

Chapter 5: Seeing eye to eye, or not? Young people's and child protection workers' perspectives on children's participation within the Dutch child protection and welfare services

Abstract

Child participation is internationally seen as a crucial aspect of the child protection and child welfare. Scholars have differences of opinion about what participation entails but even less is known about whether children and case managers have similar perspectives on participation and its goals. *Method:* An exploratory study was conducted, including 16 interviews with case managers and 16 interviews with young people in the Amsterdam area, the Netherlands. There is a large gap between case managers' perspectives on participation and its prevalence in practice and the experiences and perspectives of young people under the care of child protection and welfare services. Case managers see participation as important but it is generally seen as an instrument to ensure the child's cooperation. Young people, on the other hand, understand participation differently. They primarily want to be heard, informed and taken seriously. The level of participation that occurs and the different perspectives of young people and case managers shows that there is currently no dialogue between the case manager and the young person. The knowledge and experience of young people is not taken seriously, given the proper value or acted upon in the process of youth care. Although there is a theoretical, cultural change in society which increasingly recognizes children as social actors, practice is falling behind. Interventions to decrease barriers to participation should therefore focus on the family managers' perspectives of children and childhood, encouraging them to see children as social actors with valuable perspectives and wishes, and most importantly, help them to act upon that image.

5.1 Introduction

Traditionally children are seen as vulnerable and in need of protection. Recent insights are increasingly recognising children as social actors with moral and legal rights to protection, to the provision of services and to participation as active subjects (Bell, 2002; Bessell, 2011; Kellett, et al., 2004; Sinclair, 2004; Tisdall & Punch, 2012; Toros, Tiko & Saia, 2013). Within the domains of child protection and child welfare, this shift has resulted in a more child-centred approach in which children are seen as right bearing individuals who are active contributors, exercising their rights within the context of their families and community (Winter, 2011). As a consequence of these changes, child participation is receiving more attention in both policy and research.

As a reflection of this attention, there have been many studies of children's participation within child welfare and child protection services. These studies generally agree that participation is important for many reasons (Gallagher et al., 2012; Healy & Darlington, 2009; Holland, 2001; Vis et al., 2011, Woolfson et al., 2009). For instance, interventions seem to be more effective when they are better tailored to the needs and daily realities of the individual child (Archard & Skivenes, 2009a; Barnes, 2012; McLeod, 2007). Furthermore, participation also has a positive influence on the development of children. For example, participation in decisions about their lives helps children feel connected and committed to the decisions that are taken (Woolfson et al., 2009), it can increase their self-esteem (Vis et al., 2011), and is associated with increased feelings of mastery and control (Bell, 2002; McLeod, 2007; Munro, 2001; Leeson, 2007).

The literature demonstrates that children's participation is important and indicates what should be done to facilitate children's participation in child welfare and child protection services. However, studies of the prevalence of participation show that acknowledging the importance of participation and willingness to facilitate participation do not necessarily mean that participation is implemented in practice (Gallagher et al., 2012; Healy & Darlington, 2009; Holland, 2001; Hubberstey, 2001; Woolfson et al., 2009). The gap between theory and practice might have a number of explanations, such as differences in academic definitions of participation (Hemrica & Heyting, 2004). In practice, the socio-cultural image of children may play an important role in how participation of children is understood. For example, the image of children as vulnerable and dependent offers different opportunities for participation than one in which children are seen as autonomous and capable of self-determination (Dedding, 2009). In the child protection and child welfare domains, the dominant image of children still seems to emphasise their vulnerability and need of protection

(Barnes, 2012; Sanders & Mace, 2006). This image poses a challenge and barrier to participation of children (van Bijleveld, Dedding & Bunders-Aelen, 2015).

The United Nations Convention on the Rights of the Child (UNCRC) was ratified by all European countries in the early 1990s. European countries have, however, taken different approaches to the implementation of child participation in national legislation. Despite the differences between countries, studies generally report similar findings on the status of child participation and its key features, namely that although its importance is recognized, it is difficult to put in practice, and that there are many barriers to the facilitation of participation (van Bijleveld et al., 2015; Franklin & Sloper, 2005).

In the Netherlands, a basis for child participation is incorporated into the Youth Care Act 2005 which states that decisions should be made in consultation with the client. However, it remains ambiguous whether the term 'client' refers to parents, to children, or to both. Some parts of the Act are clearly focused on parents. For example, the Act states that 'even if the authority of the parents is restricted or has been delegated to The Bureau of Youth Care [the Dutch institution for child protection and child welfare services], decisions should be made which take into account the perspectives of the client' (De Wet op de Jeugdzorg in grote lijnen/The main elements of the Youth Care Act, n.d.).

Little is known about the actual practice of participation in child protection and child welfare services in the Netherlands. Also new in the discussion of the interpretation of participation and its aims within the child protection and child welfare is to include the perspectives and expectations of young people themselves and see whether this corresponds with the ideas of case managers. To address these gaps, the objectives of this study are to inquire both case managers' and young people's perspectives and experiences of child participation within child protection services and to explore how these views relate to each other and to practice.

5.2 Theoretical background

5.2.1. The concept of participation

The implementation of child participation is hampered by the many different meanings assigned to participation (Hemrica & Heyting, 2004). Arnstein (1969) defined participation as "*the redistribution of power that enables the have-not citizens, presently excluded from the political and economic processes, to be deliberately included in the future*" (1969:216). Hart (1992), well-known in the field of child participation and following Arnstein, describes participation as 'the process of

sharing decisions which affect one's life and the life of the community in which one lives' (p5). He refers to an active form of participation and the *possibility* (his emphasis) that this participation will have an effect on decision-making. He emphasizes that the goal of child participation is not that children always participate to the full but, rather, that every child should have the opportunity to choose the fullest level of participation that matches his or her possibilities, recognising that circumstances will offer different opportunities (Hart, 2002). Other scientists take a more radical position, arguing that participation is a process in which disadvantaged groups are able to question existing social practices and overthrow those that are responsible for their social, cultural and political exclusion (Hart et al, 2004). Within this study, we define participation as a situational and iterative process in which all relevant actors enter into mutual dialogue. Within this dialogue, the perceptions, knowledge and experience of all actors should be taken seriously and given the proper value, in all phases of the process. In particular, this should involve attention to the perceptions, knowledge and experience of those whose lives will be affected by the decisions made during this process. Further, this process should lead to action and change (Dedding & Slager, 2013).

5.2.2. *Child protection services in the Netherlands*

The welfare policies of individual countries vary enormously. A distinction can be made between countries with a child protection approach, like Australia and the UK, and other countries with a family service system approach, like Sweden and Norway (Healy et al., 2011; Katz & Hetherington, 2006). The child protection approach focuses on the child and the need to prevent abuse or rescue children from abusive situations. The family service system approach focuses on the psychosocial framing of problems and needs and sees the protection of children as an aspect of child welfare whereby interventions should take place to prevent maltreatment of children. Services are provided by resources as close as possible to the person who needs them, resulting in a relatively small number of serious cases in which the state becomes involved and a case manager is assigned to make the decisions and interventions are done by social workers (Healy et al., 2011; Katz & Hetherington, 2006).

The youth care system in the Netherlands can be described as a family service system approach. The case management function is appointed to 'The Bureau of Youth Care' which is the gateway to secondary youth care. When the primary care services, such as schools, child services and local support institutions, are not sufficient, families are referred to Youth Care. Here a case manager is assigned to the family to assess what care is needed, making a referral. Referral to The Bureau of Youth Care can be either voluntary or compelled by a judge.

The Bureau of Youth Care has 15 regional centres in the Netherlands. There is a central organisation but each regional centre makes its own policy. This research concerns The Bureau of Youth Care in Amsterdam (BJAA) which is developing a family-centred approach with system focused case management. Since the beginning of 2012, case managers have been installed to handle all child welfare, protection and parole services, replacing teams of specialised child welfare, child protection and child parole workers.

5.3 Material and Methods

In this exploratory research, semi structured interviews were conducted with young people and family managers.

5.3.1. Participants

Young people

Reaching young people was very difficult. They could only be contacted with the cooperation of their case managers, who needed to provide the contact details of young people, with approval of the young person in advance. The inclusion criteria for young people comprised: being placed in a residential institution or an open unit while in BJAA's care and still being supported by a case manager. Exclusion criteria were being placed in an institution at a very young age, making it difficult for the young person to remember how decisions were made.

To get in touch with young people, 49 case managers were approached individually by the researchers. The purpose of the research was explained and the case managers were asked to approach young people who met the inclusion criteria. Every case manager was given an information letter to hand directly to young people to ensure that as many as possible would know about the research and the researchers. In addition, another 50 case managers were contacted by email. This contact involved a description of the research and a letter for distribution to their young clients. Finally, several residential institutions were contacted to request cooperation of clients who were under BJAA supervision. In addition, case managers of these clients were approached by phone.

Overall, 30 young people were approached by their case managers and asked whether they wanted to participate. Some 21 young people gave their permission for contact from the researchers. Of these, five decided not to participate. The remaining 16 young people, aged 13-19 years, were interviewed. Of them 11 had, at some point,

been committed to compulsory residential care and 5 had been placed in an open residential setting.

Table 5.1: Overview of the young people and their characteristics.

Respondent	Gender	Age	Institution
1	Male	16	Open
2	Female	17	Residential
3	Male	18	Open
4	Female	15	Residential
5	Male	17	Residential
6	Female	13	Open
7	Male	17	Residential
8	Female	17	Residential
9	Female	16	Residential
10	Female	14	Residential
11	Female	16	Residential
12	Female	17	Residential
13	Female	17	Residential
14	Female	16	Residential
15	Male	14	Residential
16	Male	17	Open

Case managers

The case managers (n=18) were recruited from one BJAA region. First, a letter was given to the case managers which explained the research and announced that one of the researchers would contact them with more information. Next, a researcher came to team meetings to introduce herself and answer questions. After that, the family managers were approached by researchers to make an appointment for the interview. Of the 18 case managers who were approached, 14 agreed to participate, (male = 5, female = 9). The others did not participate because of absence or time constraints. After analysing the results of these interviews, follow-up interviews were conducted with three case managers to develop a more in-depth understanding of their perspective and to make sure that they were not misunderstood.

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5.3.2. *Interview design and data collection*

For both the case managers as well as the young people, data was collected through semi-structured interviews.

The structure of the interview of the case managers was developed prior to the interviews, based on a thorough literature search of international studies. The interviews were designed to develop understanding of the case managers' perspectives, knowledge and experience. Interviews aimed to identify both explicit and implicit knowledge of the case managers, to allow the case managers to share their own experiences and give them the opportunity to participate in the direction of the interview.

Interviews with young people were based on the time-line method which provides a format for explicit expression of challenges, successes and learning experiences (van Mierlo et al., 2010). This method involves asking questions on a personal time line which is used to structure the events experienced. The young people were asked to make a timeline of the period during which they had contact with the Youth Care Agency. Within this timeline, young people identified the different occasions on which decisions were reached, the nature of the decisions, how the decisions were taken, who was involved, and how decisions should have been taken in an ideal situation.

5.3.3. *Data analysis*

The process of data analysis was identical for interviews with case managers and the timeline interviews with young people. The process of transcription was started immediately after the first interview. An iterative process was chosen so that initial findings could influence the subsequent interviews, supporting the formation of theory based on study outcomes. Primarily, qualitative content analysis was used because it can play an important role in developing understanding of phenomena (Bryman, 2008). Analysis of the transcripts started with open coding to identify patterns, followed by coding of the data into potential themes. The themes were then reviewed and further refined, combining codes or developing further categories. These categories are described in the result section.

5.3.4. *Ethical considerations*

At the start of each interview, case managers and young people were provided with detailed information on the research project. The interviewer then asked permission to record the interview for transcription purposes only. All of the family managers and most of the young people gave permission for recording of the interview. One girl did

not want her interview to be recorded. Further, the interviewer explained that the interviewee could stop the interview at any time for any reason without negative consequences. Finally, anonymity was guaranteed.

5.4 Findings

First, we describe the perspectives of the case managers. Next, we describe the results of the interviews with the young people.

5.4.1. *The views of case managers*

The results of the interviews with case managers were divided in three categories: their definition of participation; the practice of participation; and reasons for participation.

Definition of participation

Despite attention for child participation in the last two decades, the term 'participation' is not a familiar concept to the case managers. When asked what participation means to them, most case managers thought for a long time and then said that they were not sure. However, all of them came up with a description when given time, with one exception. In general, child participation was considered to comprise the involvement of children in the decisions made by the Bureau of Youth Care. Terms that were often used in describing participation were informing, involving, explaining, asking children, but also thinking about children's needs.

Most case managers mentioned some active form of gathering the child's opinion, for example " ... with every decision, you question what is in the interests of the child and that you also discuss this with the child". However, some case managers mentioned that participation was not so much about involving the child but more related to 'thinking about the child and the child's needs' or 'informing the child about what we are doing.' Even when asked directly, case managers did not often refer to what should be done with the child's opinion. Only a few case managers mentioned obtaining the child's perspective and acting on this. They mentioned that it was important to gather information about the child's opinion, to discover the child's strengths and weaknesses. No-one mentioned about the need to gain the child's perspectives on the decisions that were being made.

The practice of participation

In addition to variations in the interpretation of the term 'child participation', there was also a difference in what case managers considered to be their role. Descriptions

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of their job ranged from 'being the child's representative' to 'representing the wishes of parents' or 'to executing the ruling of the judge.' These different perspectives on their role had immediate consequences for the possibilities for participation experienced by the case managers. Case managers who described their role as 'executing the judge's orders' saw no opportunity for defining the problem together with the child. Despite these differences, all of the case managers mentioned situations in which they believed children participated. Examples of participation were then explored with the family managers.

When asked to give examples of child participation from their own cases, these examples often differed from the definition of participation that the case manager had provided. While most definitions involved some form of active involvement of children, most actual examples of participation described situations in which the case manager informed the child about decisions that had already been taken were already made by the case manager. In particular, case managers that worked with young children (under 12) talked about informing the children about what is happening as an example of participation. Case managers working with teenagers and adolescents also mentioned examples of asking young people for solutions, for example, 'What are we going to do about this? And what do you want? Because I can decide what you have to do, but that does not work. So, what do you want?'

While defining participation, most case managers immediately mentioned barriers and limitations. For example, one case manager started with:

"It is important that you look at the child itself, what the child is capable of Don't you ask too much of the child if you involve him [or her] in the decision?"

Most case managers referred to the age and capacities of children. For example, one case manager said:

"Child participation in the decision making is difficult because usually I choose something for a child based on my knowledge and what I expect as most suitable. The children do not know anything about that. They might have a little clue about what they want. However, the final decision for the type of care is made by me."

When the interviewer asked whether there were situations in which child participation was not possible, one case manager responded:

"When children are below the age of six, and I support many children under that age [participation is not possible]. Below the age of six, we don't look at what the child

wants because children under that age find it difficult to express in words what they want.”

Case managers considered that young children are incapable of overseeing the situation, estimating its level of severity or deciding what is needed. They considered that the child should not be burdened with decisions.

Time constraints and organizational barriers, such as a focus on child protection issue, were also considered to hamper child participation, according to the case managers. Case managers considered that the vision of the Bureau of Youth Care is in conflict with child participation because the safety of the child is always the primary focus with child participation coming second. For example, they described situations in which they considered the child’s safety to be at risk. In such situations, the first concern was to guarantee the child’s safety, and involving the child, asking the child’s opinions and informing the child were seen as subordinate issues.

Reasons for participation

The case managers did not always seem to be aware of how and why they facilitate participation. However, when asking for examples of child participation, they identified a number of reasons for children and young people’s participation in the decision-making process.

Some case managers mentioned that it is a child’s right to be involved in decision making and, therefore, participation should be facilitated because *“It is about the child”* and *“The child must feel good about the decision”*. Other reasons for participation mentioned were the need to teach children about their responsibilities, to help children learn to make the right decisions and to prepare children for their future as an adult. As one family manager noted: *“I wanted to teach them to think That they have to think about their life”*.

However, the most common reason for participation was to motivate the child to accept the decision or the intervention that the case manager thinks is necessary. In such cases, case managers considered that it is important that the child has a feeling that it is being heard, although decisions are still being made by the case manager. Participation is thus instrumental and is being used to create understanding for the limitations a case manager faces, such as the limited choice of institutions and interventions, and to make sure that the child cooperates with the plan: *“I have to discuss my worries with the family. And it is fact that I have to involve the 9-year-old as well. We need to make agreements and if I speak in terms of what do we do, I lose her”*.

5.4.2. *The views of young people*

As with the case managers, the results are discussed in the categories: definition of participation by young people, the practice of participation and reasons for participation.

Definition of participation

All young people mentioned being informed as a very important aspect of the decision-making process. For them, this means that they know what to expect and to know why things happen and how long they will take. For example, one of the young people said: *“The way the decision was made was alright because I knew what would happen and why it happened”*. Overall, young people were very clear that when something changes, they want to be able to prepare for the change because they want time to say goodbye to their friends or to their fellow clients, and to get used to the idea. Young people emphasized that it was important that case managers listen, explain and are clear. They liked it when the case manager took the time to explain why decisions were made and ask the young person how they felt about it. It was also important to them that the family managers stuck to the commitments they have made, rather than just saying things.

Young people found it difficult to define the concept of participation. They were, therefore, asked to describe decisions that were made in their own case and to tell what they would have wanted if they had been able to decide. In this way, they were able to bring up issues that were important to them and to relate these issues to the involvement they would like to have had in the decision-making process.

Most of the young people said that their opinion was asked but that they immediately experienced that no-one listened to them. Asking is clearly not enough for them. They want to have the feeling that they are taken seriously and that their opinions count: *“Asking my opinion and see if I want to cooperate. Because if I don’t want to do it, it will not work anyway”*. Issues which contribute to the young person’s feeling of being taken seriously include: sincere interest of the case manager, being believed by the case manager, the case manager explaining why the process does not follow the wishes of the young person, the case manager staying in touch even when there is no problem, and the young person is consulted before decisions are made and negotiates on what these should be. According to the young people, taking a client seriously calls for the active involvement of the family manager to show that he/she cares and wants to help.

The practice of participation

According to the young people, important decisions were decisions concerning placement away from home, moving from one institution to another, and going back home. All young people interviewed for this study had experienced these kinds of decisions, although their experiences differed. Half of the young people (n = 9) were negative about the way in which decisions were made while the other half (n = 7) was positive. However, even when they were very positive, young people mentioned that there was room for improvement. Even when they were negative about the decision-making, young people still mentioned things that went well and that they had appreciated. Generally, young people considered that they had not been consulted in the decisions that were made. They considered that case managers, institutions and parents had the most influence on the decisions taken.

The young people mentioned many situations in which they felt that they had not been properly informed. For example, they did not know the organisational affiliation of the professionals with whom they came into contact, they often had no idea why BJAA was involved and they did not know what they could expect from their case manager. Despite generally being informed about the involvement and the method of BJAA, almost all of the young people mentioned being surprised by decisions that were taken and that the outcome of decision-making was often unexpected. In one case, a young person was called to the office of BJAA to find that the police were waiting there to take her to a residential institution. In others, young people were told that they would be moved to another institution next day. As one girl complained: *“I didn’t even know they were thinking about that option.... So it didn’t come to mind that it [coming home late] would be a problem”*.

Although none of the young people liked such unexpected events, they were often able to accept such decisions if they understood the reason why the decision was made. According to the young people, it is important that their case manager explains clearly what is happening and why, even when decisions cannot be shared beforehand. The young people were very negative about unexpected committal to residential institutions, although they acknowledged that the decision could not always have been shared beforehand because they would not have shown up to their appointment. Their acceptance of such decisions primarily depended on time taken by the case manager to explain the decision afterwards. As one girl noted: *“....even if the decision was already made, we [she and her second case manager] would sit down and discuss it, as long as I needed to understand it”*. Some young people were never able to understand why a decision for residential placement was taken which made it very difficult for them to come to terms with it.

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Young people described many situations in which their opinion was asked for after decisions had been made. For example, one girl described meetings during which her parents, family case managers and the staff of the institution discussed how she was doing and what would be the next steps in her care. She was invited to attend the last 15 minutes of this meeting. In this time, she was informed about the decisions that had been taken and the case manager asked her for her opinion.

In some situations, young people felt that that no-one listened to them. For example, when they were asked the same questions over and over again, when their own opinion was written down as dry facts and when their actions were judged without anyone considering their motivations for such actions or asking them for an explanation. Such occurrences took place in meetings with case managers as well as in written reports.

Most of the young people were pessimistic about possible change to the current level of participation. They appear to have accepted that they have little influence on the situation. Some young people even mentioned that they would not give their opinion because nobody would listen to it, based on past experience.

Reasons for participation

When asked how they thought the decision-making process should take place, almost all young people said that they should be one of the most important people contributing when decisions are taken. They generally argued that they should have some choice and some responsibility because the decisions made involved their own lives. Young people also mentioned that they are able to tell if a solution has a chance of success, and they are especially able to recognise when it stands no chance at all. For example, they mentioned situations in which they told the case manager beforehand that the solutions proposed were not going to work, and that they wanted to be involved in trying to find another solution. In practice, however, they were generally forced to follow the case manager's decision. As one boy described: *"I already said up front that it wouldn't work, but they wouldn't listen. But I know myself best and if I already know it won't work, it won't work"*.

5.5 Conclusion and discussion

There are many similarities between young people's and case managers' perspectives on participation in youth care. They are generally in agreement on the current levels of child participation at the BJAA. They both describe a level of informing but participation does not seem to have any influence on decision-making processes. In addition, both case managers and young people find it difficult to define participation.

Case managers describe examples which make it evident that they have limited perspectives on participation. Although they all see participation as important, there is no consensus on what participation entails. There is also a large gap between the case managers' rhetoric on participation and what happens, suggesting that participation is not yet part of their practice.

Participation is rarely discussed on the work floor of the BJAA. As a consequence, case managers experience little explicit stimulation to facilitate participation and the decision to facilitate participation depends on the individual choice of the case manager. When case managers choose to facilitate participation, they do it to get the job done, rather than as an actual goal in itself. Participation is often used in a situation where the decision is made by the case manager but the young person can help to select how to execute this decision, aiming to motivate the young person and increase cooperation. This use of participation is seen as a strategic action rather than communicative action (Greenhalgh, Robb & Scambler, 2006) and is also reported in other studies. Similarly, Dedding (2009) found that although children's clinical practitioners are enthusiastic about participation, the instrumental and strategic motivations for facilitating participation are prominent. In this case, participation is seen as a way to motivate children to find solutions to a problem defined by the case manager.

This instrumental form of participation contrasts sharply with young people's vision of what participation should involve. Indeed, consulting children and participation are not the same thing (Vis & Thomas, 2009). Young people want to be taken seriously and that their views are taken into consideration. They are also asking for some form of basic social etiquette and for being respected as a person. According to the young people, the case manager should take time to talk to them, explain things, and be sincerely interested in their views. Furthermore, they want participation to be communicative rather than being instrumental. Young people in this study felt that they have little or no influence on what happens, often being consulted by the case manager but their opinions are not acted on. Although they do not say that they want to make the decisions themselves, their opinions should be taken into account and decisions explained. Several other studies of child welfare and child protection services demonstrate that young people feel that they are powerless and marginally involved in decisions concerning their future (Munro, 2001; Thomas, 2010 as cited in Barnes, 2012).

It is striking that most of the young people interviewed in this study did not think case managers will change or that participation is feasible. They seem to have accepted that although they may be consulted, their views will not be acted upon. Their

disappointment suggests that participation is important from the start because they give up once they have negative experiences. This finding shows a large gap between the young people and the case managers who consider that a child should not be bothered with decision making, cannot know what is best for him/her, and should not carry the burden of making important decisions. Young children (under 6 years of age) are seen as particularly vulnerable and incapable of expressing their needs. This finding is not unique for this study. For instance, other studies demonstrate that professionals consider that children cannot take the responsibility that comes with participation and that adults are able to make decisions that are in the child's best interest (Atwool, 2006; Holland, 2001; Pinkney, 2011). Sanders & Mace (2006) also report that some case managers and social workers think that children and young people may not be in a position to express their views because of limited understanding, disability and emotional state. They consider that children may not want to participate, may find it intrusive and may not be ready. Indeed, when a child is seen as vulnerable and in need of protection, its opportunities to participate decrease (Dedding et al., 2013).

A second barrier to participation stems from case managers' focus on child protection and the often implicit understanding that child protection is more important than the child's right to participate. Barnes (2012) and Healy & Darlington (2009) found that social workers in the UK and Australia, respectively, emphasize the need to protect children and their immaturity, expressing strong reservations about the appropriateness and safety of involving children in the decision-making process when their safety is at stake. As mentioned in the introduction, this reflects the tension between the immediate interests of the child (safe keeping) and their long-term interest (Barnes, 2012; Sanders & Mace, 2006). The common image of children as vulnerable and in need of protection, together with the balance between the child's right to participate and the child's right to be protected, creates a loophole and excuse to avoid participation. This should not be necessarily so, as for example, Archard and Skivenes (2009a) point out that taking children serious allows for better understanding of the situation and therefore even enhances child protection.

In conclusion, the low level of participation that actually occurs and the different perspectives on participation of young people and case managers show that there is currently little dialogue between the case manager and the young person. As a consequence, the knowledge and experience of young people is not taken seriously, given the proper value or acted upon. Until children are seen as social actors with a right to be involved, young people and case managers will not agree about participation.

Implications for practice

Case managers and young people both see major barriers to participation. Case managers are concerned that children should not carry the burden of responsibility while young people feel that they are not being listened to. As long as these barriers are not addressed in the communication between young people and case managers, they will never actually meet and meaningful participation cannot be achieved. Participation does not require that all actors have the same opinion but it does require mutual respect and dialogue in which the wishes and needs of children are addressed. Although when asked, case managers in our study describe children as social actors, in practice it seems they still see children as vulnerable, incapable of caring the burden and in need of protection. Interventions to decrease barriers to participation should therefore focus on the case managers' perspectives of children and childhood, encouraging them to see children as social actors with valuable perspectives and wishes, and even further, on implementing these images of childhood into practice, so it is not just a theory, but children are actually approached as social actors.