Title page

Title: Changing user-perspectives in a changing organization of casework for families at risk

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Changing user-perspectives in a changing organization of casework for families at risk

Casework with families at risk is central to modern welfare organizations, especially in view of the professional challenge involved in knowingly changing the life circumstances and development of families at risk.

The aim of this article is to present and discuss how two different types of organization (Model One and Model Two) can create two qualitatively different outlooks for families at risk. Qualitative interviews with 30 families at risk form the empirical basis for this article. These data have been subjected to a thematic analysis. The study is placed within a Developmental Evaluation methodology.

Through the voices of families at risk, we learn that, due to the specialization, the systems are blind to the complexity of the social problems and situations that surround families at risk. The organization of our systems of support influences whether the families experience the opportunity of having authority over and influence on their lives as well as a sense of dignity.

There is great learning potential within the field of practice as well as within research in giving voice to families at risk - before, during and after we try to help them.

Key words: Families at risk, social work, specialization, organization, user perspective, qualitative research
Introduction

In Denmark, approximately 15% of the entire child population in Denmark are considered at risk (Ottosen et al., 2010: 2014), and the number of children placed in out-of-home care has been relatively stable in the last 40 years (Hestbæk, 2011). Parents’ long-term unemployment (as well as other significant risk factors) coincide with children’s failure to thrive, i.e., they either receive preventive measures or are placed in out-of-home care (Jensen, 2007; Nygaard Christoffersen, 1996; 1999). Consequently, the remaining challenge in Denmark is how to help children and families at risk in a successful.

The diversity in problems related to children and families at risk and unemployment is substantial. In order to respond to this diversity, in Denmark, the municipalities are organised in highly specialised sectors. The specialisation is based on the idea of one specialised caseworker per problem. This means that in a family struggling with unemployment as well as children’s failure to thrive, each adult are assigned one or more caseworker(s) from the relevant departments specialised in unemployment, financial assistance or child protection. At the same time, the individual family member and the family as a whole will most likely also be assigned additional professionals related to the initiatives launched by the different municipal departments. It is not unrealistic for a family of four to be assigned 10 different professionals from the municipality. At the same time, collaboration is weak, leaving the families at risk with multiple professionals with differing plans of actions.
In order to address these challenges, one Danish municipality has launched an initiative specifically targeting families assigned to both the department of employment and that of child protection. It is an organizational change where the number of caseworkers per family is reduced from approximately four or five to one. The purpose of this initiative is to simplify collaboration between municipality and family. The idea is to create an easier access to support, a closer collaboration between family and caseworker - and thereby ultimately addressing the challenges created by a specialised system of support.

The aim of this empirical article is to explore how families at risk experience the two different types of organization. The point is not to present ‘a before and after picture’. The point is to illustrate that the organization of our systems of support – and thereby the settings the individual caseworkers operate within – create two qualitatively different outlooks for the families at risk.

**Specialisation and User-perspective**

This article focuses on specialization in social work as well as the voices of families at risk. In the literature there are several interesting perspectives on both topics.
Specialization and outcome of child protective services

Specialization in social work has advantages and disadvantages (Blom, 2004). Individuals with well-defined problems will benefit from specialization. On the contrary, and especially within human services organizations such as child protection services, generalist skills and services are needed because of the nature and complexity of the problems. Families with a complex set of challenges meet many different professionals who are to solve different aspects and part of these challenges – and often that brings about challenges in collaboration. Providing a specialized skilled casework coincides with blind spots in service delivery where it is increasingly difficult for the caseworker to understand and act upon the problems of the family in a holistic manner. Interventions are more often organized according to the structure of the organization as opposed to the need of the service user.

When it comes to outcome, there is a positive correlation between outcome of child protection work and relationship between family and caseworker (Lee & Ayón, 2004; Gladstone et al., 2012). A high score on relationship correlates significantly with better outcome in discipline/persistence in parenting and emotional care. The longer the intervention the greater possibility of positive outcome (Bagdasaryan, 2004). Effective practice exist when the social worker understand her/his role; when the approach focuses on the families rather than the social workers definition of problems; where prosocial behavior
in families are encouraged; sufficient confrontations initiated and a collaborative relationship between family and social worker is developed (Trotter, 2002). When the social worker exhibits this approach better outcome is detected. In addition, when the social worker believes in progress, families are more content with the outcome and cases are more likely closed 16 months later.

When interventions are well planned the collaboration between family and social worker is better and the compliance stronger. Compliance again correlates with fewer notifications on abuse and fewer incidences of abuse (Little, 2001). In addition, a collaborative relationship with the use of specific casework skills will significantly enhance engagement in families and positive outcome on child welfare interventions (Gladstone et al., 2014).

*The voices of families at risk*

It has not been tradition for human services organizations to collect data on satisfaction from their service users (Baker, 2007) which means that for most organizations such knowledge is not present or used when organizing the services. In effective family preservation programs, families identify specific relational skills in social worker ability to create a caring and developing environment for the family and to create family engagement and change as well as making it easier for the family to accept help and to run the risk of trying to create change (Gockel, Russell & Harris, 2008). The
quality of the relationship between family and social worker is of great importance according to the families (Ribner & Knei-Paz, 2002). Different factors define the quality of a good relationship such as caring; close; providing the family with a sense of equality and the opportunity to be direct between one another. Others also define the social worker being genuine; empathic; listening; non-judgmental; accepting; providing exceptional help (Maiter, Palmer & Manji, 2006); appreciating; respecting; supporting as well as effective response to the needs of both children and parents (Gockel, Russell & Harris, 2008; Fernandez, 2004) as important factors in a productive relationship between social worker and family.

Of more contextual factors, the families identify accessibility of the social worker (Chapman et al., 2003; Fernandez, 2004) and help proceeding in the home as significant factors (Fernandez, 2004). Less than two social workers; consistency in social workers; more recent contact as well as fast and adequate help are associated with a higher quality in relationship between family and social worker (Chapman et al., 2003).

Furthermore, the social worker’s assessment of the family’s willingness to collaborate is associated with better quality in family assessment of the helping relationship. The family need to experience the help as relevant and in accordance with their needs; fast and delivered in a way that makes the families feel part of the help (Chapman et al., 2003). The way the family experiences the social worker exercise power is the primary influence on how the parents see the intervention and how they react to it. Either parents experience
power as exercised over them or as being used to their advantage. The parents have three responses: One is to fight, another is to play along and a third is to truly collaborate (Dumbrell, 2005). Thereby, families spend a lot of effort and strength on relating to the professionals and the power within the helping relationship (Uggerhøj, 2004).

Unfortunately, families describe positive experiences with social services in contrast to a long history of disappointments; feeling put down and rejected (Maiter, Palmer & Manji, 2006). Former experiences with social services are accounted for as traumatizing, demoralizing and stigmatizing which makes the families reluctant to collaborate and engage (Gockel, Russell & Harris, 2008)

**Organizational Alignment and Human Agency**

For this article, theoretical perspectives on organizational alignment (Semler, 1997; Quiros, 2009; Chan, 2002) and Human Agency (Bandura, 1982; 1997; 2006) are relevant.

As mentioned earlier, the public sector in Denmark handles a variety of services directed at unemployment and children and families at risk. The social issues often imply specialized tasks, handled by the different professionals involved with different tasks and authority. Around these social issues and the specialized tasks, complex organizations emerge. Therefore, human services organizations may be characterized as complex organizations with interactions between highly skilled and specialized professionals with a large diversity and number of problems to be addressed.
Alignment is a concept mirroring the complexity of an organization (Chan, 2002). Organizational alignment describes the degree to which the organizational design, strategy and culture are cooperating to achieve shared goals (Semler, 1997). There are great potentials in organizational alignment (Quiros, 2009). Seeing as an organization often has multiple goals, there can be alignment in relations to certain goals but not in relation to other goals.

Human agency is a theoretical perspective where human development is more than genetics and life circumstances. The family is actively and consciously able to affect their lives (Bandura, 2006) and when they succeed in being more agent in their own lives the greater the chance of resiliency to occur (Rutter, 2012a; 2012b). Human agency and resilience links closely to self-efficacy because self-efficacy is one of the most salient resiliency factors (Rutter, 2012a; 2012b). Self-efficacy a generative ability to integrate cognitive, social and behavioural components into a pattern of behaviour with multiple purposes in diverging situations (Bandura, 1982).

**Methodology**

Methodologically, the overall study operates within the tradition of Developmental Evaluation (Patton, 2011; 1994). Within this tradition, the researcher interacts with the field of study with a purpose of supporting an improvement and development. The focus is twofold. One is to secure clear criteria for evaluation, in collaboration with the field of
study. The other is to secure a developmental focus through a design of feedback processes and systems which inform the developmental process (Patton, 1994). The purpose is to support the motion from assumption to knowledge as well as the use of research directly applied in the field of study. The role of the researcher is to create a close collaborative relationship with the field of study as well as present evaluative data to support the shared goal of development (Patton, 2011).

Setting

The study was conducted in one of the 98 Danish municipalities. Ordinarily the municipalities are organised in different departments such as, but not exclusively, one related to employment and one to child protection. The caseworkers in these departments are usually trained social workers with an educational level equivalent to a bachelor’s degree.

Unemployed adults 18+ have a right to unemployment benefits in return for different obligations regulated by the municipal employment department. Any initiative from the employment department focuses on securing future employment or education for the currently unemployed.

As for child protection, the department gets involved when concerns are raised about a child, its well-being and development either by parents, teachers, neighbours or other people in contact with child or family. The municipal child protection department will
contact the child’s parents and an inquiry will be launched as to uncover whether the child and/or family may be in need of some kind of support.

The department of employment and that of child protection are regulated by different legislation, organized in different sectors and do not intersect in any way from that perspective.

*The new organization of casework*

Re-configuration in organizations is about changing the structure of the organization (Par- ton, 1996; 2006). In a Human Services Organizations, this could mean re-structuring the way a profession carries out its tasks. In this new organization of casework the department of employment and the department of child protection are working as one, thus ensuring that the users’ situation is perceived from a number of different perspectives and thereby more holistically. This re-configuration is made from what we have labelled a Model One organization to a Model two organization where the number of caseworkers per family is downscaled from four or more to one. See illustration A and B.

A single caseworker is responsible for the employment situation as well as the family situation and on top of that for coordinating with all other professionals involved in the specific family. The single caseworker has more time to collaborate with the specific family, as they are each responsible for approximately eight families. With more time, the single caseworker has better opportunities for forming relationships with the family
as well as for responding to changes in a situation more appropriately in accordance with
the greater knowledge of the family situation. The single caseworker is also more access-
sible to the families by phone, text and email.

The target group for the project consists of 30 families with one to five children. 32 fam-
ilies were enrolled initially but for different reasons such as voluntary move to another
municipality, they stopped participation in the project.

The parents are between 22 and 44 years old, the main part being in their thirties. The
parents are living together, having the sole parental responsibility or found new partners.

The parents are characterised by being unemployed and in addition approximately half of
them are diagnosed with one or several mental illnesses. About a fourth of the parents
have finished some kind of education, for example as nursing assistant.

Typically, concerns have been expressed for the well-being of the children and their fail-
ure to thrive which is why they are a part of child protection services. They may for in-
stance have difficulties keeping up at school and making friends.

One example of a target group family is a 36-year-old mother of three children aged six,
seven and nine years. The family also consists of the mother’s 29-year-old boyfriend. The
mother is diagnosed with an eating disorder, a social anxiety disorder with catastrophic
thoughts and a personality disorder. She does not leave her home except for job training
one hour twice a week cutting fruit for schoolchildren. She cannot remember whether she
has finished 9th or 10th grade of the primary and lower secondary school. The mother describes how her oldest child sees everything in black and white; the middle child is always involved in conflicts and has a very poor memory. Different family therapists have been coming to the home for at least seven years. They help the mother with planning her time; doing her laundry, attending meetings at school with the child protection services or the psychiatric system as well as how to parent her children.

_data set_

The dataset consists of two interviews with the 30 families: 30 qualitative interviews on Model One organization and 30 qualitative interviews on Model Two organization. The Model One and The Model Two interviews were conducted approximately eight months apart which means that the families had been part of the Model two organization approximately eight or nine months at the time of the follow-up interviews.

The purpose of the Model One interviews was to establish a user perspective on experiences with the different municipal departments as well as the coherence among the departments up until the families enter the Model Two organization as well as other relevant family history information. The Model One interviews lasted between one hour and one and a half hours.
The purpose of the Model Two interviews was to get a qualitative user perspective on how the families experience this change in organization of casework. The Model two interviews lasted approximately fifteen minutes.

The follow up interviews are noticeably shorter time wise because they only contain questions about changes whereas the baseline interviews contain more detailed information on the family; their history and other information relevant to the larger study.

*Analytical approach*

The Model One interview data consist of structured qualitative interviews with the parents. The data have been processed on the basis of a thematic analysis, where phase one focuses on getting familiar with data and phase two on generating initial codes. Phases three, four and five revolve around searching, reviewing, defining and naming themes (Braun & Clarke, 2006).

The interviews were audio recorded followed by a thorough listening and transcribing consistent with phase 1 in thematic analysis. In accordance with phase two, the data were then coded and displayed using matrices. The initial coding and matrices were related to the themes in the interview guide as well as the description of the project.

Data displays through matrices (Miles, Huberman and Saladaña, 2014) have functioned as a catalyst for the thematic analysis.
From these new matrices, a picture emerged of themes and they will be presented in the findings. This process was consistent with phases three, four and five in thematic analysis.

The same analytical strategy was applied in the Model Two interviews.

**Findings**

In the following, significant findings will be presented. First, the Model one interview data will be used to present how the parents define good support and how it can get better as well as their perception of the coherence between the municipal departments of employment and child protection, respectively. Second, based on the Model Two interviews, we will present user-perspectives on accessibility, outlook, agency and dignity in relations to the support they receive.

**Model One: Specialization**

Regarding the Model One organization, several parents indicate that they do not feel part of collaboration with their caseworkers. Instead, they have the experience of not being included in decisions regarding their own situation that is, getting little or no opportunity to have impact on decisions made on their behalf. This experience also becomes evident in something as simple as contact. The parents are most often unable to get in touch with their caseworkers and leaving a message has no effect.
‘You can call, you can leave a message, you’ll never hear a damn thing back.’

Not being able to reach a caseworker or experiencing not being involved in the work carried out in relation to their own situation seem both to have an effect on how they think the caseworkers perceive them and on how they perceive themselves.

‘I’m only human, so I would appreciate if they treated me as a human being. I’m just some kind of filth living out here. ... Sometimes I feel like a trash can.’

As the parents reflect on reasons as to why the caseworkers treat them in this manner, their chain of reasoning reveals that they perceive the caseworkers more like representatives of the organisation, the municipality, rather than fellow human beings.

‘Of course the municipality has regulations and not feelings. The municipality could have more feelings’.

In this perspective, it becomes clear that a relationship between family and caseworkers is close to impossible. The families do not perceive the caseworker as a person with emotions and thus within reach of a mutual relationship. At the same time, the families experience that the caseworkers perceive them as something less than human thereby also rendering impossible any kind of relationship.
**Model One: Lack of collaboration between the municipal departments**

The interviews regarding the Model One Organization show that the parents’ perception and experience of consistency between the different departments depend on how well they collaborate and coordinate. A few parents express that this collaboration is working well but their answers reveal that it is not as positive as first expressed.

‘They all talk with each other. However, many of them do not talk with her the financial one’

Even though the professionals try to collaborate and coordinate, they may not include all professionals, and coordination may be difficult between meetings. One pair of parents describe a well-functioning collaboration and coordination between the different professionals.

‘They call each other and then I do not have to call them one at the time to say “it’s like this now” and “I have talked to him and her”. After they have begun, after we have given permission for them to work together, then it seems so easy, then we do not have to tell everything three times to a third person. It has become easier and it goes faster’

Here, it is worth noticing that, from the parents’ perspective, they made collaboration happen through their consent. In addition, it is also clear that the parents do not play a major role when information is exchanged between professionals. When parents perceive
that collaboration across departments is well functioning, they become a sort of bystanders to decisions made about their own life.

In cases where the above-mentioned parents were not involved, they had at least a sure knowledge about exchanges between different departments, which they had also consented to. For other parents, giving consent or being part of the collaboration does not even seem to have occurred or something the parents have been made aware of.

‘Sometimes they do talk to each other, but I have heard little about it’

So, even though the parents do not object to the collaboration they are not involved and they do not quite know what is actually going on.

For the majority of families, however, collaboration, coordination and consistency are non-existent. Some families are unaware whether the different departments communicate as they have never heard anything about it.

‘I do not feel that they talk together at all. I have no idea if they do because it is not something you see’

For other families, it is clear that there is no collaboration or coordination between departments, as their different efforts have difficulties coexisting. It then becomes the parents’ struggle to mingle the different efforts into coexisting in order for the families’ life to have some kind of consistency.
Finally, four families describe that they are left with the responsibility for the communication between the different departments that furthermore often contradict each other.

‘They [the different departments] do not function together. They counteract, a lot ... then the handicap department says you have to call the employment department and they say I have to call the handicap department, so we are just completely in a jam. And they misunderstand each other. If I have gotten a message from the handicap department, and then I have been told something different from the employment department and then I have to communicate it on and then it completely goes haywire’.

Model Two: Caseworker as a liaison worker

In the following, selected themes from the Model Two Organization are presented.

First, having only one caseworker means availability and accessibility. The families describe that their caseworker is more easily accessible through several different measures such as phone calls, texting, emails and meetings. Furthermore, the caseworker has access to any additional help, the family might need. So, when the caseworker is more easily accessible, any additional help becomes easier to access as well.

‘This project is the best thing because I only have to call one person if anything happens (...) I don’t have to go through two departments, I don’t have
to call one person and then be told that she’s not the person I am supposed to talk to, it’s someone else and... but I don’t call unless it is necessary... it is easier now, because I have one particular person I call. And if it isn’t her area of expertise, she will figure it out and get back to me.’

In addition, this comprehensive one-entry organization of support gives back agency to the families because now they don’t have to wait for weeks for an answer or filling out endless forms and paperwork, they can take action against the challenges they meet.

‘It is the best initiative the municipality has taken so far. It is natural that if first I have to call one person, and I am being patched through to the next one and the third one and they all have to talk to each other and then I have to fill out a lot of forms, well then, I give up.’

Having only one caseworker also provides the families with the possibility of relating to fewer professionals. The families are used to having many different professionals from different departments in their lives and in their homes. Having just one caseworker with authority in their lives has a positive effect on their perception of the help they receive.

Furthermore, by having only one caseworker, the families experience that they are seen in their context, and thereby in a more holistic manner. The families have known all along that occupational life and family life interlink. Now, they experience that their caseworker knows it too and they can see it in her actions. These experiences of being seen and understood in one’s context bring about dignity because the families do not have to defend,
explain or beg for things such as taking the day off (from mandatory occupational training) to participate in an activity day that the entire family could benefit from.

‘My caseworker is much more understanding if we have a problem and we need to take the day off. Because this week, there was an activity day for families, and I asked if I could take the day off to participate, because otherwise I wouldn’t be able to and.. my caseworker said of course, just do that. I wasn’t to worry about it. That was really… usually this would be a thing that I would have to plea and beg for’

Second, having only one caseworker influences the quality of the relationship between family and caseworker. The families describe a qualitative difference in their perception of the municipality. They feel that the municipality becomes a person and when that happens, they too become persons, in the sense that their caseworker knows the family in a way that is personally relevant to them. The collaboration itself becomes relevant for the family because they are no longer “a number in line” or “a case” in the municipality. They become persons as well. One family says:

‘The greatest thing is that now, they listen, they understand and they think about my problems and help me - as opposed to viewing me as a case, they see me as a person.’

A significant part of being acknowledged and appreciated for who they are as persons and as a family is the opportunity to influence how their problems are comprehended and
how they are resolved. The families describe that they themselves set the goals and this has a significant impact on the quality of the collaborative relationship with the caseworker and is experienced as meaningful. One family says:

‘And also perhaps the goals that we are working with now. They are our goals and not goals that have been set up for us by others. As a result, we are opening up now, and it is so much easier for us to see meaning in things now.’

Last, but not least, the families express that they experience positive collaboration, communication and interaction between the professionals involved in the family.

‘There’s interaction between all of them. In relation to earlier, where you would feel that one person was here and then the next. Now, everything is more unified, like on a string, that everyone is communicating with everyone. And if something comes up, they talk to each other’

Discussion

The findings show how the Model One organization and the Model Two organization create two qualitative outlooks for families at risk. In Model One organization, most families experienced difficulties collaborating with their caseworkers. In addition, collaboration and coordination between departments were either non-existent or the parents felt it
their responsibility to make collaboration happen. The families did not perceive the caseworker as a person with emotions and thus within reach of a relationship. At the same time, the families experienced that the caseworker perceived them as something less than human, thereby also rendering any kind of relationship or collaboration impossible. The Model One organization negatively affected the way they perceived themselves.

In Model Two organization, the families emphasise that having just one caseworker to relate to is important for the collaborative relationship as well as outlook for the families. The municipality is no longer ‘a something’, but ‘a someone’, which makes a relation possible. The families feel that they have a caseworker who actually understands that occupation and family life intertwine; they feel acknowledged and appreciated for who they are as persons and as a family and that the help they receive is personally relevant. As a result, the families feel they have regained their dignity because they do not have to defend, explain or beg. This also provides the families with a sense of agency because the families are able to influence the understanding of how their problems and how they are to be resolved. Finally, the families experience that the professionals involved are communicating and interacting with each other.

The experiences of the families in the current study confirms the general picture within the existing literature in relations to important factors such as accessibility and a caring and positive relationship between caseworker and family. However, the findings also bring about insights into how parents perceive themselves and their possibility to act and
the connection to specialization (Model One) and generalist liaison approach and organization (Model Two)

When understanding the families’ perspective on these two models of organization through the theoretical glasses of organizational alignment and agency interesting aspects occur.

First, in relation to organizational perspectives of alignment and reconfiguration, these organizational structures of casework in a Human Services organization between Model One and Model two organizations can be seen as a matter of multiple goals (service to users with well defined problems as well as service to users with complex problems) where alignment and misalignment co-exist. It is easy to imagine an organization with multiple goals and alignment in structure and design in relations to certain goals but not in relation to others. If one goal is to have specialized services directed at the many specialized needs of families at risk that can be applied individually and that are aligned within the organization, then the design and strategy match the goal, and the organization is in alignment. However, if the ultimate goal of a Human Services organization is to create a system of support that is easily accessible for the family at risk, and that is comprehensible in structure for the user as well as a system that sees and understands the complexity in needs of the users, then the Model One organization is misaligned. This is an organizational dilemma because there seems to be a mismatch between the goal of a highly specialized Model One organization and the ultimate goal of a Human Services
organization to support and assist families at risk. There seems to be a mismatch between what the organization “thinks” is the best way to organize the support (Model One) and the way the families experience support as meaningful and helpful (Model Two). In other words: the Model One organization is aligned with specialization and well defined problems (Blom, 2004) and misaligned with families at risk with complex problems. The Model Two organization is aligned with families at risk with complex problems. Both models of organization have great impact on the mind-sets of the families at risk – toward collaboration with the municipality as a whole as well as how the families perceive themselves and their options to act upon the challenges they meet.

Second, in relation to Agency, the fact that the families in the Model Two organization have one caseworker who sees, understands and acts accordingly is substantial in the way they experience the collaboration with ‘the system’ and the help in itself as well as a significant impact on their general well-being. The Model Two organization places the families in a different state of mind. The families express an experience of being able to act on their own behalf when they meet a challenge because part of the help they need to act is now available to them within a realistic timeframe. At the same time, they experience that their caseworker, through a holistic perspective, understands why that particular help is necessary. It is, in part, a small step towards building the self-efficacy (Bandura, 1982; 2006) of the family’s adult individuals and the family as a whole. An important
part of self-efficacy is to create coherence and meaning, and this is exactly what the families have experienced through the Model Two organization. The knowledge and relationship shared between caseworker and family provide the families with an experience that the caseworker sees and understands the connectedness between family life and employment ability – and now the caseworker acts accordingly. If these families are to move away from being at risk, there is a need to work effectively with self-efficacy and thereby ability to act on the challenges that they meet in life – in relation to family life as well as occupation. In time, there is a chance that these experiences in taking action will generalize in relation to other situations in their life. This is a first step towards developing human agency and self-efficacy where families learn to respond cognitively, emotionally and socially adequate to the challenges they meet.

The fact that the families have started to see the sense in collaborating with the municipal caseworker is in itself remarkable and paradoxical. A system, set up only to help and support people in need, is in Model Two organization correspondingly being experienced as such. In the experience of the families, the Model One organization provides very little knowledge of the person of interest and the family situation as a whole. The way the systems work individually, and the lack of collaboration between the different departments, makes them pacifying and de-personalizing for the families just as the Model One organization lacks a holistic understanding of the complexity of the lives of these families. In addition, due to the specialization, the systems are blind to the complexity of the social
problems and situations that surround these families at risk. Even though, it is the exact opposite goal of the system. It is a paradox that the systems of support (Model One organization) are pacifying families at risk – making them feel as bystanders in decision-making - when in reality systems are created to help and support children and families – and thereby increase the likelihood that they act rather than give up. The fact that the families in Model Two organization express a prospect to act upon the challenges they face is noteworthy in the light of a human agency perspective (Bandura, 1982; 1997; 2006).

**Conclusion**

The great learning potential in the field of practice as well as in research lies in giving voice to the families at risk - before, during and after we try to help them. Through the voices of families at risk, we have demonstrated how one kind of highly specialized organization can become blind to the complexity of the social problems that surround families at risk and make the families feel worthless. At the same time, we have demonstrated how a more simple organization can offer the families the opportunity to learn to act upon the challenges they face as well as a sense of dignity they have not experienced for years in their encounter with the systems of support. Maybe, the perspectives of the families at risk can provide a significant part of the answers we need to create more effective systems of support.
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