

C-Change Capacity to Change Assessment Manual

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Sample chapter (pre-publication draft)

Chapter Eight, The Back Story and other Academic Stuff

Where a child has been abused or is suffering harm in a family context, the parents' potential to address the identified problems is critical to that child's future well-being. However, methods of assessing a parent's capacity to engage with services, and to change their behaviour for the benefit of their children, are underdeveloped in social work in the UK. Here we present a brief overview of the background to the C-Change assessment, and we show how the methods relate to the theoretical, research and policy base. We conclude with a summary of results from our evaluation of the approach.

Practice dilemmas and children's vulnerabilities

The focus of this handbook, the capacity of parents to change their behaviour where there are risks to the children, lies at the heart of significant tensions in social work practice. When working with abused and neglected children, social workers are expected, on the one hand, to support them to remain in the care of their own parents if it is safe to do so. On the other hand, they must initiate action if the child would be unsafe remaining in his or her parents' care. To keep a child in his or her own family safely, it is necessary for the parents to be engaged with services, and to work towards overcoming whatever problems led to the children being at risk in the first instance. However, there have been a number of children's deaths from abuse or neglect where social workers seem to have over-estimated parents' co-operation, or have taken an over-optimistic approach ⁷². The high profile case of Baby Peter ⁷³ provides an example of the risks of over-estimating parental engagement; and over-optimism about changes parents are making was highlighted in the case of Child K ⁷⁴. Problems of engagement and capacity to change are similarly evident in the research literature. Harder ⁷⁵, for example, showed that parents who exhibited more 'resistance' were more likely to re-abuse their children. And Brandon et al ⁷², in their analysis of reviews

into child deaths, also found that a lack of parental engagement was linked to recurring abuse.

In most helping processes related to individual psychological and social problems, there are two aspects of particular importance, engagement of the therapist with the client, and the processes of change needed to address the problem^{43 76}. The underlying dilemma is that, in the context of social work with vulnerable children, engagement with the parents is fundamental to working towards change, but, where parents are unable to achieve changes in their behaviour, engaging them with services risks masking that lack of progress. A study by Ward and colleagues confirms one implication of this, that social workers may sometimes mistake superficial engagement by parents for a genuine desire to change²⁴.

There is growing research evidence that parental co-operation makes a significant contribution to decisions regarding coercive actions, such as taking children into care, initiating child protection investigations, or placing children on a child protection plan⁷⁷⁻⁸¹. This relationship, however, is not one-dimensional. A lack of parental co-operation may make care proceedings more likely in many cases, but there are also instances of the opposite effect. There are occasions where lack of engagement by parents with services means that the information available to social workers is so limited that the evidence would not be sufficient for legal action^{80 82}. For this manual, our argument is that better practitioner understanding of engagement and change ought, in principle, to help maintain the focus of practice on the welfare of the child, enable more objective exploration of the parents' abilities to meet their child's needs in the future, and thereby lead to better decision-making.

The legal and policy environment

At both policy level, and amongst the judiciary, there is growing support for the development of practice in this area. A recent set of developments, were initiated following an Appeal Court ruling in the case of *Re B-S (Children) (Adoption Order: Leave to Oppose)* [2013] EWCA Civ 1146, which drew on a number of other relevant judgments, and highlighted the requirements for good analysis in social work assessments. It also emphasised that the court's assessment of the parents' capacity to care for the child should include an analysis of the support available to them to do so. The implication of this is that the parents' response to that support should be assessed, in terms of achieving changes that would improve the welfare of the children, so that they can remain in, or be returned to their parents' care.

A revision of the Public Law Outline, providing guidance on care proceedings and pre-proceedings work in England^{3 4}, was introduced in 2014, and is supported by the provisions of the Children and Families Act 2014. Included under these provisions is a 26 week time limit for the completion of Care Proceedings, and an expectation that careful and focused work needs to be undertaken prior to initiating proceedings, to ensure that cases can be

completed without delay. The Public Law Outline not only gives detailed guidance regarding the timely management of proceedings, but also includes the requirement, where possible, for local authorities to issue to parents a letter before proceedings. This letter, in effect, warns the parents that Care Proceedings are being considered, and gives them the opportunity to make specified improvements aimed at securing the welfare of the child(ren), thus, if successful, avoiding the need for subsequent court action. Further details about the Pre-proceedings Process are included in the Department for Education statutory guidance on court orders and pre-proceedings ⁴.

The letter before proceedings provides an obvious, and formalised, opportunity to build in to practice an assessment of the parents' capacities to change. However this assessment is managed, the courts now also require a more analytical approach to report writing, (as indicated above, following *Re B-S*). The C-Change assessment aims to support the necessary analysis in court statements. At national level, a proforma developed by CAFCASS and the ADCS (and endorsed by the President of the Family Law Division) includes the expectation that social workers analyse any gaps in the parents' capabilities, and whether these can be overcome within the timetable for the child ⁸³.

Interest amongst policy makers led recently to the Department for Education commissioning a review of research evidence related to parental capacity to change when children are on the edge of care ¹⁹. They have also funded research into improving practice in returning children home from the care system, including the development and testing of practice guidance by the NSPCC and University of Bristol ⁸⁴. The direction of policy in relation to reunification appears to involve ensuring that assessments take place prior to returning a child, and that they take account of whether improvements made by the parents are sufficient to ensure the child's safety.

Development of a practice model

Moving from the policy to the practice context, our starting point is linked to previous work on social work assessment ⁸⁵, which identified some particular features of practice that are important for the present context. A holistic assessment of the child's needs, parent's capacities and family/environmental factors is fundamental. Such an assessment should lead to an identification of the priority aspects of parenting that need to be addressed, in the individual case, to ensure the child is safeguarded. This clarity about target problems, which should be based in sound analysis, will provide the starting point for assessing a parent's capacity to change. Identifying target problems enables the parents' capacities to change their behaviour to be assessed in relation to meeting the particular needs of their particular child.

Evidence for the approach proposed in this manual was drawn from (i) an international review of literature in the child welfare and associated fields, focused on parental engagement and readiness to change ⁵; (ii) a detailed examination of the recent UK based

review commissioned by the Department for Education ¹⁹; (iii) a review of frameworks of theoretical models of behaviour change, and (iv) a review of standardised tools relevant to the context.

Central to this was the work on theories of behaviour change. There is a large number of such theories, and our work aimed to identify categorisations of key factors affecting behaviour change rather than to review all theoretical models. Because of the variety of individual difficulties presented by parents involved with social work services, we were seeking an integrated, or ecological, framework that drew upon a range of relevant theoretical models. Not only would such a framework present a range of factors worthy of assessment by social workers in individual cases, but it would also support existing strengths within the profession, where assessment using an ecological framework is accepted as a fundamental aspect of practice.

Our examination of the available material led to a number of conclusions. Our overview of a range of research studies suggested that the most comprehensive picture of engagement and readiness to change was achieved in those studies that included data on factors affecting engagement and change (barriers and facilitators), as well as data drawn from observable actions such as actual engagement or actual changes in behaviour. Studies that considered one aspect or the other aspect of these sources of data can be shown to present a more partial picture than studies that cover both. This insight was reflected in our conceptual model of engagement ⁵, and is now incorporated as one of the fundamental principles of the present approach to assessment. Our position is that social workers, in making their assessments, should **both** examine the factors affecting capacity to change, **and** observe the effects of parents being offered supported opportunities to make actual changes.

This position is backed up further by two other key findings from relevant research. The first is the importance of utilising more than one method in assessing parenting ⁸⁵. Our approach does just that. The second is the widespread evidence that enabling people (in this instance, parents) to undergo a process of change requires an approach whereby their voices are heard, and they are involved actively. Our model engages the worker in understanding the parents' positions, albeit within a framework of constraints that are intended to ensure the safety of the child.

Barriers to and facilitators of change

Models of behaviour change were a significant source of information for the method of assessing barriers to and facilitators of change. An important line of development in identifying and categorising key factors affecting behaviour change can be traced back to a workshop organised by the National Institute of Mental Health in the United States in 1991. The workshop brought together a group of behaviour change theorists from different theoretical traditions, who, despite theoretical differences, were able to agree on a

framework of factors influencing behaviour and behaviour change ⁸⁶. This framework has been influential in relation to further academic developments, including the Unified Theory of Behaviour ⁷, the Theoretical Domains Framework ^{8,9}, and subsequent work by Fishbein and colleagues ⁸⁷.

The Theoretical Domains Framework is of interest because it arises from several decades of research on behavioural change interventions, many of them in the health promotion field ⁹. The Behaviour Change Wheel, and the Theoretical Domains Framework itself were developed from a review of 19 frameworks of behaviour change interventions, and an international collaboration of theorists and researchers which identified and subsequently validated key constructs in understanding factors affecting behaviour change ⁸. The constructs are thus based on a very considerable body of research and analysis. The Theoretical Domains Framework, as it stands currently, is comprised of 14 domains, located under three headings, capability, opportunity and motivation.

The Unified Theory of Behaviour ⁷ was helpful to us because their framework was adapted (slightly) ¹⁰ for work in New York with parents of children with mental health problems. It was evaluated in that context with positive results, although further evaluation would be desirable. Given its common theoretical roots, this framework maps very closely to the Theoretical Domains Framework.

In developing the current approach to assessing factors affecting behaviour change, we decided to use the Unified Theory of Behaviour as our basic framework, as it had been used successfully with a similar target group (i.e. parents with children experiencing mental health difficulties). We compared this framework to ensure consistency with other models in child welfare and related fields ^{5,18,88-90}, as well as with the Theoretical Domains Framework. The result was some slight adjustment to ensure adequate coverage of relevant constructs and is presented as the Barriers to and Facilitators of Change in this handbook. Consultation with social work colleagues during the preparation of the handbook also contributed to some refinements (without compromising theoretical integrity). Please refer to back to Chapters 3 & 4 for full details of the framework we adopted.

Regarding practice methods for assessing barriers and facilitators of change, we focused particularly on the types of routine questions social workers would need to ask to gain information on these factors in individual case. We also explored tools or measures which purported to explore a person's readiness for change or intent to engage with an aspect of the change process e.g. a form of treatment. We did a search for relevant material, and identified nine tools or measures, eight of which were in questionnaire format and one of which was a semi-structured interview that included rating questions related to different aspects of capacity to change. The content of these measures was mapped against the framework of barriers to and facilitators of change in order to explore their potential usefulness in practice. The tools had been developed in a variety of disciplines including health promotion, offending, substance misuse and child welfare services in the USA. Our analysis of the questions in the tools suggested that although no tool covered all aspects of

the factors affecting capacity to change as described in this model, the themes mapped well onto the factor concerning Motivation and Intention. All of the tools also included questions aiming to understand how relevant or how much of a Priority the behaviour change was for the respondent. Six of the tools included questions referring to another of the factors affecting change, namely contextual factors and those related to coercion, feelings about the working relationship and feelings about the intervention / treatment programme that was being offered. The majority of tools had been shown to be valid and reliable to a satisfactory level, but it was rare to find one that had been subject to full psychometric testing. This lack of psychometric testing appears to be a general feature of measures in the field of parenting assessment ⁴¹.

Assessment of Actual Change

With regard to assessment of actual changes achieved by parents, it is relatively commonplace for social workers to provide support or interventions to families as an opportunity to 'turn things around'. However, less well developed is the means of agreeing specific goals and of identifying whether and how those goals are achieved. Research, for example, in the context of reunification work has identified variable practice in relation to the purposefulness of planning, and in the handling of shortcomings in the achievement of planned goals by parents ^{91 92}. The practice need, thus, would appear to include further development of knowledge and skills in relation to setting objectives and goals, and in monitoring the outcomes of parents' attempts to change.

Our search for practice methods identified two current work developments ^{93 94} involving goal setting and the use of before and after measures. The work of Paul Harnett ¹ using goal attainment scaling is generating considerable interest in the UK and offers a tested approach which has potential credibility with social work practitioners. Consequently, we developed a format for specifying goals and levels of achievement based on Harnett's model.

With regard to the use of standardised tools to measure parents' behaviours at base-line and follow-up stages, we undertook a review of available tools that have been developed to measure behaviours that parents are often asked to change. The tools are therefore issue-specific, e.g. designed to measure alcohol or drug use, home conditions or parent-child relationships. We reviewed the individual questions of each tool to estimate their usability in social work practice in the UK by considering their clinical utility (i.e. acceptability of format), timescale and skills needed for completion and analysis, likelihood of providing clinically useful information and level of ease of use with parents ⁹⁵. Thereafter, pragmatically, we included only those tools that are readily available in the public domain and would be unlikely to present practitioners or organisations using them with problems of copyright or licensing.

Evaluation of the C-Change Assessment Method

The C-Change assessment model was evaluated as part of a pilot study in 2015. A total of 129 social workers, family support workers and social work managers participated in 2-day, or (managers only) 1-day training events on using the C-Change model. All participants were asked to implement the approach, either with their own cases or via supervision of others, and the effects were evaluated three months after the training. The research methods used were intentionally limited, given the pilot nature of the project. They aimed to provide data that would give a broad indication of the usability and effectiveness of the model in the practice context. Data were collected based on participants' reports of their reactions to the training, their views on how they had developed their knowledge and skills as a result, their impressions of whether C-Change had helped improve decision-making regarding children and families, and changes to their own self-reported approaches to capacity to change assessments. A 'before-and-after' approach to data collection was used where possible. The majority of the information was collected using survey methods, although a small number of qualitative interviews were held to explore participants' experiences in more detail (at three months after the training). Regarding the survey element, participants were asked to respond to questionnaires at three-time points: before the training (T1); immediately after the training (T2), and then three months after attending their training programme (T3).

The key findings were as follows.

1. The C-Change training was well-received. When giving feedback at the end of each training event, 73% of participants rated the training as meeting its objectives very well or fully. 86% expressed the view that the C-Change approach would lead to good or considerable improvements in assessments.
2. The C-Change materials were extensively used by participants. 45 respondents (85%, n=53) who attended the 2-day training events (mainly practitioners), and 7 respondents (64%, n=11) who attended the 1-day managers' training, reported that they had cases of their own or cases they supervised where they had been able to apply the C-Change methods in the first three months after the training. The extent to which the methods were applied varied, ranging from simple application of theoretical principles, to thorough incorporation of a range of materials into an assessment.
3. Participants completed a 'self-efficacy' style of scale, intended to measure their confidence in terms of knowledge and skills in assessing capacity to change. Reliability of this scale was shown to be high following Chronbach's Alpha tests

1. The scale was completed before the start of the training events, immediately after the training events, and at three-month follow-up, and the responses compared so as to identifying changes in self-efficacy ratings. Participants showed significant improvements in knowledge and skills in assessing capacity to change, both immediately following the training and after three months². This improvement was evident across all sub-scales, i.e. in relation to assessing barriers and facilitators of change, assessing actual changes in parenting behaviour, and linking the C-Change assessment with other relevant processes and procedures.
4. Participants were asked to identify their styles and approaches in relation to assessment, analysis and decision-making, both before the training, and at three-month follow-up. The project team considered it unlikely that more substantive changes of this kind would be detected after a period as short as three months. However, a measurable change was found in relation to one of the five decision-making areas covered in the questions. Significantly more participants (from the 2-day training events) indicated at three-month follow-up, that they were able to achieve decisions within the child's timeframe³, compared with their responses before the training.
5. Overall, 92% of respondents (from the 2-day training events), at the three-month follow-up point, considered that the C-Change approach had improved the quality of assessments to some degree. 44% rated this level of improvement as 'good' or 'considerable'.

The limitations of the evaluation were principally that responses to the questionnaires at three-month follow-up were 50% overall, whereas the questionnaires completed before, and immediately after the training achieved 100% coverage. Whilst 50% can be considered a very successful rate of return in pragmatic terms, it nevertheless means that much of the evaluation was based on 50% of the sample, and consequently there is the possibility of inadvertent sample bias. Additionally, data collection was based on subjective reporting from participants, and more objective measures such as observations of practice and file examinations, might deliver a more valid and reliable evaluation, particularly if they were part of a controlled comparison.

To summarise the evaluation results, the C-Change training was well-received. Good levels of implementation of the model were achieved within the three-month evaluation period. There were statistically significant improvements in participants' reported confidence across all the relevant knowledge and skill areas for the C-Change assessment. There was also evidence that the approach could help improve the quality of assessments and reduce delays in decision-making. Overall, our view is that the approach has very good potential, that its continued application will be worthwhile, and that further, more detailed evaluation would be helpful in developing the approach further. A comprehensive write-up of the

¹ Chronbach's Alpha = 0.900 (T1), 0.873 (T2), 0.949 (T3); n of items = 10.

² After three months, $t(46) = 3.907$, $p < .001$, $r = .25$

³ (McNemar-Bowker test) $\chi^2(2) = 7.451$, $p < .05$, $n = 48$.

evaluation will be published in an academic paper, and details will be made available on the C-Change website.

Summary

The package of materials presented in this manual, as a result of the work described above, is intended to support a coherent approach to the assessment of parental capacity to change. This assessment, we have proposed, has two essential components, the assessment of barriers to and facilitators of change, and the assessment of whether parents can make actual changes in reality. The approach offers a method of assessing barriers and facilitators to change, based on the Unified Theory of Behaviour⁷. The assessment of actual change is achieved using goal attainment scaling, and, where appropriate, standardised tools as before and after measures. Analysis of the assessment to estimate a parent's capacity to change is achieved by balancing the evidence from the two parts of the assessment. Then it is necessary to consider whether the parents' capacities to change outweigh the potential harm to the child.

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