Frontline Workers’ Challenges in Hearing Children’s Voices in Family Support Services

Lisa Stafford, Jo-anne Harkin, Annie Rolfe, Christine Morley, and Judith Burton

School of Public Health and Social Work, Queensland University of Technology, Brisbane, Queensland, Australia; School of Design, Queensland University of Technology, Brisbane, Queensland, Australia

ABSTRACT

Research into children’s voices continues to receive significant attention due to the limited progress made around the world in meeting Article 12 of the Convention on the Rights of the Child: the right to be heard and participate in decision making. However, there is a paucity of research providing insights into children’s voices in family support services linked with the child protection system. This paper contributes new understandings into the everyday practice experiences of 46 frontline urban and regional practitioners working in family support services for UnitingCare, a nongovernment organisation in Queensland, Australia. Critical and interpretive research utilising WorldCafé focus groups reveals hearing children’s voices is not occurring as an everyday practice. It identified four intersecting influences that prevent rights-based children’s participation: program, conceptual, organisational, and direct practice issues. A sustained paradigm shift to protection with participation is needed to ensure children’s voices are included as an everyday practice in family support services.

IMPLICATIONS

• Culture, program, organisation, and practice level challenges intersect to impede frontline family support services practitioners from hearing children’s voices as an everyday practice.
• A paradigm shift to “protection with participation”, a culture that values children and their voices, alongside steadfast leadership are needed to embed a rights-based, child-inclusive approach in family support services as part of the care continuum.

The rights-based principle and practice of “children’s voices” continue to receive significant attention from academics, policymakers, and practitioners. Article 12 of the United Nations Convention on the Rights of the Child (UNCRC) (1989) states that children have a right to be heard and participate in decision making (Kosher & Ben-Arieh, 2020; Nylund, 2020). At a minimum, Article 12 requires organisations to take children’s
views into account. This means children’s views are not only asked for, but given due weight in decision making, even if the wishes of the children are not necessarily fulfilled (Shier, 2001). This is crucially different to “tokenism” participation (Hart, 1992) commonly experienced in children’s lives (Nylund, 2020).

Children’s participation has been guided and advanced through important conceptual shifts in the way children are considered and understood, led by scholars such as Hart (1992), and James and Prout (1997). Under the New Sociology of Childhood, children are considered as “social actors” (James, 2007, p. 261), who are experts of their own experiences and, within an empowering environment (Fargas-Malet et al., 2010, p. 175), can contribute to decisions about their own lives. In challenging western constructions of “childhood”, this paradigm recognises the concept of childhood varies across cultures: children are not just objects of socialisation (Percy-Smith & Thomas, 2009, p. 2) or adults in the making (James, 2007). Furthermore, such thinking has challenged age as the determinant of children’s involvement (James et al., 2004, p. 189). This paradigm shift replaces “images of children as needy, incompetent and vulnerable” to “competent agents within social and cultural settings” (Dockett et al. as cited in Bessell, 2013, p. 16). These shifts are reflected at multiple levels from societal and cultural to policy, programs and direct practice, with each impacting the other.

Conceptually, this shift is significant in recognising children’s participation from a rights-based approach. Such a perspective in working with children centres on empowerment and participatory approaches (Kosher et al., 2016). For example, the Australian Association of Social Workers’ position paper on Child Wellbeing and Protection (2020) describes the commitments social workers need to take for a rights-based approach. This paper specifies that the best interest of the child is of primary concern; that all children are to be heard; that all children have a right to be given information suitable to age and ability; and that these rights are to be afforded to all children, regardless of diversity.

To implement the practice of children’s participation from this rights-based approach, various frameworks now exist. One of the earliest was Hart’s Children’s Participation Model and Ladder of Children’s Participation (1992). As an alternative planning participation tool, Shier’s framework of Pathway to Participation (2001, 2013) promotes the implementation of children’s voices into practice through a more applied approach. This includes the roles and ways individuals and organisations can facilitate children’s participation in practice. To achieve children’s active participation in decision making, organisations should be “involving children at the point where decisions are made” (Shier, 2001, p. 114).

Research demonstrates the effectiveness of processes supporting children’s participation such as their inclusion in family meetings (Kennan et al., 2018). Such practice not only improves quality and responsiveness of service provision (Salveron et al., 2013; Woodman et al., 2018), it helps to build a sense of belonging, self-esteem, responsibility (Shier, 2001), and sets the foundations of citizenship and democratic participation (Hart, 1992; Häkli et al., 2018; James & Prout, 1997). Having a voice is also a protective factor from harm (Kosher & Ben-Arieh, 2020) and key to promoting children’s well-being, safety, and life development (Valentine et al., 2016, p. 60). Yet, children need to have workers willing and able to apply a rights-based approach that allows children to express themselves (Bessell, 2013, 2016; Griffin et al., 2016; Kosher et al., 2016).
Despite the importance of children’s participation, child and family services in Australia and elsewhere struggle to implement this right into practice (Bessell, 2016; Kosher et al., 2016; Nylund, 2020). This implementation failure was recently elucidated in two significant national Australian reports: The final report of the Royal Commission into Institutional Responses to Child Sexual Abuse (2017) and The Children’s Report of UNICEF Australia and the Australia Child Rights Taskforce to the UNCRC (Irani et al., 2018).

Systemic cultural and operational barriers persist in child welfare services to prevent children’s voices being heard (Carnevale et al., 2015; Ferguson, 2017; Kosher & Ben-Arieh, 2020; Nylund, 2020). Children are being persistently viewed as vulnerable and lacking capacity (Bijleveld et al., 2019; James et al., 2004) in a system where practices are also influenced by technocratic approaches and managerialist efficiency (Ferguson, 2017). Power differentials held by practitioners also persist within the long-established emphasis of protection over other children’s rights (Kosher & Ben-Arieh, 2020; Le Borgne & Tisdall, 2017). Such barriers are why children’s voices often remain suppressed (Bessell, 2016; Bolin, 2018; Irani et al., 2018). Not having a voice impacts children’s well-being and development, as well as potentially producing practices that expose children to more harm (Carnevale et al., 2015; Kosher & Ben-Arieh, 2020). Research and inquiries outline an urgent need to ensure the right to be heard is implemented for children’s safety. One of the key recommendations of The Children’s Report is to “legislate and embed strong, culturally responsive mechanisms and child inclusive decision-making/dispute resolution processes particularly in family law, child protection and youth justice” (Irani et al., 2018, p. 17).

Australian organisations and practitioners are obliged to hear children’s voices as per Principle 2 of the National Principles for Child Safe Organisations (Australian Human Rights Commission, 2019): “Children and young people are informed about their rights, participate in decisions affecting them and are taken seriously”. However, stated obligations alone are not enough to safeguard and uphold children’s rights to have a say and be heard. Careful consideration of existing practices and processes regarding children’s voices, particularly in underresearched areas such as family support services, is required.

This gap was recognised by UnitingCare, a Queensland nongovernment organisation (NGO) that made “Empowering Children’s Voices” a key strategic research priority in 2017 in recognition that genuinely including children’s voices in service delivery is important in improving intervention practices. UnitingCare had already developed an organisation-wide “Child Safe, Child Friendly” risk management framework (based on Smallbone et al., 2008), but following the Royal Commission into Institutional Responses to Child Sexual Abuse (2017), UnitingCare recognised that children’s direct participation required attention. Because of this commitment UnitingCare funded a multiphase research program that partnered with Queensland University of Technology (QUT) in 2018 to identify ways to enhance the voice of children in family support services. This resulted in the development of Project 1 (in 2018–2020) that sought understanding of the everyday experiences of their frontline practitioners (Phase 1) and children 6–17 years of age whose families received family support services from the UnitingCare NGO (Phase 2); and the subsequent Project 2 (in 2019–2021) that developed critical reflection workshops with management and staff to help transform practice. Prior to
this research, an online baseline survey of practitioners’ attitudes and assumptions toward children’s participation in practice was conducted (Harkin et al., 2020). The survey received 55 respondents (50% response rate) from the organisation’s family support practitioners (social workers and colleagues) and included qualitative and quantitative findings that informed Phase 1 of this research.

This article reports findings from Project 1 Phase 1 of the study, which provides new insights into the everyday experience of family support service practitioners in hearing children’s voices to help inform areas of change needed to uphold children’s rights.

**Method**

**Research Design**

This qualitative interpretive study explored the everyday experiences and meanings of frontline child services practitioners (Blaikie, 2000; Smith et al., 2009). Studying the everyday experiences of practice and the structures influencing these experiences is important given existing studies have found that the rights of children to have a voice can be opposed or overridden by both people and systems (James et al., 2004; Salverone et al., 2013). Adopting an interpretivist paradigm enabled us to uncover important insights shaped through practitioners’ interactions with people, situations, objects, and systems (Blaikie, 2000, p. 115). This approach recognises that reality and meanings are socially constructed (Smith et al., 2009). As key gatekeepers to hearing children’s voices and facilitating their participation, frontline practitioners’ experiences and sense making is grounded in everyday practice and therefore paramount to gaining new research insights. “Everydayness” is an important lens for understanding more deeply not just what influences practice but also how these influences unfold in practice (Horton, 2014). Combined with the New Sociology of Childhood and the rights-based approach mentioned earlier, use of an everydayness lens enabled the research team to unearth attitudes, beliefs, practices, and organisational and sector impacts influencing engagement with children. Such knowledge is essential to affect change in family support services, which is part of the care continuum.

**Participants**

The aim of Phase 1 was to understand the everyday experiences of the UnitingCare’s frontline practitioners: specifically, how the voices of children (aged 6–17) are currently heard in practice; and, importantly, how practice could be built upon and enhanced to involve the voices of children more genuinely and frequently. As the focus of the research, UnitingCare selected two of their Queensland Government-funded family support programs (from the Department of Child Safety): Intensive Family Support Services (IFSS) and Family Intervention Services (FIS). These programs are designed to support families to safely care for children at home. IFSS supports families to improve their capacity to meet their children’s care, protection, and development needs as an early intervention method to prevent children entering the tertiary system and out-of-home care. FIS provides intensive tertiary support where ongoing statutory intervention with a family is required.

A total of 46 frontline practitioners participated in five 3-h workshops across Queensland: two were urban based and three were in regional locations. They had a range of qualifications
including Social Work, Psychology, and Human Services. The workshops occurred in March and April 2019, with all frontline staff invited from UnitingCare’s family intervention and support services. Three members of the QUT Research Team developed and facilitated these workshops. No supervisors or managers from UnitingCare were present. A WorldCafé focus group method enabled participants to explore important and potentially difficult questions; take ownership of their attitudes, beliefs and practices; and better direct the conversations (Steier et al., 2015). The research was carried out in accordance with QUT’s Human Research Ethics Committee (approval number 1800001081) and UnitingCare’s Human Research Ethics Committee (approval number Stafford31102018).

WorldCafé Focus Groups

The WorldCafé approach avoided problematic power dynamics that can occur in traditional focus groups. The method encourages collaborative dialogue around set questions grounded in everyday contexts. The groups then shared their insights after each round of questions. Developed as a research method by Juanita Brown and David Isaacs (2005), WorldCafé is an accessible, relatable method for generating conversation and cross-pollination of ideas. In this study conversing took place in an informal, comfortable, and welcoming café-style setting with small groups around small tables.

The seven WorldCafé principles (Steier et al., 2015) employed at each workshop were setting the context and encouraging democratic participation and ownership of the conversations; creating inviting emotional and physical spaces (see Figure 1); posing open, nonleading questions; encouraging participation from all participants; encouraging interconnectivity to cross-pollinate diversity of perspectives; looking for deeper questions, patterns, and insights; and, identifying and making visible the collective knowledge.

For this research, the WorldCafé method enabled exploration and development of narratives around three questions:

Question 1—Think about day-to-day practice. To what extent are children’s voices heard in service delivery? What are the barriers and challenges?

Question 2—How could we (as an organisation) better hear the voices of children in everyday practice? What works and how can we draw on these successes?

Question 3—Organisationally, what is needed moving forward to enhance service delivery to include children’s voices in matters that affect their lives?

Each round of questions invited the sharing of examples and scenarios from the participants. Following each round, groups collectively discussed the insights, and the facilitator (Principal Researcher) harvested these discussions and conversations.

Data Analysis

In keeping with the interpretive constructive paradigm, the researchers carried out a detailed analytical process. We examined the transcripts using established qualitative techniques to achieve saturation of data and comprehensive findings (Smith et al., 2009). We applied open coding conducted in NVivo 12, connected emergent themes, and identified patterns. The final step was to take the interpretations to a deeper level.
by using research theories as a lens to view findings. The analytical task of this research is often described as iterative, intuitive, and inductive with the aim of arriving at a whole new meaning (Smith et al., 2009). While the insights represent strong themes and shared commonalities with the broader body of literature, they are limited to family support programs and practitioners within UnitingCare. Findings from this interpretive qualitative analysis provide in-depth understanding of practitioners’ everyday experiences and meanings, and, although indicative of practice, they are not intended to be generalisable.

Findings

The interpretative accounts of 46 practitioner participants reveal that hearing children’s voices is not an everyday practice in family support programs. From analysing participants’ meanings and structure of the experiences, we identified four key influences and pressure points as challenges to children’s participation in practice as depicted in Figure 2. These intersecting barriers are:

1. lack of recognition of children in the family support programs and associated programmatic level challenges and needs.
lack of cultural value around children’s voices and associated challenges and needs. 
(3) lack of strong relationships between Child Safety, UnitingCare management, 
parents, and children. 
(4) lack of adequate resources to do child-inclusive work and associated programmatic 
level challenges and needs. 

Influences and pressure points intersect with each other to make hearing children’s 
voices challenging as an everyday practice. In the next section we describe these 
deeper-level insights to illustrate the substantive multifaceted and multidirectional 
change required to hear children’s voices as an everyday practice in family support 
services.

Children Are Not the Main Clients: Program Assumptions and Influences
A main challenge in hearing children’s voices in FIS and IFSS is the lack of recognition 
and focus on the child as part of family support programs. This understanding was 
reinforced by the discovery that “family” in these services is commonly understood to 
be about the “parents”. There was little recognition or understanding of children as a 
focal point for service as a “client”, as illustrated by these three WorldCafé participants’ 
comments:

So we’re told that we are funded to focus on parenting.

Well, one of the things that came up here was that we have to be allowed to engage with the 
children and …what’s being said is that the …team is encouraged to only work with the 
parents. We don’t work with the children.

I’ve been told since day one, we don’t work with the children; that’s not our area.

Figure 2 Diagram of the identified key influences and pressure points on the everyday practice of 
hearing children’s voices
This finding highlights, supports, and demonstrates that the way programs are constructed and interpreted in practice is highly influential because programs are laden with assumptions, beliefs, and values; shape the focus of work; and specify service deliverables (Bolin, 2018). This lack of recognition and lack of visibility of children directly influences children’s opportunity to have a voice (James, 2007).

**Children Need Protection: Conceptual Assumptions and Influences**

How children are conceptualised by practitioners also directly influences the involvement of children’s voices in family support services. This study found that children were commonly constructed as vulnerable and in need of protection within family support, which meant their rights to be heard and participate in decision making under Article 12 were not being realised.

This finding confirms commonly held assumptions about children in family support services: that they are too young, too traumatised, or too innocent to be involved or exposed to adult conversations and hence children are excluded from participating. Regarding age and capacity, the participants often aggregated children into one group, without attending to the diversity and capability of the individuals in the group “children”. As a WorldCafé participant noted: “A big barrier with children’s voices is the age of the kids. I find … the younger they are, the harder it is to hear their voice”. This led to often generalised statements by participants, such as this one about children’s rights: “With the children’s rights, a lot of the children aren’t old enough to even understand or know what their rights are”.

Paternalistic constructions of “childhood innocence” with a consequential lack of perception of agency were also strongly identified as a reason for not involving children:

> I don’t know that I agree children should be in family group meetings and that. I think that is the parent and adult stuff … part of how we’re going to solve [family issues is] why Child Safety are here, yes. But I think children should be children and should not know the adult stuff. (WorldCafé participant)

Unexamined assumptions such as “kids are … only little mini-adults” (WorldCafé participant) is an indicator of children not being viewed as competent social agents in their own contexts (James, 2007). Another participant indicated that practitioners rationalise that they intentionally avoid times when children would be home as a way of protecting children from these conversations:

> We try not to do visits after school, straight after school or before school because the kids are home, because the conversations we have aren’t appropriate for kids to hear. They’re not age appropriate; they’re not child-friendly conversations. (WorldCafé participant)

Practitioners tend to presume that such acts of protection from participation are better than a rights-based approach of children’s participation (Kosher & Ben-Arieh, 2020).

The practitioners’ sense making of their practices reveal the persistence of paternalistic conceptions of children (Bessell, 2013, 2016; Kelly & Smith, 2017). Generalisations operating from this conception are unsafe, as they permit exclusion and indifference to children’s voices, leading to children being overlooked and silenced in practice (Bastian, 2020; Bolin, 2018; Kosher & Ben-Arieh, 2020). This concern was also highlighted by the Australian Royal Commission into Institutional Responses to Child Sexual Abuse...
This study’s findings demonstrate that little has changed in the way practitioners see children—allowing the well intentioned, but potentially oppressive intersection of protectionism and vulnerability, which persists in explicit exclusion of children from participation in decisions that affect them (Kelly & Smith, 2017, p. 859).

Influences of Managerialism in Welfare Organisations: Organisational Issues

Influences of managerialism driving practice were evident through participants’ sense making of their practice. Participants discussed how the perceived, prescribed practice is about doing the work they are “funded” to deliver. In the family support program service agreement, this is interpreted as parents and parenting as indicated by this WorldCafé participant: “With the service agreement, our clients are basically the parents”. Another participant clarified:

It goes deeper as well into the Department’s perspective on our programs. I know in the past some comments have been made about FIS referrals just for parenting programs or FIS referral to help with contact observations, or FIS referral just to get another pair of eyes on this family so it’s not just one CSO [Statutory Child Safety Officer] looking after them.

Consequentially, there was little focus on hearing children’s voices and facilitating their participation in service planning, decisions, and discussions.

Participant practitioners also revealed that creating space to do rights-based, child-inclusive practice was influenced by an organisational culture that did not understand or value the work of frontline practitioners:

Also at work … a sense of value[less]ness when you’re managing that high level of complexity, but feel like you’re shovelling … you’re drowning [in paperwork], and all those things. But then there’s no validation around that. Particularly from the top down.

(WorldCafé participant)

The experiences described by practitioners reflect broader research and trends noted about the influence of managerialism and market-based welfare (Bastian, 2020). As Ferguson (2017) found, these influences may lead to children being invisible in child protection work within contexts of high levels of complexity.

Direct Services

At the direct-service level, practitioners identified limited team and individual capability and resource insufficiency as key challenges to including children’s voices as an everyday practice. Yet they shared examples where a rights-based approach was being driven by practitioners themselves—case by case. Reasons why including children’s voices are difficult included a lack of time, including increased time needed for travel (especially in regional areas); a great number of children per family; and challenges co-ordinating school, family, and work timetables combined with higher caseload numbers and their increasing levels of complexity. As these two WorldCafé participants explained:

You haven’t even finished the paperwork pile on that case, and you’re allocated a new one, so there’s no space for reflection to occur, or learning.

Sometimes … if we have a family that’s very crisis-driven and maybe there’s a lot of travel time included then we will have a lesser caseload.
These influences seemed too intensive when participants felt they were at capacity without relief and where systems were inefficient, especially where there were duplications in recording data:

I think time is a huge factor for that. I do currently have a family that does have six children, and I find it challenging because I want to work differently with each child in all honesty because they all present with their trauma in a very different way. (WorldCafé participant)

Broader research in children’s services has also found that feeling overwhelmed, alongside caseload pressures in the form of client numbers, case intensity, and complexity all influence hearing children’s voices (Bijleveld et al., 2019; Gibson, 2017).

In addition to the above resourcing impacts, the study also identified the need for access to training in how to engage with children. However, when exploring capacity further, some practitioners also mentioned knowledge and use of innovative and flexible methods used to engage and hear children’s voices. Some WorldCafé participants demonstrated that with the right values and a tailored approach that reflects the children’s ages or own ways of communication, children are able to express their experiences and views. For example:

So [with] the younger kids, even if they don’t necessarily have a voice, you can very much tell their needs by their behaviour. So being able to communicate that to parents as well, I think, is really important. And that’s a way to empower their children’s voices as well, regardless … [of whether] they’re eight months or two.

Communication is also very much an enigma, and, for many people, the children that you do have … learning, developmental delay or even age-based communication or nonverbal is your main form of communication.

Using creative play and the power of conversations, finding neutral space in which to engage such as driving in cars, child-friendly language and tools, family or group activities, and a recognition that hearing children’s voice is a journey were all ways children’s views could be gained. The following comments from three different WorldCafé participants illustrate possible strategies:

We thought this was happening in the family, and I had a session with the three-year-old … in the play therapy. Got a completely different story about what’s happening at home.

A new … area, that we can take clients to. We can do art therapy there. We’ve got a music therapy … We’ve got rock climbing and we’ve got high ropes … We’ve got all these other great things.

Creating opportunities for the discussions to occur with children … it’s not just one particular tool or a once-off conversation, but it is about [going] through that journey with them and creating those opportunities to touch base to talk with, to build a relationship, to make observations et cetera [with children] and managing that information [and] sharing [it] with parents as well.

However, practitioners felt that the incorporation of children’s views and needs into a family’s plans and goals requires being supported and facilitated to do this work, and for this work to be sustained as an expected everyday practice:

Yeah, we tried a two-worker model … what happened was it was great to start with … two workers would go in [a] home and it was a real structured focus where the main case
Practitioners at the frontline illuminated the need to be supported, resourced, and have sufficient time and flexibility to utilise child-inclusive methods.

Discussion

The intersecting challenges identified from 46 frontline practitioners’ own experiences and sense making of their experiences provide first-hand insights into a relatively unspoken area of practice regarding children’s participation. The in-depth understandings of the difficulties faced in hearing children’s voices in family support services contribute important knowledge to address the broader issue of enhancing social workers’ and other practitioners’ capacity to hear children’s voices more genuinely, and to ensure their safety and wellbeing. Currently, children are not seen as the “client”, which means they are not provided with the opportunity to have their views heard and be considered as part of decision making about matters that affect their lives. Child-inclusive practice can be possible only when intersecting conceptual, program, and organisational challenges and pressure points are addressed.

Addressing lack of recognition and the underlying and persistent cultural problems of how children are conceptualised are key because recognition and participation are mutually important (James & Prout, 1997). Recognition from funding bodies of frontline staff in family support services positions children as central and knowledgeable agents of their own lives and as active members of families and communities (Bolin, 2018; James, 2007; Wall, 2019). This in turn makes children feel valued, acknowledged, and happy (Hadley & Rouse, 2019).

Yet requiring practitioners to engage children without a significant paradigm shift in the way children are conceptualised will not result in more genuine participation by children. The accounts of this study’s practitioners illustrate that protectionism overrides children’s voices in family support services. This protectionism reveals a persistent social narrative and construct where practitioners and parents view the children as vulnerable, lacking capacity and agency, which is consistent with findings reported in other child protection services research (Bijleveld et al., 2019; Bolin, 2018; James et al., 2004). Such thinking has not only been contested within the extensive childhood discourse that demonstrates children as being competent and social beings in their own right (Grace et al., 2019; Hong & Goh, 2019; Wall, 2019; Woodman et al., 2018). It has also been shown to be unsafe, because when we do not ask, hear, and listen to children who are “at risk”, practitioners are potentially making them more at risk of harm and abuse (Carnevale et al., 2015, p. 520; Kosher & Ben-Arieh, 2020). While practitioners need to assess risks and manage resulting safety concerns, they also need to safely support children to develop and exercise self-determination and agency so that they are not inhibited in their healthy development (Valentine et al., 2016, p. 60).

The findings of this study, along with other research, suggest that disrupting the culture of protectionism and paternalism entrenched in systems such as child protection is essential. Moving towards a “protection with participation” approach is necessary to resolve these tensions (Kosher & Ben-Arieh, 2020). In acknowledging the need for
change, UnitingCare have commissioned Project 2. This will use critical reflection as a transformative research method to devise strategies for everyday practice to safely empower children’s participation in service delivery in concrete and meaningful ways.

**Conclusion**

Organisations and practitioners have obligations under Article 12 of the *Convention on the Rights of the Child* (United Nations, 1989) and the *National Principles for Child Safe Organisations* (Australian Human Rights Commission, 2019) to hear children’s voices. This study’s findings are limited to one organisation. Yet the findings suggest much work is needed from multiple directions and stakeholders to transform principles into everyday practice. When considering the existing body of literature, there are some clear learnings to inform greater and more meaningful children’s participation across the spectrum of policy, program, and direct practice. These are:

1. a recognition of children as individuals with rights. This is key, as recognition leads to being valued and being resourced. Recognition and children’s participation are directly linked
2. the creation of a culture that values children and their voices in family support services as part of the care continuum
3. a commitment to embedding child inclusivity in family support programs, and building in appropriate support and resources within contracts and service delivery to do this essential practice.

The participation of UnitingCare in this research demonstrates the importance of an organisation’s commitment to improving their own knowledge-based interventions in family support services. The findings of this research emphasise that micro to macro systemic change is needed to embed child-inclusive, rights-based approaches to children’s participation as part of everyday practice in family support services.

**Acknowledgements**

We would like to thank the research participants, staff, and management of UnitingCare. We would also like to acknowledge the support and guidance by UnitingCare’s Principal Advisor, Research & Evaluation Dr Chez Leggatt-Cook and the project’s advisory group.

**Disclosure Statement**

No potential conflict of interest was reported by the author(s).

**Funding**

This research was funded by UnitingCare, Queensland, Australia.

**ORCID**

Lisa Stafford [http://orcid.org/0000-0003-3439-9972]
References

Australian Association of Social Workers. (2020). Child wellbeing and protection: AASW position paper. https://www.aasw.asn.au/document/item/2215

Australian Human Rights Commission. (2019). The national principles for child safe organisations. https://www.humanrights.gov.au/our-work/childrens-rights/national-principles-child-safe-organisations

Bastian, C. (2020). The child in child protection: Invisible and unheard. Child and Family Social Work, 25(1), 135–143. https://doi.org/10.1111/cfs.12671

Bessell, S. (2013). Child-centred research workshops: A model for participatory, rights-based engagement with children. Developing Practice: The Child, Youth and Family Work Journal, 37, 11–20. https://search-informit-com-au.ezp01.library.qut.edu.au/documentSummary;res=IELHSS;dn=315000195725736

Bessell, S. (2016). Inclusive and respectful relationships as the basis for child inclusive policies and practice. In T. Gal & B. Faedi Duramy (Eds.), International perspectives and empirical findings on child participation (pp. 1–25). Oxford University Press. https://doi.org/10.1093/acprof:oso/9780199366989.003.0009

Bijleveld, G., Bunders-Aelen, J. F. G., & Dedding, C. W. M. (2019). Exploring the essence of enabling child participation within child protection services. Child and Family Social Work, 25(2), 286–293. https://doi.org/10.1111/cfs.12684

Blaikie, N. (2000). Designing social research: The logic of anticipation. Polity Press.

Bolin, A. (2018). Organizing for agency: Rethinking the conditions for children’s participation in service provision. International Journal of Qualitative Studies on Health and Well-Being, 13 (sup1), 1–10. https://doi.org/10.1080/17482631.2018.1564515

Brown, J., & Isaacs, D. (2005). The World Café: Shaping our futures through conversations that matter. Berrett-Koehler.

Carnevale, F. A., Campbell, A., Collin-Vézina, D., & Macdonald, M. E. (2015). Interdisciplinary studies of childhood ethics: Developing a new field of inquiry. Children & Society, 29(6), 511–523. https://doi.org/10.1111/chso.12063

Fargas-Malet, M., McSherry, D., Larkin, E., & Robinson, C. (2010). Research with children: Methodological issues and innovative techniques. Journal of Early Childhood Research, 8(2), 175–192. https://doi.org/10.1177/1476718X09345412

Ferguson, H. (2017). How children become invisible in child protection work: Findings from research into day-to-day social work practice. British Journal of Social Work, 47(4), 1007–1023. https://doi.org/10.1093/bjsw/bcw065

Gibson, M. (2017). Social worker or social administrator? Findings from a qualitative case study of a child protection social work team. Child & Family Social Work, 22(3), 1187–1196. https://doi.org/10.1111/cfs.12335

Grace, R., Knight, J., Baird, K., Ng, J., Shier, H., Wise, S., Fattore, T., McClean, T., Bonser, G., Judd-Lam, S., & Kemp, L. (2019). Where are the silences? A scoping review of child participatory research literature in the context of the Australian service system. Children Australia, 44(4), 172–186. https://doi.org/10.1017/cha.2019.32

Griffin, K. M., Lahman, M. K., & Opitz, M. F. (2016). Shoulder-to-shoulder research with children: Methodological and ethical considerations. Journal of Early Childhood Research, 14(1), 18–27. https://doi.org/10.1177/1476718X14523747

Hadley, F., & Rouse, E. (2019). Discourses/1, Australia: Whose rights? The child’s right to be heard in the context of the family and the early childhood service: An Australian early childhood
perspective. In F. Farini & A. Scollan (Eds.), Children’s self-determination in the context of early childhood education and services. International Perspectives on Early Childhood Education and Development, 25 (pp. 137–149). Springer. https://doi.org/10.1007/978-3-030-14556-9_10

Harkin, J., Stafford, S., & Leggatt-Cook, C. (2020). Influences on children’s voices in family support services: Practitioner perspectives. Child & Family Social Work, 25(4), 955–963. https://doi.org/10.1111/cfs.12781

Hart, R. A. (1992). Children’s participation: From tokenism to citizenship. United Nations International Children’s Emergency Fund. https://www.unicef-irc.org/publications/pdf/childrens_participation.pdf

Häkli, J., Korkiamäki, R., & Kallio, K. P. (2018). ‘Positive recognition’ as a preventive approach in child and youth welfare services. International Journal of Social Pedagogy, 7(1), 5. https://doi.org/10.14324/111.444.ijsp.2018.v7.1.005

Hong, R., & Goh, E. (2019). Using photo elicitation interviewing to access the subjective well-being of children from poor families within an affluent Asian society: Insights for service delivery. Children and Youth Services Review, 96(January), 430–438. https://doi.org/10.1016/j.childyouth.2018.12.006

Horton, J. (2014). For geographies of children, young people and popular culture. Geography Compass, 8(10), 726–738. https://doi.org/10.1111/gec3.12161

Irani, F., Lamoin, A., & Lee-Jones, K. (2018). The children’s report: Australia’s NGO coalition report to the United Nations Committee on the Rights of the Child. Australian Child Rights Taskforce and UNICEF Australia. https://www.unicef.org.au/our-work/unicef-in-australia/childrens-report

James, A. (2007). Giving voice to children’s voices: Practices and problems, pitfalls and potentials. American Anthropologist, 109(2), 261–272. https://doi.org/10.1525/aa.2007.109.2.261

James, A. L., James, A., & McNamee, S. (2004). Turn down the volume? – Not hearing children in family proceedings. Child and Family Law Quarterly, 16(2), 189–202. https://ssrn.com/abstract=2029901

James, A., & Prout, A. (1997). Constructing and reconstructing childhood: Contemporary issues in society (2nd ed.). RoutledgeFalmer.

Kelly, L. M., & Smith, K. A. (2017). Children as capable evaluators: Evolving conceptualizations of childhood in NGO practice settings. Child & Family Social Work, 22(2), 853–861. https://doi.org/10.1111/cfs.12304

Kennan, D., Brady, B., & Forkan, C. (2018). Supporting children’s participation in decision making: A systematic literature review exploring the effectiveness of participatory processes. The British Journal of Social Work, 48(7), 1985–2002. https://doi.org/10.1093/bjsw/bcx142

Kosher, H., & Ben-Arieh, A. (2020). Children’s participation: A new role for children in the field of child maltreatment. Child Abuse & Neglect, 110(Pt 1), 104429. https://doi.org/10.1016/j.chiabu.2020.104429

Kosher, H., Ben-Arieh, A., & Hendelsman, Y. (2016). Children’s rights and social work. https://doi.org/10.1007/978-3-319-43920-4

Le Borgne, C., & Tisdall, E. (2017). Children’s participation: Questioning competence and competencies? Social Inclusion, 5(3), 122–130. https://doi.org/10.17645/si.v5i3.986

Nylund, A. (2020). Children’s right to participate on decision-making in Norway: Paternalism and autonomy. In T. Haugli, A. Nylund, R. Sigursden, & L. R. L. Bendiksen (Eds.), Children’s constitutional rights in the Nordic countries. Stockholm Studies in Child Law and Children’s Rights, 5 (pp. 201–224). Koninklijke Brill. https://doi.org/10.1163/9789004382817

Percy-Smith, B., & Thomas, N. (Eds.). (2009). A handbook of children and young people’s participation: Perspectives from theory and practice. Routledge.

Royal Commission into Institutional Responses to Child Sexual Abuse. (2017). The final report: Making institutions child safe (Vol. 6). https://www.childabuseroyalcommission.gov.au/

Salveron, M., Finan, S., & Bromfield, L. (2013). “Why wait?”: Engaging with children and young people in child protection research to inform practice. Developing Practice: The Child, Youth and Family Work Journal, 37, 24–34.
Shier, H. (2001). Pathways to participation: Openings, opportunities and obligations. *Children & Society*, 15(2), 107–117. https://doi.org/10.1002/chi.617

Shier, H. (2013). Reconsidering “pathways to participation”. Harry Shier Centre for Children’s Rights, Queen’s University Belfast. http://www.harryshier.net/powerpoints/Shier-2013-sweden_pathways.pdf

Smallbone, S., Marshall, W., & Wortley, R. (2008). *Preventing child sexual abuse: Evidence, policy and practice*. Willan.

Smith, J., Flowers, P., & Larkin, M. (2009). *Interpretative phenomenological analysis: Theory, method, and research*. Sage.

Steier, F., Brown, J., & Mesquita da Silva, F. (2015). The world cafe in action research settings. In H. Bradbury (Ed.), *The SAGE handbook of action research* (3rd ed., pp. 211–219). Sage.

United Nations. (1989). *Convention on the Rights of the Child*. http://www.ohchr.org/EN/ProfessionalInterest/Pages/CRC.aspx

Valentine, L., Katz, I., Smyth, C., Bent, C., Rinaldis, S., Wade, C., & Albers, B. (2016). *Key elements of child safe organisations – Research study*. Royal Commission into Institutional Responses to Child Sexual Abuse. https://www.childabuseroyalcommission.gov.au/sites/default/files/file-list/research_report_-_key_elements_of_child_safe_organisations_research_study_-_prevention.pdf

Wall, J. (2019). From childhood studies to childism: Reconstructing the scholarly and social imaginations. *Children’s Geographies*. Advance online publication. https://doi.org/10.1080/14733285.2019.1668912

Woodman, E., Roche, S., Mcarthur, M., & Moore, T. (2018). Child protection practitioners: Including children in decision making. *Child & Family Social Work*, 23(3), 475–484. https://doi.org/10.1111/cfs.12439