Diana)

Iva stated that she used to work in a team where there was a resources library with books and information about different social work topics. After a team member had done research on a specific culture or ethnic group, the team member would print out the information and share the knowledge with her colleagues:

> It wasn’t to say this [information or factsheet] explain someone’s culture completely but it gave you a starting point… It was so helpful… The manager made it clear that this [factsheet] was just a starting point. It was not descriptive of everybody within that culture.

4.5.3.3 Consulting other people

Social workers viewed consulting other people as another key means of improving their cultural competence. Three social workers mentioned reaching out to community organisations and ethnic-specific services, as they often had the expertise. One social worker added that she would be careful not to share
too much information with outside agencies without a family’s consent, even when it was just seeking advice. Participants said social workers should become more involved with these services and community groups. They suggested that social workers should attend events or meetings organised by the community, and talk with attendees and learn about the issues within the community, and about families’ day-to-day experiences. One participant recommended going to specialist teams within children’s services, like the unaccompanied asylum seekers team, to obtain advice. Some participants would discuss broader issues with interpreters, who attended home visits, to help understand situations. Iva stated that, before or after a home visit, she would ask interpreters to share their knowledge of their culture. Many of the social workers in the present research believed that, ultimately, as a professional, it was vital to keep an open mind when learning from other people about a different culture.

4.6) Reflecting as a practitioner

Participants reflected on the influence of their own background on working with BAME families, whether they [the social worker] were from the majority or the minority ethnic group.

4.6.1 Reflections on being a BAME social worker

Social workers from BAME backgrounds discussed their own ethnic identity and the influence of this in their work. BAME social workers were aware that families from the same ethnic background often saw them as an ally and described families trying to get them to “collude” with them. There was an expectation almost from BAME families that a social worker from the same or similar ethnic background would ‘side with them’ and accept their abusive behaviours as a norm. Beth, who was from an Asian background, stated that she had to work harder to establish professional boundaries with such families:

Suppose also when you are Asian, though it can happen to any ethnicity, and you go into another Asian family, they sometimes think
you know what it is like to be in our culture. They try to say you should know what it is like – “this is our business” and as if to say what happened is normal - so you are Asian and you should know what happens in Asian families. But then you got to say “no, I haven’t experienced that” and it is not normal for children to be raised in that environment. (Beth)

The above quotation illustrates that social workers can be conscious of how some families may try to align themselves with social workers based on a common ethnic background. In engaging families, another BAME social worker said she needed to make explicit to BAME families her professional role and responsibilities. These two examples show that BAME social workers may invest a lot of effort in trying to maintain barriers to avoid families’ over-associating with them.

On the other hand, BAME social workers also experienced BAME families refusing to work with them based on their (similar) ethnicities. A BAME worker stated that a family from the same ethnic background she herself identified with had accused her of being racist. The family argued that the social worker discriminated against their culture, even though the social worker shared the same culture with the family. Another BAME social worker speculated that some BAME families did not want social workers from the same ethnic group or community to work with them, probably due to the stigma they might experience from the community and in fear of having “no secrets within the same community”.

While trying to prevent families’ over-association, BAME social workers also needed to avoid their own over-identification with the families with whom they worked. Participants talked about their own experience of being a member of the BAME community while at the same time remaining professional in their practice. Fiona identified herself as ‘Black or African or Caribbean or Black British’. She was aware that her own parents grew up in an environment where physical chastisement was used to discipline children. She believed, however, that physical chastisement was damaging to children, that parents who use physical chastisement were teaching their children to be violent and that being
violent was not a cultural issue. Fiona recalled challenging another Black social worker’s approach to working with a father from the same ethnic background. The other worker very much aligned with the father’s view of physical chastisement as being “normal” back in their home country and only seeing it unacceptable because of the action happening in the UK. Fiona argued that in this case, the social worker should have been focusing on the impact of physical chastisement of the children instead of over-identifying with the father and agreeing with what he said.

Although social workers’ ethnic identity can cause complications in practice, BAME social workers also see themselves bringing a wealth of knowledge on their communities to their practice. One BAME social worker believed that social workers from ethnic minorities bring a very different “knowledge about all these other things [culture, backgrounds, challenges, the strengths and weaknesses] that somebody from a White background wouldn’t have because of their own experience”. Another BAME social worker regarded a diverse workforce as a learning opportunity. She stated that when working with a BAME family, she would, personally, rather consult and discuss cases with colleagues from that particular background as they “may understand that culture a bit better”. Another BAME social worker also believed that working within a multicultural workforce allowed all social workers to learn from each other’s culture in a safe way. She argued that social workers could have a safe environment to discuss culture, simply by asking each other questions starting with “I don't know if this sounds racist” or “I don't know if this is offensive but because I feel safe in this environment so I can ask you”.

One social worker stated that colleagues could sometimes become over reliant on BAME social workers to work with their own ethnic group. Fiona gave an example where the manager had ethnically matched a social worker to work with families from the same ethnic background:

This one guy [Black social worker] got all the Black males. Basically if you were a Black male and this guy had capacity, he would be your worker, 100% definitely. The idea was always – he was really good
with them [Black children]. He was a Black male and they [the children] were Black male. But I do think people look [at the Black social worker] and think “you'll be good with that client group” because they [Black children] think that “you're like them” or “you look like them” then you can work with them’

Another participant argued that even though social workers might be ethnically matched with families, this match was very often based on the experiences and expertise of the BAME workers rather than just ethnicity.

4.6.2 Reflections on being a White social worker

White social workers placed a stronger emphasis on the need to demonstrate cultural awareness and sensitivity in their practice compared to BAME social workers. White social workers tried to ensure that they acknowledged the differences between themselves and BAME families in their practice. Some White social workers reported that they tried to find the fine balance between being respectful of differences and intervening appropriately. One parent had accused a White social worker, who was managed by Diana, of racism. While she found there was no basis for the claim, she suggested that the social worker needed to show more cultural awareness, reflect on how to apply their knowledge in practice and be more:

    Aware of the families' background and the cultural norm - where they are from, their beliefs and religion and everything. Getting the training on the awareness of different ethnic group, knowing what their norms and practices are. However, at the same time not over emphasis on that. Social workers need to have that knowledge of different ethnic groups, and then know what to consider in their intervention and assessment. Basically, having a balance between the awareness but not making assumption. (Diana)

Diana stressed that social workers should be more thoughtful in taking actions and decisions given the distinctions between the experiences of BAME and White families. White social workers should, in addition, she said, devote extra attention to acknowledging the fact that BAME families’ experiences are
differing from the majority group. Chris, for instance, spent the majority of the interview talking about the significance of understanding BAME families’ experiences of being excluded, understanding inequalities and having to build trust with families. Elaine believed that White workers tried to make doubly sure that BAME families were treated equally and fairly. She felt that social workers ultimately had to show families that professionals were “not passing judgement on someone’s background”. These three examples, taken together, create an impression, of White social workers recognising clearly the differences between them and BAME families, and trying to minimize any resultant bias to the best of their ability.

4.6.3 Other groups of practitioners

Some participants were critical of other professionals’ practices with BAME families. Social workers tried to avoid discriminatory attitudes or behaviours towards BAME families, but they found that other professionals were sometimes over-cautious towards, or exhibited certain prejudices with, BAME families.

Amy said professionals have to demonstrate reasonable “professional curiosity”, as “going overboard” could be oppressive. She described how the staff at one school, though, overreacted, she felt, when a girl from a BAME background wanted to leave the country with her father. Whilst the girl, who clearly had competence, expressed again and again they were just going on holiday, the school staff were assuming that she was at risk of forced marriage purely on the basis of the girl’s ethnicity. The social worker reflected that:

And I am thinking if that was a White child that says, “I am going to Spain on holiday with my Dad”. Would we be saying the White child is at risk of forced marriage? What would our answer be then? … Because they just think anybody that is Asian or comes from a background where marriage is arranged, that forced marriage is on the
agenda. That all anybody wants to do is to take their kids away and get them married. (Amy)

The social worker assessed the situation and clarified with the school staff that there was no indication or sign that the girl was going to be married forcibly. This was an example both of how the assessments of other professionals could be erroneous, misleading, and also the need, sometimes, for them to analyse situations critically as social workers sought to do.

Another participant revealed that she sometimes had to stand up and challenge other professionals to ensure BAME families were being treated fairly. She cited the example of a Black Caribbean baby who sustained injuries and where other professionals were of the view that the mother had caused these injuries. The social worker completed her assessment and came to the conclusion that there was considerable evidence against this view. The social worker argued that professionals in that case had been biased towards the family members on the basis of their race and ethnicity. She speculated that other professionals would approach the case differently if it had been a White British mother. She had to “fight for the family” by reminding the other professionals to look at the facts rather than focusing just on their opinions.
Chapter 5 – Discussion

The aim of the present study was to understand current practice among social workers working with BAME families. Even though the present study was a relatively small-scale, the findings drew on practice knowledge of quite experienced frontline child protection social workers. Six themes emerged from the data analysis. Four themes related to the first research question, which concerned the practices social workers adopt in working with BAME families. The present study found that social workers should make sure they fully understand the BAME families they are working with, including their experiences, the support a family’s network could provide in ensuring the wellbeing of children, and a family’s knowledge of public services. Social workers should utilize the community as a resource when working with BAME families but at the same time acknowledge that communities can ‘hide’ or fail to recognize child protection concerns. Social workers need to understand the challenges that BAME communities can face, including oppression. The present study revealed that social workers must recognise that culture is not an excuse for child abuse. Social workers should acknowledge and address cultural differences between themselves and BAME families. Social workers should understand how culture can influence roles within families. In addition, social workers need to use professional interpreters appropriately to communicate with BAME families. Even if social workers face difficulties in accessing interpreters, they should still use an interpreter to work with BAME families. Social workers also need to be mindful as to whether the relationship between BAME families and interpreters is benefiting or hindering a child protection intervention. Social workers should try to demonstrate empathy with families, pay attention to non-verbal communication, and receive training to ensure they are able to work with an interpreter effectively.

The two remaining themes - engaging in continuous development and reflecting as a practitioner addressed the second research question as to how practitioners could improve cultural competence in child protection practice.
Social workers should continue to enhance their knowledge about different cultures and how to work with BAME families. The means by which they can enhance their knowledge include attending training, using other available resources, conducting private research and consulting other people. Reflecting as a practitioner means that social workers should not over-identify or collude with BAME families. Social workers should remain objective and fair at all times, and challenge inappropriate practice on the part of other professionals. While the present study provides some suggestions for social work practice with BAME families, it should be noted that there is no one-size-fits-all approach to work with families as all families are unique.

5.1) Understanding BAME families

Although the focus of the present study was not to debate the terminology “Black, Asian and minority ethnic”, it is evident that participants question the appropriateness of effectively viewing all ethnic minorities as an homogeneous group and assumptions being made about particular ethnic groups – as is implied by the use of such an all-encompassing term. It is important to remember that the notion of "ethnic group" is a social construct (Weber, 1978). A person’s ethnic identity is constantly changing based on self-identification and through ascription by others (Barth, 1969). When participants used terms such as “Asian” and "Gypsy" to refer to different minority ethnic groups collectively, they were essentially categorising the families they worked with based upon their own understanding of ethnic identities. The families may not identify themselves with the categories participants used, or families may have a different understanding of the ethnic identities in question. For instance, “Gypsy” can include people who are identified or self-identified as “‘Gypsies’, ‘Romany’, ‘Romany Gypsies’, ‘Travellers’, ‘Traditional Travellers’, ‘Romanichals’, ‘Romanichal Gypsies’, ‘Scottish Travellers or Gypsies’, ‘Nawkens’, ‘Welsh Gypsies or Travellers’, ‘Kale’ and ‘Roma’ ” (DCSF, 2009). The terminology used to refer to race/ethnicity are ambiguous and complex, and they have been subject to extensive and intense debate (Ford, 2015; Sandhu, 2018). The terms used by participants and their understanding of ethnic identities were, however,
important when taking into consideration Michel Foucault’s theory of discourse and power/knowledge. Foucault (1980) argues that discourse (language and/or practices) holds power over people, controlling what a person can or cannot say, or do, in a society. In the context of this study, the discourse participants have on "Asian" and "Gypsy" influences, to a degree, how practitioners perceive the experiences or behaviours of these families and how participants rationalise their social work practice. Nonetheless, participants demonstrated a strong belief that all families are unique, even if they were from the same minority background. Social workers appreciated the fact that no BAME families would have the same experiences, network or knowledge of the public service system. The present research highlights that such an approach is crucial to work with BAME families, with practitioners not generalising about families as if they were one homogeneous group but rather acknowledging a family’s own identity and circumstances (Equality Challenge Unit, n.d.; LSCB, 2011).

In understanding BAME families’ identities and circumstances, the present study finds that social workers take an intersectional approach. Although only one participant mentioned the term “intersectionality”, many of the participants acknowledged various intersecting inequalities that BAME families face. In explaining intersectionality, Crenshaw (1989) stated that a person could have multi-layered identities, such as race/ethnicity, gender, ability, age and socio-economic class. All of these identities interact or intersect with one other, shaping one’s complex, lived experience of oppression and privilege (Collins & Bilge, 2016; Symington, 2004). Within the current study, and using domestic violence as an example, participants acknowledged and planned their interventions after considering the intersecting inequalities of gender, race/ethnicity, poverty and migrant status. There was evidence that participants identified the need to address the complexity of all the interrelated oppressions BAME families faced rather than addressing them in isolation. The participants’ reflections on intersecting identities opens up a valuable discussion as to how the nuances of intersectionality might be further considered in social work practice. Do social workers really understand the dynamic lived experience of BAME families? Are social categories other than the race/ethnicity being
considered? What can social workers do to simultaneously and effectively address the intersecting inequalities BAME families encounter? It is suggested that social workers have to look beyond the individual (micro-level) intersecting inequalities: are they acknowledging and responding to those inequalities that are present in the wider society (meso- and macro-level) (Winker & Degele, 2011)? The present study suggests that there is an emerging application of intersectionality when working with BAME families. The questions raised above provide the possibility for further exploration of how social workers can utilise intersectionality when working with BAME families. Intersectionality is, however, not a new concept within social work practice but rather one that is now quite well established, as can be seen in responses to domestic abuse (see Humphreys & Nixon, 2010; Sokoloff & Dupont, 2005). Taking an intersectionality perspective in work on domestic abuse is necessary to enhance cultural competence (Lockhart & Danis, 2010). As highlighted in the literature review, the special difficulties that BAME families face in their lives could help explain why some BAME children came to the attention of children’s social care. Participants in the present study revealed that reflecting on a family’s circumstances helped them understand BAME families’ concerns and consider the effectiveness of their (social work) interventions. This is in line with Ventress’s (2018) arguments on the importance of ‘context’ in child protection. Social work interventions are more effective and comprehensive when all aspects of BAME families’ lives are considered through an intersectional analysis (Symington, 2004). Understanding the BAME family through an intersectional approach is one of the elements of Featherstone et al.’s (2018) suggested social model of child protection. They state that social workers need to step away from focusing solely on risks that individuals (like parents) bring to the safety of children and open up assessments, and consider the effects of economic, environmental and cultural challenges on families. Within a social model of child protection, social workers should see child abuse as socially constructed, and acknowledge how structural inequalities like poverty, sexism and racism could shape the wellbeing of children (Featherstone et al., 2018).
Participants in the present study highlighted ‘immigration generation status’ and considered it as a potential source of intersecting inequality. Immigration generation status refers to an immigrants’ nativity status: first generation\textsuperscript{10} or later-generation immigrants\textsuperscript{11}. It is easy to focus on the differences between BAME families and White British families and fail to consider the difference between different generations of BAME families (Waters, 2014). Participants in the present study pointed out that different generations of BAME immigrants might be different from one another in terms of their lived experiences, knowledge of public services and access to public funds. When looking at the social model of child protection, the inability to access public funds due to immigration status, is an economic barrier to children’s wellbeing. Participants mentioned how not having recourse to public funds limits the support available to improve children’s living conditions. Social workers in the present study could find more inequalities within generations of immigrants than between ethnic groups. Hall et al. (2017) found that English language proficiency among younger generation BAME women was better than that of older generations. When looking into the intergenerational comparisons, Dustmann and Theodoropoulos (2010) found British born ethnic minorities (second generation immigrants) have greater educational achievement than their parents (first generation immigrants) and their White British counterparts. National and international studies highlight how BAME parents’ authority and control over their children is undermined as a result of inequalities brought by immigration generation status (Wang et al. 2012; Yakhnich et al., 2019). Social workers should, therefore, take into consideration how immigration generation status can add to the intersections of race/ethnicity, gender, education and poverty.

\textsuperscript{10} First generation immigrant refers to a person who was born outside of the UK and moved to the UK. Subsequently, children with at least one first generation immigrant parent and who are born within the UK are referred to as second generation immigrants, and so on (Agafiței & Ivan, 2016).

\textsuperscript{11} Later-generation immigrant refers to the children or descendants of first generation immigrants.
5.2) Valuing community

In the social model of child protection, more effort needs to be directed, by practitioners, towards understanding the role of communities in protecting children and utilising community as an intervention in children’s lives (Featherstone et al., 2018). The term community often refers to people who live in the same area or the interdependent relationships within a group of people (Gusfield, 1975). Although the concept of ‘community’ was not examined by participants in the current study, they appeared to be in agreement with the idea of community being about interdependent relationships. They emphasised the resources, relationships and shared beliefs that exist in a ‘community’. This is also in line with Weber (1978) who saw community as being socially constructed and based on shared values and a “sense of belonging”, rather than being just individuals’ geographic location. It is even more important to recognise the value of relationships especially when the existing social welfare system is not adequate (Cottam, 2019). Instead of purely relying on professionals, the networks of human connections in communities provide an affordable and effective system of support for families (Cottam, 2019; Featherstone et al., 2018). However, valuing community is not a new idea to the social work profession. When referring back to the development of social work, particularly the Settlement Movement, it can be seen that there was a strong focus on community values and community power to promote social change (Wilson et al., 2011). The Barclay Report (1982) promoted the notion of the “community social worker”, where social workers worked closely within the community and still carried out statutory duties. However, all these calls for community-based approaches seemed to have faded out over time and especially within contemporary social work practice in England (Wilson et al., 2011). Following on from the views of the participants in the present study, and the wider literature, it appears that social workers should take community into account when working with BAME families in child protection.
Consulting community centres, ethnic-specific services and faith organisations enables social workers to obtain advice, and broaden their knowledge, on BAME families and thereby enhance their cultural awareness (Barn & Das, 2016). This interaction can also enable social workers to engage with families who are “hard to be reach” by outside communities (Chimba et al., 2012). In the present study, participants were in agreement about the value of community resources. The suggestion from the present study is that a) communities may have the local knowledge that BAME families require and b) they can provide opportunities for networking with people from a similar background. Within the social model of child protection, social workers should consider environmental challenges faced by BAME families, such as the availability of community-based support services (Featherstone et al., 2018). The participants in the present study pointed out that BAME community centres or ethnic-specific services might not exist in many areas. It is also possible that social workers did not know they were available.

Another major problem raised by participants was how some psychosocial issues might not be acknowledged within some BAME communities. Part of the issue, here, could be that there is no word to express concerns like mental health or that communities are unfamiliar with addressing such concerns. This perception is supported by the DoH (2009), which stated that there is no word for “depression” in certain Asian\textsuperscript{12} languages. Participants in the present study also recognised how issues of gambling and substance misuse can be ‘hidden’ within BAME communities. Some members of BAME communities may conceal their gambling, alcohol and drug misuse to avoid bringing shame to their family or community (Bayley & Hurcombe, 2011; Forrest & McHale, 2012; United Kingdom Drug Policy Commission, 2010). Many Asian\textsuperscript{13} communities would rather keep concerns of child sexual abuse hidden to protect their izzat (honour/respect), maintain haya (modesty) and avoid the shame (sharam) that

\textsuperscript{12} Punjabi, Urdu and Hindi.

\textsuperscript{13} In Akhtar and Gilligan’s (2006) research, “Asian” refers to a person whose family originates from Pakistan, India or Bangladesh.
comes along with the disclosure of such incidents (Akhtar & Gilligan, 2006). Social workers need to be aware of how the concepts of honour and shame, and the “power” of community, can have a strong influence on BAME families’ willingness to address child protection concerns (Sharp, 2015).

The present research suggests that there is a need for social workers to develop a better understanding of BAME communities. Barn and Das (2016) recommended that social workers learn about the issues BAME communities face and what it means to be a member of these communities. Social workers should look beyond the immediate family and into the wider context of children’s lives, as in indicated within the concept of intersectionality and within the social model of child protection (Collins & Bilge, 2016; Featherstone et al., 2018). The present research highlights that social workers should become more aware of the negative impacts on BAME families of factors such as poverty and racial discrimination. Social workers should spend time listening to BAME families and unpicking the complexity of their experiences within communities (Barn et al., 2006; Cree et al., 2017).

5.3) Exploring culture

Participants in the present study highlighted the role of culture when working with BAME families. This provided further evidence that the social model of child protection was applied in practice. Cultural competence requires social workers to have cultural sensitivity by appropriately considering cultural differences within practice and having the “capacity to know when (and when not to) consider cultural factors with ethnic minority families” (Sawrikar and Katz, 2014, p. 405). Participants in the current research demonstrated cultural competence in, for example, their responses to physical chastisement and domestic violence.
Cultural differences in child rearing, particularly as they relate to physical chastisement, was a major focus of concern among participants in the present study. This finding is similar to that of Križ and Skivenes’ (2010a) who found that English social workers consider physical abuse among ethnic minority children a major problem for them. Križ and Skivenes argued that there can be a “difference in values” and “difference in system understanding” between social workers and ethnic minority families. Their claim is reflected in the present study. Participants in the current study pointed out that migrant BAME parents often see physical chastisement as “normal” (difference in values) and that they (the parents) would report there was “no social care involvement [around the physical chastisement of children]” in their country of origin (difference in system understanding). In order to address these differences, it appeared that the participants in the present study had adopted a largely educational approach in intervening with BAME families, helping them to adjust to the cultural differences. Taking an educational approach and explaining as much as possible about what is “acceptable”, is one possible answer to sensitively helping BAME families make sense of the differences between cultures (Chimba et al., 2012).

Participants in the present study also showed cultural competence when working with BAME families by understanding the influence of culture on roles within families. Participants used examples of domestic violence to demonstrate such sensitivity and capacity in a practical way. Although participants acknowledged that there are cultural differences in gender role/power within some BAME cultures, they showed the capacity to make clear to relevant family members that domestic abuse is unacceptable. Participants reflected on the unreasonable expectations placed upon BAME women to stand up against their cultures’ perception of women being less influential than males within families. This type of practice is sensitive to the traditional values of particular cultures while at the same time addressing challenges women faced within the context of culture (Fernández, 2006).
5.4) Use of interpreters

Most participants considered language barriers as one of the major complexities social workers encountered when working with BAME families. The participants’ experiences in this study concur with findings from other research on language barriers in social work. Language affects verbal communication between social workers and families (Alaggia et al., 2017a & 2017b). Members of BAME families may have limited English proficiency and this can stand in the way of their contacting children’s social care (Berridge et al., 2000). Language barriers are a challenge that are not specific to social work practice nor to the UK. Memon et al. (2016), for example, noted that language barriers are one of the reasons behind BAME service users encountering difficulties in accessing mental health service. This was due to their difficulties in articulating their needs, which then led to their receiving inappropriate interventions. Similarly, in a child protection context, missing information could cause an inaccurate assessment of children’s needs and safety (Alaggia et al., 2017b; Chand, 2005). Not being able to convey messages clearly and fully to BAME families can be problematic. A worrying example of this was exposed in an Austrian study in which social workers noted that some BAME families treated social work interventions as opportunities to practise their English and did not comprehend the seriousness of child protection work (Sawrikar, 2015). Participants in the current study demonstrated good practice by offering interpreting services repeatedly to BAME families who clearly required assistance in overcoming language barriers but who had initially refused to use interpreters.

Using interpreters is the most common means of resolving language barriers when trying to practice effectively with BAME families, yet it is not without its problems. The assessment process with BAME families can take longer as social workers may experience some uncertainty over the communication process with families (Križ & Skivenes, 2010b). The present study’s findings corroborate past research on the difficulties that can arise when using
interpretation services. Chand (2005) reviewed four studies regarding how inadequacy in interpreting services could hinder child protection work. Chand, drawing on the work of Humphreys et al. (1999), stated that an interpreter’s availability, gender, quality and accuracy of translation are just some of the issues that can arise when using such a service. These four aspects of an interpreter’s work were all mentioned by participants in the current study. Križ and Skivenes (2010b) stated that both English and Norwegian social workers express frustration at information being missed when they are communicating with BAME families via interpreters. Miscommunication is more common when interpreters do not fully understand the child protection system or the terminology it uses (Križ & Skivenes, 2010b). Participants in the present study did not encounter such issues with inexperienced interpreters. This was because they were mostly using “in-house” interpreters who were trained to work with social workers in a child protection context. Some participants reminded interpreters of the expectations of interpretation before home visits. Some participants would double check families’ understanding of information by asking parents to repeat what they understood from the conversation following interpretation. These two methods helped minimize the risk of miscommunication.

Jones and Westlake (2018), by contrast, suggest that it can be too easy to blame interpreters and that there should be more of focus on the role of social workers. They found that social workers, when using an interpreter, are less willing to ask for clarification from interpreters and do not use as many open-ended questions or reflective statements with BAME families. Jones and Westlake (2018) found that social workers do not use enough ‘phatic communications’, such as ‘small talk’, to build rapport with families whose first language is not English. Social workers may experience additional anxiety owing to an interpreter being present and may shift their focus from the child protection concerns and on to the language barrier (Chand, 2005). In common with the arguments put forward by Chand (2005) and Alaggia et al. (2017a), the present study finds that there is limited training for social workers on how to work effectively and collaboratively with interpreters. The lack of training in this
specific area of practice, both pre- and post-qualifying, leads social workers having to learn about working with interpreters via trial-and-error whilst ‘on the job’.

5.5) Engaging in continuing professional development

Referring to the second research question, participants unanimously endorsed continuing professional development to improve cultural competence in the child protection context. When looking at the initial social work training they had, participants could not recall having a module or session specific to working with BAME families, or on cultural competence more generally, during their social work education. It is possible, though, that participants may have forgotten the exact syllabus of their social work education. All of the participants had graduated at least 5 years prior to taking part in the present research. However, the participants revealed a more important issue: the gap between theory and practice. Participants in the present study stated that they were taught theories in relation to cultural competence but did not know how these theories could be applied in practice. Jani et al. (2016), Robinson et al. (2016) and Weaver (1998) all stress that teaching the theoretical frameworks of cultural competence is not enough to help students develop cultural competence. All of these researchers have highlighted that cultural competence should be ‘taught’ through experiential learning in order to maximize students' learning and confidence in practice.

Participants in the present study argued that there was a need for additional learning when social workers moved to work in different geographical area. It is evidence from the census 2011 (ONS, 2012) that there can be considerable differences between local authorities in terms of socio-demographic characteristics of their populations, including their ethnicity. Social workers can, therefore, encounter a very different client group when they move between different areas.
Although training can be a relatively straightforward means of enhancing cultural awareness, participants in the present study also emphasised the importance of not relying on a single method to improve cultural competence. Consulting relevant community members was not only recommended by participants in the present study but also in previous research (Barn & Das, 2016; Sawrikar & Katz, 2014). Such consultancy can enhance social workers’ knowledge of culture and the community (Barn & Das, 2016). In practice, however, social workers have to be mindful of confidentiality (HCPC, 2017) and the “power” community can have over families (as discussed in section 2 of this chapter).

5.6) Reflecting as a practitioner

Evidence from the present study suggests that being reflective is another component in improving cultural competence. Social workers need to reflect on how contextuality plays an influential role in cultural competence, not only when social workers try to understand BAME families’ identities but also social worker’s own perceptions of “others” (Nadan, 2017).

Consistent with existing research, many of the BAME social workers in the present study saw their own ethnic background as bringing complexity, as well as strengths, to working with BAME families. Sawrikar (2013) reported on how families could be sceptical about social workers from the same ethnic background. This was reflected by participants in the current study. At the same time, the present participants also mentioned other BAME families wanting to have workers from the same or similar ethnic backgrounds, believing that these social workers would understand them better (Weinfeld, 1999). However, participants in the present study revealed also how some BAME families would try to collude with them on the basis of their coming from the same ethnic background. In addition, the example of ‘Fiona’ in the present study
demonstrated how over-identification could be a threat to objective practice in child protection (Sawrikar, 2013). Social workers should maintain their professionalism in establishing boundaries with families and maintain professional judgement (HCPC, 2017). From the evidence in the present study, BAME social workers can share knowledge of their culture with other colleagues. These workers act as the designated person for seeking advice when other workers are doubtful of a particular culture or practice (Sawrikar & Katz, 2014). Only one participant from the current study reported that ethnic matching of social workers and to families occurred in her workplace but the researcher did not routinely ask participants about the existence of this policy in their organisations. A sole example is not enough evidence to conclude whether ethnic matching occurred more generally. Although some participants in the present study believed their manager intentionally matched workers to families, they considered this an allocation of cases based on these workers’ experience rather than their cultural background or language skills. It should be noted these were the views of caseworkers but not their managers who allocated the cases.

The White social workers in the present study demonstrated self-awareness of the differences between them and BAME families, and they reflected on how to carefully weigh their interventions against respect for culture. Although these are factors in improving cultural competence (Weaver, 1998), it would appear that the White social workers have a stronger desire to demonstrate cultural competence than do BAME social workers. One explanation for this stronger need for reflection could be due to White social workers being anxious about BAME families not willing to work with a social worker from different ethnic background. Some BAME families would prefer social workers from the same or similar background because they believe that these social workers will understand them better (Gray, 2002; Sawrikar, 2013). Hence, White social workers may perceive that they have to work ‘harder’ to gain trust from BAME families.
Looking beyond social work practice, the present study shows there is also a need to challenge other professionals’ intentional or unintentional bias towards BAME families. The social work profession is rooted in social justice, and social workers are supposed to “challenge and address the impact of discrimination, disadvantage and oppression” (HCPC, 2017). In principle, challenging inequalities should mean challenging prejudice towards BAME families and in all of its manifestations, including those from practitioners themselves, other professionals and wider society. When engaging with BAME families, professionals have to avoid the ‘pitfall’ of having too much professional curiosity and becoming oppressive. Professionals need to practise “respectful uncertainty” and have a “healthy scepticism”, being especially cautious of making assumptions and accepting information without question (Laming, 2003). Invoking professional curiosity, however, could potentially be constrained by a social worker’s mental ‘capital’ (for example, their level of stress and emotional intelligence), policy factors (such as funding cuts in children’s service) and organisational demands (such as a lack of supervision and support) (see Burton and Revell, 2018).

5.7) Limitations

The current sample size was small, comprising only nine participants. The sample size was too small for findings to be generalised to how all social workers might work with BAME families.

Secondly, the sample did not include social workers who identified themselves under the broad categories of “Mixed or multiple ethnic group” or “other ethnic group”. In addition, the participants did not, in terms of their ethnicity, reflect the diversity of the children’s social work workforce. It was possible that a more representative sample could have provided different results.
Another issue to note was that almost all of the participants worked in the Midlands. While the initial plan was to interview social workers from different parts of England, it was difficult to gain access to participants in other areas. The researcher and her supervisors had approached four different local authorities in different regions of England and only one local authority (in the Midlands) agreed to participate. Five of the participants were recruited via the researcher’s personal networks and they were also mostly based in the Midlands. It might be argued that having the sample concentrated in one region resulted in there being less diversity in the data. It was possible that all participants being based in the same region resulted in their having received similar training and practising in a similar way. However, having the majority of the sample from the Midlands proved to be a key benefit to the study – as all of the participants were from a more ethnically diverse area. According to the England and Wales census 2011, the West Midlands and East Midlands are the second and fourth most ethnically diverse areas of the country (ONS, 2012). 17.4% and 10.8% of the population within the two areas are from minority ethnic groups respectively. Hence, participants were more likely to be exposed to, and work with, a BAME family than social workers from less ethnically diverse areas.
Chapter 6 – Conclusions

As mentioned at the beginning of this research, there are many expectations upon social workers to embrace diversity and safeguard children from all ethnic groups. The literature review highlighted some of the difficulties BAME families encounter in their daily lives and the challenges social workers can encounter when working with BAME families, which are often due to cultural differences (Križ & Skivenes, 2010a & 2015) and language barriers (Alaggia et al., 2017a & 2017b; Chand, 2005; Jones & Westlake, 2018; Križ & Skivenes, 2010b; Sawrikar, 2015). Little attention, however, has been paid, in research terms, to understand how social workers practise cultural competence in frontline child protection work. The present study is important as it provides evidence towards understanding current practice among social workers working with BAME families. The present study demonstrates how social workers have incorporated insights from intersectionality and the social model of child protection into their practice.

The key message from the present research is that social workers should acknowledge the uniqueness of each family and their experiences when working with BAME families. This means that social workers should examine the wide variety of factors that can impact upon BAME families drawing, in particular, from the perspectives provided by intersectionality and the social model of child protection. First, social workers must take into account, within their assessments, all possible intersecting inequalities that can have an influence on a BAME family i.e. race/ethnicity, gender, ability, age, socio-economic status, migrant status and immigration generation status (Collins & Bilge, 2016; Crenshaw, 1989). Social workers have to work with BAME families to address child protection concerns whilst recognizing, within their interventions, the complexity of a family’s unique identities and circumstances. Secondly, and through the social model perspective, social workers have to examine economic, environmental and cultural barriers to child protection (Featherstone at al., 2018). For instance, social workers should be aware of the challenges BAME families face: financially, due to their NRPF status;
environmentally, due to the lack of ethnic-specific services or resources within the community; and culturally, due to cultural differences between them and the majority community.

**Implications for policy**

The findings of the current study suggest that BAME families may be more likely to support interventions from community or ethnic-specific services than they are from mainstream services. It should be acknowledged that engaging with communities can help to protect children (Featherstone et al., 2018). There is a need to develop more community-based organisations and ethnic-specific services that are equipped to meet the specific social, cultural and linguistic needs of BAME families. These organisations and services need to be made more accessible to both BAME families and to social workers. There should be more education in migrant communities about what public services or supports are available to families and also what are “acceptable” child-rearing practices in the UK. The present research has highlighted how child protection concerns, like substance misuse among parents, may be hidden within BAME communities and how other issues, such as mental ill health may not be acknowledged. It is important, therefore, for policy makers to develop strategies to raise awareness of these ‘hidden’ child protection concerns. This may entail mobilizing different community and faith leaders to be involved in planning and implementing policies around education, prevention and intervention (Kimbrough-Melton & Melton, 2015; Wessells, 2015).

**Implications for social work education**

The findings emphasise a number of issues to consider when social workers use interpreters. Social work educators should aim to prepare social workers to be more skilful in using interpreters to communicate with BAME families. Similar to the recommendations by Chand (2005) and Alaggia et al. (2017a), the
present author suggests that there is a need to provide training for social workers on how to work effectively with interpreters. It might be valuable for social workers to have joint training with interpreters as a means of preparing them for such joint-working in their practice with BAME families. Social work educators should attempt to help students understand social worker’s and interpreters’ roles and expectations regarding the interpreting context. They should also provide students with opportunities to learn, and practise, how to hold meaningful and effective conversations with BAME service users through interpreters.

One major implication of the present research, regarding how to improve cultural competence, is for social work educators to rethink how students can be “taught” about working with BAME families. The present research found that social workers believe they are equipped with sufficient theoretical knowledge but do not have enough practical skills to work with BAME families. The present author argues that there should be a shift in focus from teaching theoretical knowledge to incorporating more “experiential” (or practical) elements within social work training (Jani et al., 2016; Robinson et al., 2016; Weaver, 1998). The present study illustrates that cultural competence is not only about having cultural awareness and cultural sensitivity. It is also about considering the wider social context of BAME families’ lives through intersectionality and the social model of child protection. To bridge the gap between theory and practice, the present author recommends an experiential activity based on the “Take a Risk?” exercise by Conley et al. (2017). Conley et al. (2017) argued that experiential learning can assist students in developing cultural competence. They believe that this can be accomplished by engaging students in simulations, based upon the experiences of people who are subject to discrimination and oppression. In the “Take a Risk?” exercise, students are provided with different discrimination and oppression scenarios. They are asked to decide if they want to “take action” to challenge the situation or “remain silent”. When the students have made a decision on how to react to the situation, they are then provided with either a positive, negative or neutral outcome that could result from taking action or remaining silent. Building on the ideas of Conley et al. (2017), and adding on
elements of intersectionality, the gap between theory and practice could be bridged by giving students an activity in which they apply theory to 'real life' cases of working with BAME families in an activity:

A. A social work educator divides students into groups of five and provides them with examples of scenarios where BAME families face intersecting inequalities due to a combination of race/ethnicity, gender, ability, age, socio-economic status, migrant status and immigration generation status. (A scenario could, for instance, be based on the experience of a participant in the current study working with an Asian family to address domestic violence concerns. A detailed example of the activity is provided in Appendix 6.)

B. Students would be asked to identify intersectional inequalities and to describe how they would feel in such situations.

C. Students would then be asked if they want to “take action” to challenge the oppression or “remain silent”. They would then be provided with an outcome of the action.

D. Students would finally have to role-play and demonstrate how, as a social worker, they would work with the BAME family.

**Implications for practice**

With the concepts of intersectionality and the social model of child protection in mind, it can be argued that social workers should:

1) *Understand BAME families.* In the midst of Brexit uncertainty, it is hard to predict what impacts any political changes will have on BAME families and on social work practice. It is unsurprising, however, that there are growing concerns of racism and fears of more unwelcoming attitudes towards migrant families from BAME backgrounds (Booth, 2019). Such developments would likely create additional challenges and complexities for social workers trying to understand the lived experiences of BAME families. Nevertheless, social workers have to avoid making assumptions about BAME families and have to work in partnership with
families to understand their experiences. In practice, this entails both social workers and BAME families having to recognise the family’s history, present circumstances, and possible differences in the experiences of parents and children. Social workers are recommended to check on BAME families’ (particularly first generation immigrants’) understanding of the roles and functions of public services, especially in relation to child protection. There is a need to consider how a lack of knowledge of public services could impact on parents’ ability to access support in protecting their children.

2) **Value community.** Individuals from BAME backgrounds often form organisations and advice centres within their communities. Social workers have to learn about these resources and link BAME families to such support within the community. It might be useful, for BAME families and social workers, if there was a directory of BAME community groups for each local authority area available, as People First (https://www.peoplefirstinfo.org.uk/going-out-staying-in/things-to-do/black-and-minority-ethnic-activity-and-social-groups/) created for three London boroughs. This directory summarises all of the activities and social groups for each ethnic community in these areas. BAME families and social workers can refer to the directory in order to identify and access available services. To understand communities better, social workers are advised to spend more time engaging with BAME families, and the representatives of BAME community centres and ethnic-specific services. Whilst it is recommended that social workers consult with BAME communities to obtain their advice on culture, religion and language (Barn & Das, 2016), social workers must gain the consent of families before discussing them specifically with other individuals or organisations in the community as families might not be willing for their information to be shared. Social workers should recognise that some BAME families may ‘hide’ their problems away from their community, and some communities do not recognise issues such as mental health and substance misuse. Social workers need to educate BAME families about these issues so they then acknowledge and understand the role
of these issues in child protection concerns; issues which then need to be addressed.

3) *Explore culture.* Social workers have to see protecting children as paramount whilst at the same time understanding that families may have different cultures (Laming, 2003). Social workers need to demonstrate cultural competence when challenging situations where culture is used as an excuse for child maltreatment. There should not be double standards when working with BAME families as compared to the White majority, when it comes to child protection. Both social workers and BAME families need to learn about cultural differences and BAME families may need to adjust their culture.

4) *Using interpreters.* When using professional interpreters, it is recommended that social worker brief interpreters as to their expectations of the interpretation. Social workers need to assess the relationship between interpreters and families. Is requesting a female interpreter more appropriate when addressing issues like FGM or domestic violence? Is the consistency of interpreters over time beneficial to intervention? Are families comfortable speaking via an interpreter who they know from their community? Are social workers challenging interpreters when conversations are longer than expected? Do social workers still try to show empathy and pay attention to non-verbal communication when using an interpreter?

5) *Engaging in continuing professional development.* Continuous training can help ensure that social workers have knowledge of the numerous and ever-changing differences between cultures and communities, which can, in turn, improve their cultural competence (Sawrikar & Katz, 2014). Social workers also need to conduct their own research on emerging issues and service user groups, when they first encounter them. Social workers should consult with community organisations, ethnic-specific services or specialised teams within children’s services for advice on working with these issues and groups. However, it is important to remember that BAME families’ culture can be totally different from what social workers have learnt. Hence, social workers
should keep an open mind, be respectful and keep learning (Mbarushimana & Robbins, 2015).

6) Reflect as a practitioner. Social workers need to reflect on their practice to ensure that they have demonstrated cultural competence. BAME social workers need to be mindful of how BAME families can try to collude with social workers from the same or similar ethnic backgrounds. BAME social workers need to be aware of over-identifying with BAME families, remain professional and be objective. White social workers need to be aware of the possible difference between them and BAME families. They should ensure that they are treating BAME equally and that they are not making judgments simply because families are from a BAME background. All social workers should challenge injustice, discrimination and oppression against BAME families, including poor practice by other professionals (BASW, 2012; HCPC, 2017).

Recommendations for further research

The present study focuses on social workers’ perceptions of child protection practice with BAME families. Further research is needed to explore BAME children’s and parents’ views and experiences of the child protection interventions social workers adopt, and specifically: (a) what are the practices that BAME children and families find effective and less effective; (b) how can social workers improve their understanding of BAME children and families’ circumstance and build trust with them; and (c) how can social workers intervene from an intersectional perspective and/or via a social model of child protection. Researchers can work in partnership with ethnic-specific agencies to identify what sorts of approaches and support children and families from different ethnic backgrounds want in child protection and why.

It is important to note that the present study focused only on the child protection aspects of working with BAME families. There are numerous other areas of practice that would be valuable to research further. For instance, future
research could look at the existing practice knowledge of social workers working with BAME families in the children in care, children with disabilities and unaccompanied asylum seeking children’s teams.

**Final thoughts**

Social workers must safeguard children from harm regardless of their ethnic background (Laming, 2003). Staying true to the findings, it is not possible to create a step-by-step manual to illustrate how social workers should work with BAME families in child protection. Social workers need to understand the intersecting inequalities BAME families face and the wider social contexts in which they live. As noted by one of the participants in the present study, social workers need to embrace diversity in order to develop as practitioners. Improving cultural competence is a continuous journey that requires one to keep on learning and reflecting. Working with BAME families is, ultimately, underpinned by social work values, such as respecting diversity, challenging discrimination, and promoting social justice, equality and inclusion (BASW, 2012; HCPC, 2017). Moving forward, there is a need to further explore social work practice with BAME families in child protection. Social workers must be careful not to blame BAME families when they appear to be unwilling to engage with children’s services. Social workers should ask themselves one question: do I really understand the BAME family?
Reference


Understanding the practice of frontline child protection social workers working with Black, Asian and minority ethnic (BAME) families, Reference

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Understanding the practice of frontline child protection social workers working with Black, Asian and minority ethnic (BAME) families, Reference


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Appendix 1A: Information sheet for organisation

<table>
<thead>
<tr>
<th>Title of proposed research project</th>
<th>Understanding the practice of frontline child protection social workers working with Black, Asian and minority ethnic (BAME) families</th>
</tr>
</thead>
<tbody>
<tr>
<td>This research is being conducted as part of a Master's by Research degree at the University of Huddersfield.</td>
<td></td>
</tr>
</tbody>
</table>

**Background to the research topic**

It has been 15 years since the *Victoria Climbié Inquiry* was published. Lord Laming (2003), who conducted the inquiry, pointed out explicitly that professionals work within a culturally diverse society and should safeguard children from all ethnic groups. However, there is limited research into social workers’ practice with ethnic minorities in the UK. In a recent study, Kriz and Skivenes (2010a, 2010b, 2012) compared the practices of social workers working with ethnic minorities in the UK and Norway. They found that the following issues arose in practice in both countries: challenges around language (Kriz & Skivenes, 2010a), cultural gaps (Kriz & Skivenes, 2010b) and the focus of practitioners (Kriz & Skivenes, 2012). Apart from Kriz and Skivenes’ research, there is little knowledge on whether and how social workers in England practice cultural competence in a frontline child protection context. Due to the ethnic diversity of the UK, it is important that this practice knowledge of social workers is researched. That is why this research is being done and why social workers are being invited to share their views and experience of working with BAME families. It is hoped that this work will highlight how social workers can improve their practice.

**Aim of the project**

- To understand current practice among social workers working with BAME families.

**Research questions**

- What are the effective practices social worker adopt in working with BAME families that are specific to the child protection context?
- How can practitioners improve their cultural competence in child protection practice?

**Methodology & research instrument**

This study is based on semi-structured interviews with child protection social workers. Please refer to the interview schedule to see the detailed questions. Social workers will be interviewed about their experiences of working with BAME families.

**Proposed sample group**

A maximum of 15 social workers will be interviewed. Purposive sampling will be used for recruiting respondents who have practiced for five years in child protection although this does not have to be only in their current local authority.

**How proposed sample group will be formulated:**

An internal introductory email, along with the Participant Information Sheet regarding the study and the researcher’s email address, will be sent by the organization to relevant teams. Interested participants can contact the researcher directly via email if they wish to take part. The researcher would discuss and arrange with participants the most convenient interview date and time. The researcher would meet...
potential participants, and participants would need to sign and return the consent form before the start of their interview. Interviews will last approximately one hour and will be conducted within the local offices of the participating local authority.

Data use & storage

The researcher will record the interviews with an encrypted audio recording device. The interviews will be transcribed into a written format, and these will be viewed only by the researcher and her supervisor. An audio file of the interviews will be stored securely at the University of Huddersfield. The final copy of the data will be stored in the University of Huddersfield’s archive for 10 years. The study may be presented at a conference or be submitted to an academic publication.

Research procedure

Once permission or conditions of permission for undertaking the study are confirmed with the participating local authority, ethical approval will be sought from the University of Huddersfield (via the School of Human and Health Sciences' Research Ethics Panel). Recruitment of participants will begin following approval from the Ethics Panel and interviews would be carried out in November/December. The participating local authority will not be identified nor identifiable from any written or verbal report coming out of this research. The participating local authority would be shown a copy of the draft dissertation, for comments, before it is submitted to the University of Huddersfield. The study is anticipated to be completed by April 2019. A copy of full report and summary of findings would be sent to the participating local authority.

Research contacts

Vivian Chan (Researcher)                                          Dr. Bernard Gallagher (Main supervisor)
Hiutungvivian.Chan@hud.ac.uk                                     b.gallagher@hud.ac.uk
+44 (0) 7512 279 318                                               +44 (0) 1484 473158
Elena Piscopia Suite, Ramsden, University of Huddersfield, Queensgate, Huddersfield. HD1 3DH

Reference


Križ, K., & Skivenes, M. (2010a). 'We have very different positions on some issues': How child welfare workers in Norway and England bridge cultural differences when communicating with ethnic minority families. European Journal of Social Work, 13(1), 3-18. 10.1080/13691450903135626


Understanding the practice of frontline child protection social workers working with Black, Asian and Minority Ethnic (BAME) families

I am a Masters by Research student at University of Huddersfield. I am conducting this research as part of my degree. You are invited to take part in this research study. Joining the study is entirely up to you. Before you decide, please read this information sheet to understand why the research is being done and how it is being done. Please say if anything is unclear or if you would like more information.

Information sheet

OBJECTIVE

To understand current practice among practitioners working with black and minority ethnic families.

BACKGROUND TO RESEARCH

It has been 15 years since the Victoria Climbié Inquiry was published. Lord Laming (2003), who conducted the inquiry, pointed out explicitly that professionals work within a culturally diverse society and should safeguard children from all ethnic groups. However, there is limited research into social workers’ practice with ethnic minorities in the UK. A recent study was conducted by Kriz and Skivenes (2010a, 2010b, 2012) comparing social work practices with ethnic minorities in UK and Norway. They highlighted the different issues that could arise: challenges of language, cultural gaps and the focus of practitioners. Apart from Kriz and Skivenes’ research, there is little knowledge on whether and how social workers in England practice cultural competence in frontline child protection contexts. Due to the ethnic diversity of the UK, it is important that this practice knowledge of social worker is researched. That is why this research is being done and why social workers are being invited to share their views and experience of working with BAME families, and shed some light on how others can improve their practice.

ELIGIBILITY

We are looking for a maximum of 15 social worker who have worked anywhere in child protection for at least 5 years.

INTERESTED?

Send an email to the following email address and you will be contacted. You will be invited to sign a consent form before taking part in this research.

EMAIL: HIUTUNGVIVIAN.CHANN@HUD.AC.UK

PROCEEDURES

You would be asked to take part in an interview which will last about an hour. This will be scheduled at your convenience.

ABOUT THIS RESEARCH

THIS RESEARCH WILL LOOK AT:

- What are the practices that social workers adopt in working with BAME families that are specific to the child protection context?
- How can practitioners improve their cultural competence in child protection practice?

BENEFITS: The results of the study will help fellow social workers gain a better understanding of how to work with black and minority ethnic families in child protection.
CONFIDENTIALITY

Any summary of the interview content or direct quotations from the interview will be anonymized. You and the local authority you work(ed) for will not be identified nor identifiable from any written or verbal report coming out of this research. Your identity will be kept confidential unless practice or safeguarding concerns are raised during your interview. Please do not disclose any details of your service users that could identify them.

DATA USE & STORAGE

The researcher will record the interview session with an encrypted audio recording device. The interview will be transcribed into a written format and will be viewed only by the researcher and her supervisor. An audio file of the interview will be stored securely at the University of Huddersfield. The final copy of the data will be stored in the University of Huddersfield’s archive for 10 years. The study may be presented at a conference or submitted to an academic publication.

PARTICIPANTS’ RIGHTS

You may withdraw from participating in the study at any time and without giving a reason. You have the right to not answer particular questions. You have the right to withdraw your data up to two weeks after the interview.

CONCERNS?

If you have any questions, contact researcher Vivian Chan via email: hiutungvivian.chan@hud.ac.uk or her supervisor Dr. Bernard Gallagher (01484 473 158) b.gallagher@hud.ac.uk.
Appendix 2: Consent form

CONSENT FORM

Title of Project: Understanding the practice of frontline child protection social workers working with Black, Asian and Minority Ethnic (BAME) families

Please tick the boxes

1. I confirm that I have read the information sheet dated........................ (version.........) for the above study. I have had the opportunity to consider the information, ask questions and have had these answered satisfactorily.

2. I understand that my participation is voluntary. I am free to withdraw at any time without giving any reason. I have the right to not answer particular questions. I have the right to withdraw my data up to two weeks after the interview.

3. Confidentiality: I understand that all the information I provide will be treated in the strictest confidence – except where I disclose that an individual is a risk of harm or poor practice on the part of any worker.

4. Anonymity: I understand I will remain anonymous in any report – verbal or written – coming out of this research, subject to the above restriction. The local authority I work for will not be identified nor identifiable from any written or verbal report coming out of this research.

5. Data use and storage: The researcher will record the interview session with an encrypted audio recording device. The interview will be transcribed into a written format and will be viewed by researcher and her supervisor. The audio file of the interview will be stored securely at the University of Huddersfield. The copy of this study will be stored in the University of Huddersfield’s archive for 10 years and maybe presented in conference or submitted for an academic publication.

6. I agree to take part in the above study.

7. I have been given a copy of this form for my own reference.

8. If I am concerned about how this research is being conducted or worried about this research, I can contact the researcher Vivian Chan via Hiutungvivian.Chan@hud.ac.uk or her supervisor Dr. Bernard Gallagher via b.gallagher@hud.ac.uk +44 (0) 1484 473158,

Name of Participant  Date  Signature

Vivian Chan

Name of Researcher  Date  Signature

Elena Piscopia Suite, Ramsden Building,
University of Huddersfield, Queensgate, HD1 3DH
To comply with the General Data Protection Regulation, please note that:

1. The University of Huddersfield is responsible for the secure management of the data i.e. the ‘data controller’

2. The legal basis for the collection of the data is usually ‘a task in the public interest’.

3. The researcher or research team (including transcribers) is the recipient of the data i.e. ‘the data processor’.

4. The data subject should contact the University Solicitor (as the Data Protection Officer) if they wish to complain about the management of their data. If they are not satisfied, they may take their complaint to the Information Commissioner’s Office (ICO).
Appendix 3: Email to organisation

Hi ______,

My name is Vivian Chan and I am a Master's by Research student at the University of Huddersfield. As part of my degree, I have to conduct research and my study is entitled *Understanding the practice of frontline child protection social workers working with Black, Asian and minority ethnic (BAME) families*. ________ recommended I contact you to request permission to conduct a small study in ____________.

I hope that your organisation will allow me to recruit up to 15 social workers who have worked anywhere in child protection for at least 5 years to take part in a one-to-one interview. Interviews will each last approximately one hour, and will be arranged at the most convenient date and time for participants.

The results will be written up for my dissertation and all results of this study. All the information provided to me will, in general, remain confidential and anonymous. Your organisation will not be identified nor identifiable from any written or verbal report coming out of this research. Your organisation would be shown a copy of the draft dissertation, for comments, before it is submitted to the University of Huddersfield.

No costs will be incurred by either your organisation or individual participants.

My supervisor, Dr. Bernard Gallagher (b.gallagher@hud.ac.uk), will shortly be sending you another email to verify the legitimacy of this study.

Your approval to conduct this study will be greatly appreciated. I would be happy to answer any questions or concerns that you may have and will follow up this enquiry with another email next week if I have not heard from you.

Sincerely,

Vivian Chan

Postgraduate Researcher of MSc by Research (Social Work and Social Policy)
Elena Piscopia Suite,
Ramsden,
University of Huddersfield,
Queensgate,
Huddersfield.
HD1 3DH
Appendix 4: Email to social workers

Dear social workers,

My name is Vivian Chan and I am a Master's by Research student at the University of Huddersfield. As part of my degree, I have to conduct research and my study is entitled Understanding the practice of frontline child protection social workers working with Black, Asian and minority ethnic (BAME) families.

I am inviting up to 5 social workers who have worked anywhere in child protection for at least 5 years to take part in a one-to-one interview. Interviews will each last approximately one hour, and will be arranged at the most convenient date and time for participants.

The results will be written up for my dissertation and all results of this study. All the information provided to me will, in general, remain confidential and anonymous. You and the organization you work for will not be identified nor identifiable from any written or verbal report coming out of this research.

Please see attached participant’s information sheet for more details. If you are interested, you can contact me directly via my email address hiutungvivian.chan@hud.ac.uk

I sincerely hope you will take part in the study and share your important practice experience. Your participation in this research would represent a valuable contribution to understanding and developing social work practice with BAME families.

Sincerely,

Vivian Chan

Postgraduate Researcher of MSc by Research (Social Work and Social Policy)

Elena Piscopia Suite,
Ramsden,
University of Huddersfield,
Queensgate,
Huddersfield.
HD1 3DH
Understanding the practice of frontline child protection social workers working with black, Asian and minority ethnic (BAME) families in England

Appendix 5: Interview schedule

1. Administration
   a. Date: ____________
   b. Location: __________________________
   c. Start Time: _____: ____
   d. End Time: _____: ____

2. Interviewee sociodemographic characteristics
   a. Age group: 20-29, 30-39, 40-49, 50-59, 60+
   b. Gender: ______
   c. Which of the following is the best broad category to describe your ethnic origin?
      White: White British, Irish, Gypsy or Irish Traveller, Other White
      Mixed or multiple ethnic group: White and Black Caribbean, White and Black African, White and Asian, Other Mixed
      Asian or Asian British: Indian, Pakistani, Bangladeshi, Chinese, Other Asian
      Black or African or Caribbean or Black British: African, Caribbean, Other Black
      Other ethnic group: Arab, Any other ethnic group
   d. Disability: _________________
   e. Sexuality: _________________

3. Interviewee career history
   a. Qualifications since leaving school: ______________________
   b. Number of years as a qualified social worker: ___________________
   c. Number of years worked as a qualified social worker in current local authority: _______________
   d. Any other authorities you have worked in: ______________________________________

4. What does the term BAME mean to you?

5. Experience of working with BAME families
   a. Number of BAME families ever worked with: 0-19, 20-39, 40-59, 60+
   b. Number of BAME families currently working with: 0-4, 5-9, 10-14, 15+
   c. Ethnic background of BME families ever worked with in descending order of numbers of families
      _____ Irish, Gypsy or Irish Traveller, Other White
      _____ Mixed or multiple ethnic group: White and Black Caribbean, White and Black African, White and Asian, Other Mixed
      _____ Asian or Asian British: Indian, Pakistani, Bangladeshi, Chinese, Other Asian
Appendix 5
Interview schedule, Version 3 (01/10/2018)

_____Black or African or Caribbean or Black British: African, Caribbean, Other Black
_____ Other ethnic group: Arab, Any other ethnic group

d. Ethnic background of BAME families currently working with in descending order of numbers of family
   _____ Irish, Gypsy or Irish Traveller, Other White
   _____ Mixed or multiple ethnic group: White and Black Caribbean, White and Black African, White and Asian, Other Mixed
   _____ Asian or Asian British: Indian, Pakistani, Bangladeshi, Chinese, Other Asian
   _____ Black or African or Caribbean or Black British: African, Caribbean, Other Black
   _____ Other ethnic group: Arab, Any other ethnic group

6. Social work practice with families in general
   a. What issues have you ever faced in undertaking social work practice with families?
      Prompt: child neglect, physical abuse, sexual abuse, emotional abuse, child’s behavior & parenting, parental mental ill health, parental substance misuses
   b. What work have you ever undertaken with or on behalf of families in general?
      Prompt: assessment, inter-agency liaison, wishes and feelings work with children, play therapy, Domestic violence work, child protection conference, financial/ resources support

7. Social work practice with BAME families
   a. Are the issues you face with BAME families different to those you face with White British families either in their type or frequency? For instance, are there certain type of child maltreatment being more common or parents facing different challenges? If there are differences, what are these differences?
   b. Is the type of work you undertake with BAME families different to that with White British families either in type or frequency? What are these differences (if any)?

8. What, in your view, are the distinct factors that need to be considered when working with BAME families as compared to working with White British families?
   Prompt: Family structure/ Non-verbal communication/ Religion and belief/ Understanding of abuse and neglect
   Please explain in more details.

9. What are the difficulties you have faced when working with BAME families in child protection?
   Prompt: System and policy/ Resources/ Language and communication/ Family and community dynamics/ Cultural norms & difference/ Identity/ Racism and discrimination/ Attitudes to women or children or parenting
   Why have these issues proved to be difficult?
   How do you manage these difficulties?
   Please provide an example of the most difficult situation you have faced and how you tried to resolve this?

10. Have you ever encountered any particular strengths among BAME families when you have been working with them compared to when you have been working with White British families? (e.g. greater commitment to children, more extended family support, stronger commitment to employment or education) If you have, what have these strengths been?
11. In what area you think that could be enhanced when working with BAME families?
   Prompt: Education for BAME/ Training for social workers/ Access to Ethnic specific service & resources/
   Ethnically matching families to workers
   Why?

12. Case Studies
   a. Could you describe a particular piece of work with a BAME family that was problematic due to issues with
      ethnicity?
   b. Could you describe a good piece of work with BAME family?

13. Training/ Support
   a. What cultural specific trainings did you have during your social work training?
   b. What training or support in terms of improving cultural competence have you had as part of continuing
      professional development?
   c. What kind of learning materials/resources/support have helped you most in working with families from BAME
      backgrounds? Why have these materials etc been helpful?

14. If you could give advice to a fellow practitioner, what would you say about working with BAME families in child
    protection?

15. Any other issues or information related to the topic that you would like to add?
Appendix 6: A sample of the activity

A) Scenario

You are Aisha, 30 years old, arrived from Pakistan and married to Hamza two years ago. You have two children (3 months old boy and 1.5 years old girl) and live with your husband’s parents in an area that is predominately White British. Hamza has been spending all his wages on alcohol and can get violent towards you. This time, he shouted loudly at you and hit you in the face. You developed very visible bruises on your face.

B) Identify intersection of inequalities and feelings

Five students in a group. They have to identify possible inequalities and how will Aisha feel in this scenario.

Examples of inequalities
- Race/ethnicity (Being the only Pakistani family in the neighbourhood)
- Gender (Being female and do not have much power within the family, the responsibility of taking care of children)
- Migrant status (Being on spouse visa and needing to apply for extension soon)
- Immigration generation status (Bring first generation immigrant and having no knowledge on UK public services)
- Socio-economic class (Does not work and relying on Humza for financial support)

Possible feelings
- Very frustrated as Aisha does not understand why Humza drinks
- Think it is normal for husband to be violent towards wife
- Powerless as without money to buy food for children
- Exhausted as trying to please Humza’s parents and pretending everything is fine
- Scared as neighbors are shouting racist comments

C) “Take action?” and outcome

Question for “Take action”
- Would you talk to Humza about his alcohol use?
- Would you remain silent?

If a group decides to remain silent, they will get a neutral outcome.
Appendix 6
A sample of the activity

Groups, which decide to “take action”, will have to roll the dice: 1 or 4 (positive outcome); 2 or 5 (negative outcome); 3 or 6 (neutral outcome)

Positive outcome: Humza confessed his action and promised you not to drink or hit you again. However, your neighbor heard the domestic violence incident and reported to the police. The police notified children’s services and a social worker came to visit you.

Negative outcome: Humza got mad at you and ending up being violent towards you even more. You ended up falling off the stairs and was admitted to the hospital. Children’s service got a referral from the hospital and a social worker came to visit you.

Neutral outcome: Humza continued to spend money on alcohol. A health visitor came for routine check up on you children. The health visitor noticed your bruises and put in a referral to the children’s service. A social worker came to visit you.

D) What should happen now? (role play)

Scenario continued:
A social worker came to do a home visit. The family do not know any English so the social worker brought an interpreter along. Humza and his parents were both in the house.

Requirements:
1) One student will play the role of social worker, one as Aisha, one as Humza and one as Humza’s parent, and one as the interpreter. All students have to be involved in the role-play.
2) Social worker has to speak via the interpreter.
3) Aisha has no idea on what is a social worker or anything about children’s service.
4) Humza believes he has done nothing wrong and refuse to engage.
5) Humza’ parent pretend he/she is not listening on the conversation but he/her is in fact listening on everything Aisha is saying.
6) The interpreter actually knows Aisha in a personal capacity and mentions this information to social worker.

E) Debriefing the Game
Appendix 7: Reflection

Before conducting the interviews, I was afraid that participants would focus too much on the language barrier or using interpreters when talking about working with Black, Asian and minority ethnic (BAME) families. However, participants raised many other aspects of BAME families' lives within their practice, such as culture and identity. At the end of an interview, one participant commented that the interview had helped her to reflect on her practice working with BAME families. She admitted that she had not thought about her practice with BAME families in such detail before. Three other social workers also pointed out that the interview would remind them to pay attention, in the future, to how they work with BAME families. I was pleased that my research provided participants with an opportunity to reflect on their cultural competence.

Interviewing social workers proved to be an interesting experience, enabling me to understand the practice that fellow practitioners adopt when working with BAME families. The whole research process helped me to reflect on my own social work practice as well. Being an overseas social worker has always encouraged me to have a strong commitment towards improving my own cultural competence. Prior to studying social work abroad (in the UK), I had approximately eight years experience of volunteering at various charities and non-government organisations in Hong Kong. I volunteered to work with diverse service user groups, including BAME families. When I was in Hong Kong, I identified myself as the majority ethnic group and I used to think I demonstrated cultural competence in my practice with BAME families. I would spend time with BAME families listening to their needs and learning about their culture. Other than engaging with BAME families directly, I helped to promote cultural awareness among members of the public in a community centre.

However, when I came to study and work in the UK, I became a member of a minority ethnic group and cultural competency became a totally different
challenge. In order to complete my placements, I had no choice but to quickly learn and address the cultural differences in a country that was completely foreign to me. I had to teach myself about the legal and public service systems in the UK. As English is not my first language, I went from a country where I speak English less than once a week to speaking it every day. I can still remember how terrifying it was using public transportation the first time I had to conduct a home visit. I used to practice at least three times (with another professional) how to have a telephone conversation before I had the confidence to pick up the phone and speak with other practitioners and service users. I also experienced racial harassment from people on the street, such as impolite staring and name calling.

My own experience of being the “minority” enable me to develop a deeper understanding of the challenges faced by individuals from BAME backgrounds. I show greater empathy for BAME families because of all the difficulties they have encountered. My own experience was one of the reasons that induced me to conduct the present study. I hoped to explore how other social workers were able to keep improving their cultural competence and understand BAME families’ circumstances. Hence, it was important to me that participants in the present study were able both to identify how some BAME families lack knowledge of the UK in general and to help BAME families address this issue. I was particularly pleased that social workers showed attempted to understand BAME families’ experiences of oppression.

Social workers have to challenge discrimination, promote social justice, equality and inclusion (Health and Care Professions Council [HCPC], 2017). All social workers need to work with service users in an anti-discriminatory and anti-oppressive way (British Association of Social Workers [BASW], 2012). In addition, the Equality Act 2010 states that no one should be treated unfairly or unfavourably because of a personal characteristic. Participants’ descriptions of their practice during interviews were evidence of how they have adhered to the legislation, social workers’ standards of proficiency and code of ethics. The
reflections of participants evidenced that they were aware of the need to work with BAME families with cultural competence.

Looking back on the interviews, I believe the post-interview reflections were very beneficial to the participants. A short ‘off-the-record’ conversation (post-interview reflection) with the participants allowed them to address some of their final thoughts about the present research topic off the record. The post-interview reflections gave participants a time to process their feelings after a quite long enquiry into their practice with BAME families. At the same time, I was able to share with participants my own experiences of this issue and also the knowledge I gained through reviewing the literature for the current study. In future, I will remember to leave participants some time to have a post-interview reflection and “give back” by sharing my own learning.

Reference
