CHILD AND YOUTH CARE WORK: EXPERIMENTS WITH EXPERIENCE

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ABSTRACT: The essential nature of child and youth care work is described as being a task of arranging experiences that promote a belief in competence and hope. In this article, the author challenges the psychological underpinnings of the way we describe our work.

There are two facts that I believe to be true in my experience of over thirty years in child and youth care work; we don't put enough effort into teaching youth and families through experiential activities, and we expend too much energy creating external control.

I am also clear that child and youth care work is not about verbal counseling strategies, therapeutic conversations in an office, or insight into past experiences. This may sound odd to people who teach office therapy strategies and psychological counseling approaches to child and youth care staff. In fact, many of the supposed skills of child and youth care work are borrowed from counseling psychology literature, and this is one of the limitations of our field. Child and youth care professionals often find that they are unable to accurately describe what they do in meetings and reports because they are limited by the vocabulary of psychological interventions (Ward & McMahon, 1998).

Child and Youth Care work encompasses family support, school- and community-based work, residential and day treatment settings, treatment foster care support, mental health, and juvenile justice programs. We don't work with self-motivated people who are eager to discuss issues in an effort to create useful insights; if anything, insights are too painful and are actively resisted. Typically they don't choose us or invite us into their lives (Weisman, 1999). The youth and families are also not inclined to do abstract processing of information and often have difficulty re-examining even recent past events.

The people we encounter in our work have some common themes: they typically resist our attempts to create relationships with them, they don't voluntarily seek our assistance, and they have a mistrust of others and a sense of futility and hopelessness about the future. There have been several authors who describe our clients as people who are not living in the present, but are trapped in a constant chaos/crisis orientation based on a tragic past that also creates a future vision filled with despair and failure. In fact, our real goal is to assist people to establish enough trust and safety for themselves that they can dare to live in the present moment with optimism (Durrant, 1993; Kagan, 1996). The relatively recent work of solution-focussed and resiliency authors, as well as the generally accepted practice of looking for people's strengths rather than being problem-based in our attempts to help youth and families, coupled with the work around narrative approaches, can assist us in developing a child and youth care orientation to supporting people to create change in their lives. Each person has a story about him/herself that is the lens through which all of life's experiences are seen, and this story has to change before any new reality can be absorbed (O'Hanlon & Weiner-Davis, 1989).

Facts and events that should logically create positive messages are ignored or interpreted negatively as long as the story (e.g., I'm no good, the future is hopeless) continues unchallenged. Child and youth care workers "live alongside," and this positioning and leverage in people's lives can have impact on the stories of youth and their families.

The essence of child and youth care work, which defines its uniqueness, is a "being with," a sharing of the life space of the people we are working with. The connections that we make and the relationships established are accomplished through having a mutual experience in the moment, a living alongside each other. The environment may be more structured or the connection may be more artificially arranged, but it is nonetheless a living, organic, somewhat unpredictable situation. There have been many articles written on the importance of relationship and trust in our work, which allows both people to believe in the value of the other person's experience (Krueger, 1995; Garfat, 1998). As we share the life moment together, it is clear that each person has unique perceptions and responses, but there is also a parallel process of mutual responses. This relational connection is the place where child and youth care work occurs, and child and youth care workers know this intimacy well. Many of the techniques and skills of psychology, social work, education, and other therapies actually deliberately avoid this intimate place.

As we do our work with people, we are trying to *live well* with them, that is, to create situations and experiences that are helpful. As people act differently and do things that have a positive result, they are more inclined to repeat or increase the pattern. Yet, because of beliefs and experiences, there is both conscious and unconscious resistance to doing things differently. This situation of being stuck in self-defeating behaviors is familiar territory. The child and youth care worker's task is to create a living moment where there is minimal interference from these self-defeating messages, so that new experiences can not only happen but also be acknowledged and absorbed. Safety and trust are key issues; the inclination to let down your guard and to freely experience what is happening, to relax in the moment, are simple and also profound dynamics to establish.

The reason that many of our "logical" solutions for the issues that arise in our work don't seem to be effective is that we believe that our ability to be present in the moment is also shared by the other person. Family support workers regularly see parents who can't seem to mobilize themselves to do even simple things to improve, always planning to "get to it tomorrow." We find ourselves giving out lots of fish, but not teaching many people to fish on their own, to paraphrase the old maxim.

We already know about developing a relationship based on trust and safety, yet the tactics we use may create the opposite effect, since our goal is often to mobilize the person to do something about the situation, which is inherently threatening to her/his story about her/himself. The way to support people to change their story about themselves has to be done in a very strategic way, which is powerful but nonthreatening. There is a need to develop a safe place to enable people to let go of the usual labels and social rules with which they surround and protect themselves. It is only when a person can forget for a moment the tale about her/himself that a new experience can occur; hopeful, strength-based, and puzzling.

Play and activity based on games and metaphor are powerful ways to create this safe place, which I will call a *free place* where the usual rules of life don't have to exist. The child and youth care worker should already be competent in this arena and the combination of trustworthiness, sharing the life-space, and playing together is very effective to support the youth or parent to be free of personal stories.

The use of play as a thoughtfully developed, strategic methodology to do our work is well accepted. Clearly we are not describing "what would you like to do today to pass the time" recreation (Burns, 1993). The task is to create a free place for the person, away from the usual constraints and rules that are typically surrounding her/him (e.g., needing to be tough or helpless). As a person allows the new facts, communicated experientially not verbally, to be absorbed, he experiences a cognitive dissonance that challenges the old story. Play, automatically seen as not serious, doesn't need to be resisted as strongly and a well-orchestrated series of play experiences can create a permanent scratch on the old records in one's head playing a song of failure and incompetence.

The role of the child and youth care worker is best described as an *experience arranger*, who creates this free place through relationships based on trust and safety, then supports the other person in strategic life moments to be able to change the story he/she believes. The development of a revised story will not occur easily, and a lengthy series of arranged experiences will be necessary, but this is exactly what good child and youth care is about.

Play may seem like too frivolous a place to intervene, since so many really serious things must change. I would like to suggest that this is exactly why it works so well and why it is so hard to accomplish. Child and youth care workers are encouraged to be more therapeutic and psychological, which generally translates into assessing problematic behavior and developing external control to get youth and families to stop acting out their stories, but it doesn't do anything to support people to change the story. The essential nature of the child and youth care intervention is ignored because it doesn't fit the therapeutic paradigm of the more influential professions, and interventions like play are minimized and even given over to recreation workers as less important parts of the treatment. There is great need for better focus on activity programming in our field and for the shift away from a therapy model in child and youth care work into a look at experiential experiments that support people to change in profound ways that on the surface seem simple and trivial. Child and youth care professionals have a great respect for the simple and elementary details of living that must be orchestrated in order to create a useful atmosphere for change. I hope that this way of looking at our work will encourage more attempts to create experiential moments that challenge the stories of youth and families and support the development of new experiences of competence and hope.

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