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Summary

Audio-computer-assisted-self-interviewing (A-CASI) is used by many child-care agencies in the UK, as a way of recording the views of children in the care of local authorities. This study considers A-CASI's use in two such local authorities in England. It contrasts how the A-CASI methodology is experienced by children and young people and by child-care managers, and explores how A-CASI may be contributing to the participation of young people in the delivery and management of their care. The study reveals a strong belief in A-CASI from a large number of participants, young people and managers. But managers express concern about many organizational constraints on the effective use of A-CASI data in their agencies. The paper discusses the enthusiasm of the young people for using A-CASI; the concerns of managers; and the opportunities for social workers in using A-CASI in their practice settings.

Keywords: Looked after children, computers, A-CASI, participation
Introduction

In recent years, audio-computer-assisted-self-interviewing (A-CASI) has found an established place in the toolbox of social researchers, and, in particular, it has proved useful for collecting data about sensitive or stigmatizing subjects (Newman et al., 2002; Couper, 2005; Simoes et al., 2006; Chinman et al., 2007; Edwards et al., 2007; Mizuno et al., 2007; Pluhar et al., 2007). In a summary of early developments of A-CASI use in drug abuse research, Lessler and O’Reilly (1997, p. 366) make a self-evident but significant observation that ‘The basic problem with trying to gather information on stigmatizing behaviours is that people do not want to talk about them’. A-CASI is a methodology that in part addresses this dilemma in collecting data from subjects who may be reluctant to explore and share their views in face-to-face interviews, but who can be less resistant when using an apparently more neutral, less threatening, audio-enhanced computer.

The literature about the use of A-CASI with vulnerable children and young people, and looked after children, is limited. Examples include: self-reporting of childhood abuse in the USA, where A-CASI interviews elicited prevalence rates of abuse four to six times higher than those found in Child Protection Services’ records (Everson et al., 2008); investigating adolescent reproductive health and sexual behaviour in Vietnam, where cultural barriers to self-disclosure had led previously to significant under-reporting (Cu Le et al., 2006); and the piloting of A-CASI by the Office for National Statistics in the UK (Gatward, 2003) for recording data from children in the care of and looked after by the state, investigating issues such as cigarette smoking, alcohol consumption, sexual activity and exclusion from school.

The A-CASI application used by the participants in this study is Viewpoint Interactive (www.vptorg.co.uk/ —last accessed 28 November 2008). The questionnaire software has colourful graphics, optional speech functions for use with headphones, time-limited breaks for computer games, and animated on-screen assistants. Typically, children will complete sixty or more questions with relative ease and with minimal complaint. Davies and Morgan (2005, p. 394) describe Viewpoint Interactive as ‘a typical A-CASI application, but designed with children in mind’. First developed in the mid-1990s, it is now used in about 130 local authorities across all four countries of the UK, with questionnaire formats for users with varying needs and abilities: for children, older young people, young offenders, and, on occasions, for adults. It is also used for large-scale surveys, especially in the education sector.

Context

A-CASI is capable of recording the first-hand views of young people extremely quickly. We were interested in exploring the ways in which the views
of looked after young people were collected, aggregated and responded to organizationally. We wanted to discover if looked after children and young people valued A-CASI as a means of participating in their individual care planning. Arguably, if the A-CASI system is valued by service users, then it may be a significant component in shaping professional responses to need. Moreover, the data collected in this way could be useful to managers at different levels in informing and developing services.

From our preliminary contact with agencies using A-CASI, we were told that young people appreciated the seeming anonymity of being asked sensitive questions about their wellbeing by ‘a computer’. The computer was said to be less likely to make value judgements than in their face-to-face encounters with some of the powerful adults in their care environments. From this, we anticipated that young people were likely to have confidence that the views they submitted would be used positively and to their advantage. We chose to seek and contrast the views of looked after young people on these matters with the corresponding views of managers. We wanted to examine this contrast, rather than studying how front line social workers use A-CASI. We wanted to see how children’s participation using A-CASI ‘filtered upward’, and to see if and how this type of participation activity played out in service and policy development.

Managers generally have very limited direct contact with their looked after young people, but they have a professional role in facilitating participation systems and practice, and they commission A-CASI resources. We wanted to explore some of the merits and disadvantages of such investments from the point of view, on the one hand, of children and young people and, on the other, of managers, to highlight and to help further understand the role of the social worker in the complex process of A-CASI delivery. We believe that this exploration may be of interest to social workers engaged in direct work. It could help them to further appreciate and grapple with the conflicting pressures of their statutory responsibilities, alongside their wish to deliver best practice in participation. One anticipated later development from this study is to examine how front line social work staff actually use A-CASI for individual care planning and relationship building.

Participation

We speculated that information collected from young people using A-CASI may be more easily available in real-time to decision makers and service providers. If so, then the A-CASI methodology may be facilitative in the process of young people influencing decisions about their care: an essential component in service user participation. We used as our definition of participation the framework presented by Wright et al. (2006, p. 6) as the ‘whole-systems approach’. In this, effective participation is said to be
more likely in environments where children and young people are involved in individual decisions about their own lives as well as collective involvement in matters that affect them. This should be in a culture of listening that enables them to influence decisions. This is congruent with Treseder’s (1997) circular model of children’s participation, a development from Hart’s (1992, p. 8) graduated ‘ladder’ model.

Questionnaires for young people and for managers were devised broadly around generating data congruent with the whole-systems framework. This involved asking whether participants believed there existed for them a culture of participation; whether there seemed to be a relevant structure in which participation could take place; whether the practice of participation was actually happening; and, finally, whether systems for participation review were present and effective. For young people, the term ‘participation’ was not used directly, but questions were devised to highlight the various elements in the concept. For all of these elements, we asked respondents about A-CASI’s contribution.

Apart from the on-going relationships young people have with their social workers and their carers, in the study, managers, and occasionally young people, cited a wide range of participation activities that were taking place in their authorities not linked with A-CASI. These included: one-off participation events; young people taking active roles in their Reviews; young people involved in staff recruitment; youth advocates; looked after children reference groups; and young people contributing to specific strategic planning processes.

Method

Having received approval for the project design from our university’s Human Participant’s and Materials Ethics Committee, we approached two local authorities in England, both of which had been using A-CASI routinely for more than five years. Senior children’s services managers in each authority agreed that staff and looked after children in their authority could be approached and invited to contribute to the research. One authority is a large shire county near to London and the other a City Council in the north of England. Each authority employs two or three participation staff who, as part of their role, collect feedback data from looked after children about their experiences of their care. In these two authorities, participation staff visit children and young people individually in their foster or residential homes, bringing A-CASI questionnaires on laptop computers. We did not make and do not report on qualitative comparisons between the authorities.

We devised two specific A-CASI questionnaires: one for young people, and a separate one for managers. For the young people, this was in the form of a brief additional questionnaire delivered at the time of their routine A-CASI visit by their usual participation worker. For managers,
their A-CASI questionnaire was completed online via an e-mail link. We set a minimum age of eight years for the young people and for managers, we invited all child-care managers in both authorities from Team Managers and above. We also organized focus groups for managers in each authority. Young people and managers contributed electronically between December 2006 and October 2007, and focus groups with managers took place in April 2008 and June 2008.

**Respondents**

The young people who contributed \((n = 58)\) and the managers \((\text{online } n = 15, \text{ and focus group } n = 11)\) were all volunteers. One authority had, during the time of the data collection, a total of over 980 looked after children, of whom over 720 were aged over eight years. The other authority had over 480 looked after children in the same period, of whom over 280 were aged over ten years. In total, more girls \((n = 38)\) than boys \((n = 20)\) responded, and the biggest proportion of young people who responded \((60 \text{ per cent}, n = 35)\) were in the age range twelve to fifteen years. Included in respondents across the age range was the youngest respondent, an eight-year-old boy, and six sixteen-year-olds. No respondents were aged seventeen or over. All of the young people who responded had used A-CASI before: 7 per cent \((n = 4)\) once, 45 per cent \((n = 26)\) two to five times, 41 per cent \((n = 24)\) six to ten times, and 7 per cent \((four)\) more than ten times.

From both authorities, we invited by e-mail a total of ninety-two child-care managers to participate. The completed questionnaires from managers \((n = 15)\) represented 16 per cent of all \((n = 92)\) managers invited. The response rates from some groups of managers were variable. For example, of the Independent Reviewing Officers invited, 23 per cent \((five \text{ of twenty-two})\) responded; and 23 per cent \((four \text{ of seventeen})\) of invited Team Managers responded. Service Managers \((n = 8)\), Leaving care managers \((n = 2)\), and various other senior managers \((n = 5)\) did not respond at all. For the focus groups, a total of eleven managers attended.

We hoped that more managers would have responded, both online and in the focus groups. In this regard, a limitation of the study is the somewhat uneven and limited representation of the views of managers in both authorities. This unevenness of representation was also found in the young people who responded across the two authorities. Our study was, however, about the contrasting experiences of the use of A-CASI, and although numerically the response rate was limited, we believe that data generated highlight many of the important issues in the use of A-CASI in practice settings.
An overview of the responses
Children and young people

Our data indicate that young people who responded to the survey understood the principles and potential value of expressing their views using A-CASI. They also believed quite clearly that A-CASI is a useful, relatively risk-free and efficient way, amongst other ways, to register their opinions. The fifty-eight young people who responded reported overwhelmingly that they enjoyed using A-CASI to record their views and feelings (95 per cent, $n = 55$); and 90 per cent ($n = 52$) agreed that it helps them to think more clearly about what they feel. One young person wrote ‘I can write my thoughts and feeling down better then what I can say them’. When asked whether using A-CASI is good because when they say something important, then someone will be able to act on what they say, 48 per cent ($n = 28$) strongly agreed and 47 per cent ($n = 27$) agreed that it was. In reference to this question about what they liked best, one young person commented, ‘I can put in what I want and click on what I think and it won’t tell me what to do’. Most young people (97 per cent, $n = 56$) found it ‘easy’ typing in their responses.

When asked to respond to the statement ‘Using (A-CASI) has made me feel more confident that things can change in my life’, 77 per cent ($n = 45$) agreed or strongly agreed that it had (see Figure 1). In free text responses to this statement, 14 per cent ($n = 8$) made comments that it assisted with being listened to; 28 per cent ($n = 16$) that it helped them to articulate their thoughts and feelings; and 21 per cent ($n = 12$) that it had assisted in bringing about change for them personally, mentioning issues such as contact with their birth families ($n = 15$), or other specific issues in their care placements ($n = 8$). That is not to say that A-CASI was universally

![Figure 1 A-CASI's contribution to positive change](image-url)
popular; one young person said ‘it’s boring and pointless’. But one young respondent said that A-CASI was useful to her, ‘because if you are shy in front of people and are scared 2 say what you feel’. Another said ‘you don’t have to sit for a long time thinking of what to say’, and another ‘but they should change the questions once in a while’.

Managers

Managers were asked about their reaction to A-CASI, and also about how the data were analysed and used. When asked directly about A-CASI’s contribution to participation, managers in one authority reported generally that, for them, A-CASI held a central position in their current participation practice. In the other authority, this, too, was said to have been the case for several years. However, A-CASI usage in the second authority had diminished recently and its use was under review, with a view to ensuring that A-CASI becomes targeted to a more representative group of young people. Generally, managers reported that they recognized the ‘useful simplicity’ of A-CASI. They also valued its relative independence from adult distortion in the power-laden process of giving feedback to corporate parents. In both authorities, A-CASI was reported as being used principally to prepare young people for and to record their views in statutory reviews of their care. In this context A-CASI can also be used to meet government requirements to report the number of young people involved in their reviews. From this way of working, managers gave examples of A-CASI’s positive impact on particular issues for individual children. A-CASI informed social workers and Review decisions about issues such as bullying, pocket money, bank accounts, passports, haircuts, the nature and frequency of a child’s contact with their natural parents or siblings, and in the process of negotiating preferences in patterns of respite care for children with disabilities.

The enthusiasm from managers for the principles and potential of A-CASI was often, though, in sharp contrast to their reports of experiences in its application. Managers were concerned that systems for aggregating and reporting on data collected by A-CASI were patchy and not sufficiently well supported organizationally. Particular distress was expressed on occasions on behalf of children whose concerns and requests expressed via A-CASI had not been followed up. It was also acknowledged that if children had been in the looked after system for long periods of time, then A-CASI was sometimes considered too predictable, and the quality of the information provided by the child or young person diminished. In addition, managers recognized that A-CASI was not always made available routinely to some groups of children, such as children with disabilities and pre-school children. Managers also reported that where the use of A-CASI was left to the discretion of social workers or to professionally unqualified
assistants, without sufficient reinforcement at a senior level, usage could decline significantly.

Several managers reported difficulties and poor skill levels among managers working with and analysing data produced by A-CASI systems. The A-CASI software generates automatic reports in pre-defined templates and, although templates can be customized, this was reported to happen rarely. Some managers were said to have experienced a kind of immobilization when presented with A-CASI data. One manager mentioned that A-CASI data, which, in many respects, are aggregated in quantitative terms, can highlight differences between the effectiveness and the popularity of individuals or groups of staff. This competitive element was said to be de-motivating, causing some managers and social workers to avoid A-CASI systems entirely. There were many comments about individual children’s contributions being filed away on completion, with little or no acknowledgement by the social worker or their team until the next six-monthly review. One respondent manager commented ‘people don’t act on the (A-CASI) data—they don’t know what to do with it—they don’t have the confidence—they look at it and say “what’s all this rubbish about?”’.

There was, however, in addition to its current use, enthusiasm from managers for the possibility of using A-CASI for engaging with children who were not looked after. This included developing questionnaires for children receiving community child protection services and for children engaged with community preventative services. There were also suggestions for using A-CASI with children with complex needs, and with foster-carers. One authority was planning to establish a trial system of random sampling to select the children to be offered A-CASI, to make the data more statistically meaningful. The data acquired will be used for focus group discussions as part of participative group work with looked after children and young people. This authority is also exploring using action-research approaches, with children and young people participating as co-constructors of participation knowledge.

Discussion

Young people’s enthusiasm

From the data, we were struck by the enthusiasm of the young people for using A-CASI and their general belief that it was worthwhile to communicate their views in this way. Dunleavy et al. (2006, p. 467) suggest that technology is paving the way for ‘digital-era governance’, through digitization, reintegration and needs-based holism. This, they argue, is a process whereby technology captures the fine grain of individual need, facilitating more individually tailored services and solutions. It is possible, therefore, at some level that young people in this study are in step with these
emerging trends. Tregeagle and Darcy (2007, p. 3) report, however, that the current use of ICT in child welfare ‘is dominated by the managerial discourse, with professional and community discourses relatively powerless’. They recommend (Tregeagle and Darcy, 2007, p. 15) that social workers need to ‘move thoughtfully and, assisted by research, develop (ICT) applications which can enhance service user participation’. We suggest that further study of how A-CASI is used to advocate directly on behalf of children within assessments of need may indicate that the effective development and application of A-CASI could provide additional opportunities for enhancing communication, brokerage and relationship building, between service users, planners and managers. Computers are familiar to and valued by managers and children alike, and may assist in directly empowering service users by facilitating less mediated communication. In this way, service planners may be more involved directly in the ‘personalization’ agenda, but success will depend on the levels of customization of A-CASI data that service planners and managers want.

Only 4 per cent ($n = 2$) of young respondents felt that A-CASI was used too frequently to record their views and feelings, and 95 per cent ($n = 55$) felt that they are being asked the right kind of questions. There were some comments suggesting it would be helpful to build more flexibility into the questionnaires, especially linked to age appropriateness and placement type. For 95 per cent ($n = 55$) of the young people, the information collected using A-CASI is used in the formal reviewing process of their care, known in England and Wales as ‘looked after reviews’. Several young people commented on preferring the A-CASI method for bringing their views into the reviewing process. One young person wrote ‘it is easier to type than say out loud’. There was unanimous agreement (100 per cent $n = 58$) that they liked completing A-CASI with the participation staff member who brought the laptop to them being there at the same time—a strong vote for relationship-based social work perhaps? However, in a linked but separate question, two young people felt strongly that they would prefer to complete the A-CASI questionnaire without anyone else being present. Some other local authorities in the UK have different arrangements for A-CASI data collection. For example, A-CASI questionnaires can be completed online with a single central administrator. This capitalizes on the recent ubiquitous availability for young people of internet, e-mail and mobile communication devices.

There was a mixed response from young people (47 per cent, $n = 27$ in favour; 42 per cent, $n = 24$ against) to the possibility of talking with other children looked after about how they think and feel about things. If they were to do so, however, the majority (28 per cent, $n = 16$) expressed a wish to be involved in drama and plays; 24 per cent ($n = 14$) to make videos; and 12 per cent ($n = 7$) to create newsletters. Young people’s contrasting, almost unanimous enthusiasm for A-CASI may also be linked with its more inclusive essentially democratic properties and processes, when
compared with some other types of activity, and, for our young respondents, A-CASI is individualized, ongoing and routinely available.

Burton and van den Broek (2008, p. 15) argue that it is important to recognize the influence of managerial and professional relations around the technologies used in social work. The increasing use of social work time for data input can result in a failure to draw on the professional expertise of those working in the field. It would not be surprising, therefore, if the enthusiasm of young people to generate data is received with some caution by professionals, as the professionals themselves are likely to be aware that more data, in itself, will not necessarily make children safer or guarantee their participation. A principal feature of most A-CASI applications, however, is that, generally, data are input by service users, not by social workers or by other staff, and, particularly in online delivery systems, A-CASI data collection costs in relative terms are minimal. A-CASI appears to be a methodology that is fairly easy to employ, at least in terms of data collection.

Young respondents had reasonable expectations that having shared their views, these would be valued and acted upon. It is concerning, then, that some manager respondents noted significant inconsistencies in how this was progressed in practice. This happens elsewhere, of course. For example, Axford (2008, p. 13) observes that ‘it is common for needs assessments to be completed with much enthusiasm and then for the report to gather dust on the shelf; the gap between the assessment of need and the interventions provided is well documented’. A-CASI as a data-collection tool has many unique advantages. But how the data are used once collected, of course, is another matter.

Possibly, young people responded positively to A-CASI because they saw it as offering more impartiality and consistency in the way their views and concerns are transmitted to decision makers. Indeed, young respondents sometimes reflected a concern that they were less sure of their social worker’s capacity to reliably fulfil this role. Reports by managers in this study, that the participation skills of social work staff at all levels in their agencies were very ‘ad hoc’, is reflected by Luckock et al. (2006, p. 192), who note that, in the UK, ‘there is still no guarantee that any student on qualification will have been taught about or assessed in communication skills with children and young people’. They suggest, though, that there is some evidence to anticipate future improvement (Scottish Executive, 2006). Lefevre et al. (2008, p. 173) argue further that effective listening and work with children require ‘not just honed micro-skills, but a commitment to child-centred and inclusive practice’. Indeed, many have argued that statutory settings now offer fewer opportunities for relationship-based practice, given the development of managerialism (Prynn, 2008). Woodcock and Dixon (2005, p. 953) note that social work students prefer to work in a ‘welfare’-oriented framework, and have been unhappy about the limited extent to which their therapeutic skills are employed in
statutory settings. Social workers, therefore, may be suspicious of A-CASI technology as another managerialist restriction, whatever the possible opportunities for enhanced relationship-based practice that it may present. It is true that A-CASI could appear, on first sight, to be the very antithesis of the way to enhance therapeutic relationships. Yet, the enthusiasm we found from children and young people for A-CASI may be symptomatic of a more general embracing of opportunities for engaging in relationship-based practice, both at the care planning level and for policy development. This may reflect the general experience that all good relationships are based on the accurate and safe sharing of important information. In addition, A-CASI is a mechanism that potentially can assist in bridging the implicit workplace gulf between manager and social worker, because both groups can directly access the same relatively unmediated viewpoints of service users. We are mindful, though, of the concerns of some of our respondent managers, who expressed real fears about the risk of channelling relatively unfiltered feedback into professional systems.

Warming (2003, p. 826) reports that ‘children’s perspectives on quality of life may be different and even in conflict with that of their adult carers… (and that) quality of life is a social construction’. If Warming is correct, then it is likely that the process of capturing and attributing meaning to those perspectives, and how they are constructed, should not be left to chance. It may be that some young people see A-CASI as one possible way of reducing the risks in this regard. Young respondents were often quite realistic about some of A-CASI’s limitations. For example, one survey question read: ‘Using (A-CASI) is OK but when I really want my carers or my social worker to do something, then I usually find it’s better to speak with them directly.’ In response to this statement, 67 per cent ($n = 39$) either agreed or strongly agreed. However, 19 per cent ($n = 11$) disagreed, and one person strongly disagreed. In contrast to another similar question, 64 per cent ($n = 37$) either disagreed or strongly disagreed that there are better ways (than A-CASI) to collect their views about being looked after. Overall, though, these potential ambiguities did not detract from the respondents’ general enthusiasm for the value of A-CASI as a vehicle for communicating their views.

Managers’ concerns

The relatively small number of managers who responded (online 16 per cent, $n = 15$ of $n = 92$) was illustrative of the wider issues under review. In the focus groups, some managers in both authorities were dismayed by the poor responses of their colleagues, usually attributing these to the pressures of day-to-day service delivery.

From the managers who responded, there was generally a good understanding of what constituted effective participation. They gave examples
of A-CASI data contributing to adjustments in policies such as bullying, the use of bank accounts and contact with birth families. But, on the whole, managers reported patchy, uncoordinated and fragmented systems for feedback and for using and integrating A-CASI data. This revealed a picture of managers holding an evidently powerful resource in their hands, but where they felt that their hands were tied by a multitude of organizational constraints. Managers in general seemed concerned that, unlike the young people, they as managers may not be delivering on their side of this particular participatory bargain.

Sinclair et al. (2007, p. 197), in their study of children looked after by local authorities in England, concluded that there are three primary determinants of outcome:
  
  - the child’s age and behaviour,
  - their view of where they wish to be, and
  - the quality of their carers.

It is important that monitoring systems should be sensitive to and regulate all three of these elements. Yet, effective monitoring must also be a reflective and dynamic process. In this regard, A-CASI may fulfil a useful function in the real-time triangulation of information sources that come together in monitoring systems. Trotter (2008, p. 272), in a study of client satisfaction in child protection, concludes that, ‘measures of client satisfaction do tell us something about effectiveness. If clients are satisfied, other outcomes are likely to be better’. Trotter adds, though, that it is important to include outcome measures other than satisfaction if the aim is to measure effectiveness. A-CASI often records, among many other things, measures of client satisfaction, and this is relevant, but, clearly, A-CASI design needs to be sufficiently sophisticated and flexible to record and respond to more subtle outcome measures, in association with the other monitoring and participation practice methods.

The issues around using aggregated A-CASI data to inform and, in some circumstances, to drive policy developments were seen by managers as being particularly complex. Most managers appreciated the potential benefits, for example, in the words of one manager, of ‘having a survey in place that’s running continuously’ and several managers pointed out that aggregated data can be extremely useful for appreciative enquiries validating good practice. In general, though, managers seemed unaware whether, or how, A-CASI contributed to policy development in their authorities. This seemed reinforced in places by the reports of rather arbitrary processes for choosing which children may be encouraged or invited to complete A-CASI questionnaires.

In considering A-CASI’s contribution to outcomes for looked after children, one manager said ‘there are so many changes taking place, it’s hard to attribute particular ones to A-CASI’. Another commented that the
pressure from central government to deliver on national performance indicators left them ‘fire-fighting’ in policy terms. For these managers, it felt like service delivery strategies for children at that time were merely ‘responses to key deliverables’, which were prescribed externally rather than evolving from the realities of the actual children in their care. Ruch (2007, p. 660) suggests that reflective practice is necessary for working with complexity and uncertainty. This, she indicates, is best achieved where there are clear professional boundaries and ‘contextually connected’ managers aware of their service users’ changing needs. A-CASI systems undoubtedly have the potential to provide this live contextual data, based on data grounded in firsthand experience. For managers grappling with complexity, such ‘grounding’ could be of great value in their ongoing reflective practice.

Opportunities for social workers

In a chapter on listening to children and young people, Thomas (2005, p. 35) quotes a twelve-year-old looked after child, saying ‘I don’t need, well I do need sometimes, but most of the time I don’t need people to say what is best for me’. Social work with vulnerable children brings significant opportunities for assisting young people to gain experience and confidence in making such choices, in meeting their needs and in operationalizing their rights. A child’s ‘right’ to participate is guaranteed by the United Nations Convention on the Rights of the Child, but, as Lyon (2007, p. 148) observes, there is still much testing of case law needed to build these Convention Rights into enforceable law. This view is supported by Roose and Bouverne-de-Bie (2007, p. 440). They argue that the debate on children’s rights should focus ‘not so much on the rights children have or do not have but rather… on the question of how the rights of children, just like the rights of adults, are to be realised’. Social workers are placed in a privileged position to assess and exercise influence in these matters, and they should maximize the use of all available participation systems and skills.

Brady (2007, p. 33), reflecting very much the picture presented by manager respondents in this study, suggests that ‘while there is consensus among practitioners that participation is a “good thing”, there is confusion as to what counts as participation, (and) what participation is for’. Brady (2007, p. 33) cites Cooke and Kothari (2001, p. 14), who suggest that the ‘proponents of participatory approaches have been naive about the complexities of power and power relations’, as it is clear that children are not positioned equally in these power dynamics and have a less powerful starting points (Cockburn, 2007, p. 447). The young respondents showed disarming candour in their awareness of the importance of communicating their needs and views. The managers, however, were in the main confirming Carr’s (2007, p. 271) view that ‘formal consultation mechanisms and
established decision-making fora have not been adequate for the participation task’. For social workers, firsthand data from A-CASI systems could be a valuable resource to assist with this difficult and multi-layered task. We look forward to research on this aspect of A-CASI in the future, particularly A-CASI’s potential as a tool for the co-construction of knowledge of need by social workers and children.

There is evidence in the UK (Stevens et al., 2007, p. 295) that front line practitioners are increasingly interested in researching the outcomes of practice interventions. It is possible that A-CASI may be a useful tool in this regard, but social workers should recognize that it is important, as some of our manager respondents acknowledged that A-CASI data from service users are not used only to service pre-determined categories of externally driven performance indicators. Cortis (2007, p. 400) reports that it is common for local authorities to collect data for performance measures with ‘easy to access numerical data sources’ and it is possible that A-CASI data from looked after children are easy targets for superficial externally driven research agendas. Recent trends in the ‘new sociology of childhood’ emphasize the validity of the ‘here and now’ and how children construct and negotiate their lives (Winter, 2006, p. 60; Fraser et al., 2003). A-CASI could be a valuable tool for capturing here-and-now information and for developing insights into and in formulating responses to looked after children’s wishes and needs. It could also be useful in helping to ‘reduce some of the power imbalances between adult researchers and children’ (Coad and Evans, 2008, p. 50), and in promoting children’s involvement in data analysis.

**Conclusion**

This paper reports on a study of the use of audio-computer-assisted-self-interviewing (A-CASI) with looked after children and young people. We found that, to a significant degree, the young people who responded liked using A-CASI. Further, they believed it could assist in creating positive change in their lives. The young people demonstrated, however, a capacity to recognize that there were occasions on which only face-to-face communication would do, and that computer systems could have their limitations.

Our recommendation for managers, based on this study, is to give A-CASI serious consideration. It is relatively cheap to deploy and as long as users have a real choice to use it or not, it can be empowering for young people and for staff. A-CASI is not a substitute for a child’s relationship with their social worker, and it should only ever be one method in a varied menu of participation activities, but it is a system that can provide useful structured base-line and historical data for service delivery. However, the culture for A-CASI’s successful adoption needs to be
carefully prepared and sustained. It is potentially very threatening for staff and front line managers to receive unfiltered feedback on what are often complex and fragile professional relationships between looked after young people and their social workers and carers. It is understandable for front line staff to be poorly committed if A-CASI’s merits as a relationship-building, participative tool are not highlighted and nurtured. Technophobic reactions in settings that emphasize ‘managerialist’ assumptions can also undermine A-CASI’s potential value. For managers, it is essential that a significant emphasis is placed on training in the methods and opportunities for analysing, reporting and utilizing the rich data that A-CASI systems continually produce. Otherwise, important opportunities for reflective management, responding dynamically to service-user input, will be missed.

For social workers, A-CASI represents both opportunities and threats. For a young person to input comments into a computer that can be read instantaneously and unedited by their managers and colleagues represents a new dimension in social work. What if they don’t like you, and they say so? Isn’t there enough scrutiny already? However, good participation practice requires open, honest and empowering professional relationships. Whatever the young person says, in most cases, should be no surprise and it is more than likely they will be saying things of considerable value to themselves and to their future. The heart of a social worker’s relationship with a service user is an acknowledgement that the service user’s views are valid, and should be recorded, considered and carried forward. It would be valuable to research the views of social workers directly about the use of A-CASI but, from this study, we suggest that it has the potential to assist with the regulation and management of the notoriously subjective but centrally important process of enabling young people to participate in, and to influence decisions made about, their care.

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References


