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# Centre-Based Supervised Child-Parent Contact in Ireland: The Views and Experiences of Fathers, Supervisors and Key Stakeholders

E.Kiely, N. O' Sullivan & M.Tobin

## Abstract

The paper presents findings from a study of centre-based supervised child-parent contact. The purpose of the research was twofold; to ascertain the views and experiences of birth fathers on all aspects of the supervised child-parent contact they experienced in a centre; to find out from centre supervisors their views of engaging fathers and supervising contact, and from key stakeholders and referral agents (a community project worker, a child protection social worker, Guardian ad Litems, a family law solicitor) their perceptions of the supervised contact provision in the centre. Interviews with five fathers having supervised child-parent contact and three focus group discussions with seven staff members and six stakeholders were undertaken. While the study is exploratory, the findings show that gender is a feature meriting consideration in the supervised child parent contact setting; that child-centred values, family-centred values and the demands of operating the centre are held in tension so that the purpose and scope of supervised contact can be interpreted and experienced differently. While optimal supervised child parent contact is generally perceived as a short-term arrangement, there was some evidence of long-term service use, which was a significant issue for the fathers concerned. The fathers valued relationship based supervision practice to a greater extent than the supervisor and stakeholder participants, who put greater emphasis on skills required for supervision. Fathers expressed concerns about what they or their children can say or do during contact visits in view of how it may be observed, interpreted and reported. The findings suggest the need for a gender-sensitive approach in supervision practice; the value of a common framework for assessing what is observed in contact visits; the intensification of strategies to facilitate and to recognise progress and the prioritisation of short term supervised contact arrangements with the required supports.

Key words: Access; Child Contact; Supervised; Fathers; Visitation.

## 1. Introduction

This research reports findings from a study of the perceptions and experiences of fathers, supervisors and other key stakeholders on supervised child-parent contact, as provided in a centre in Ireland. There is a dearth of research on the views and experiences of birth parents – and more specifically fathers – participating in centre-based supervised contact in Ireland and in other contexts (Morrison *et al.* 2011; Larkins *et al.* 2015; Salas Martínez *et al.* 2016). Although supervised child-parent contact involves both mothers and fathers, this research is relatively unique on the basis that it foregrounded fathers' views and experiences of supervised contact with their children. In the limited research accessing parental views of supervised contact, the parent population is not always disaggregated and mothers tend to be overrepresented (see Gibbs *et al.* 2007; Larkins *et al.* 2015). Previous studies also indicate a context of low levels of engagement with fathers in child welfare settings and negative or limited attitudes on the part of professionals towards fathers involved with child welfare services, as well as on the part of fathers towards child welfare professionals (e.g., Featherstone *et al.* 2010; Osborn, 2014; Brandon *et al.* 2017; Icard *et al.* 2017).

The literature on supervised/supported contact shows a lack of a shared understanding of the concept and purpose of supervised contact among service providers in the child protection system and beyond (Wattenburg *et al.* 2011; Marschall, 2014). It highlights a lack of guidance on delivering and managing contact (Bullen *et al.* 2017) and confusion as to the role of the supervisor during supervised visits (Marschall, 2014). Vagueness relating to the goals of contact and a lack of a clear skill set for supervision have been noted (Morrison *et al.* 2011; Marschall, 2014). There is also evidence that supervisors in similar contexts can have different views on whether their role is solely to monitor child-parent interaction or whether they should participate in contact visits to improve their quality for children's benefit (Morrison *et al.* 2011). There is a lack of research attention given to exploring the relationship between supervised visitation/child contact programmes and child-parent relationship outcomes (Birnbaum & Alaggia, 2006; Saini *et al.* 2012; Holt, 2016). How competent and effective contact provision makes a difference to the lives of families so that they no longer need supervised contact services is poorly understood (Marschall, 2014) and research specifically on child-parent observations is very limited (Saini & Polak, 2014).

### *1.1 Supervised Child Contact*

Child-parent contact arises in the private and public family law arena in Ireland for diverse reasons. The need for child-parent contact arises due to parental separation or discord and when children are placed in alternative care. When parents are in conflict after marital separation or divorce and are unable to agree informal arrangements they use the court service to make decisions pertaining to custody and contact arrangements. In the Irish context, when unmarried parents do not agree a contact arrangement, fathers may use the family law courts to establish their right to contact with their children.

Families in which children are living in out-of-home care as a result of child care law proceedings may have supervised child-parent contact, which can be directed by the court and facilitated by child protection social workers or by child-parent contact centres. Decisions about contact are sometimes settled in court if the parents do not agree with a contact plan.

Centre-based supervised child-parent contact arises in private family law and childcare proceedings when it is perceived that a child and their parent(s) cannot meet alone without supervision provided by a family relative (e.g., a grandmother) or by a supervisor in a contact centre. In centre-based supervised child-parent contact, the contact takes place usually in a neutral setting with a professional charged with supervising the interaction between a child and their parent(s) and sometimes between siblings.

In Ireland the need to support children and families to see each other following their separation in a suitable setting such as a child-parent contact setting has been clearly recognised. A research report published in 2010 on behalf of the Irish organisation *One Family* indicated the need for the establishment of 37 contact centres throughout Ireland to provide adequately for supervised and supported contact (Murphy & Caffrey, 2010). However, since 2010, the need for such centres in Ireland to provide supported and supervised child contact has become even more acute (Murphy & Caffrey, 2010; One Family, 2016; Kiely & Bolton, 2018). Given the existence of very few centres in Ireland providing supervised child-parent contact, the Bessborough Centre in Cork in Southern Ireland, which was the site for this research, is relatively unique. It is a not-for-profit organisation with a service level agreement in place with the Irish state Social Work Child Protection and Welfare Service (Túsla – the Child and Family Agency) for the provision of an accredited supervised child contact programme. At the time when the research was conducted, the vast

majority of service-using families were referred by Child Protection Social Workers, but the programme also had limited capacity to provide private contact arrangements for families.

## 2. Methodology

This article reports on data collected from individual semi-structured interviews with fathers who were using the supervised child-parent contact service and focus group interviews with staff members working in the service and with external stakeholders. The external stakeholders consisted of an opportunity sample of professionals known by the research team to be familiar with the operation of the supervised contact service or to be referral agents to the centre. The study design also involved a comprehensive international literature review on the topics of working with fathers in child welfare / child protection and parent-child contact. After some consideration and discussion with the project steering group (comprised of one service user, two stakeholders and three staff members) it was decided to conduct one-to-one interviews with fathers because the research topic was perceived sensitive; there was potential for questions to generate upset and because focus group participation could present challenges to fathers' privacy and confidentiality. The focus group method was chosen for staff and stakeholders due to its capacity to stimulate greater discussion of the policy and practice implications of the research (compared to individual interviews) and also because of budgetary and time constraints.

### *2.1 Participant Recruitment*

Five fathers participated in individual interviews. All fathers who were current or recent past service users were identified and invited to participate in the research by ensuring that their key workers or other professionals with whom they were in contact informed them about the research. Posters informing fathers about the research and inviting them to participate by contacting a member of the research team were displayed outside the rooms used for supervised contact. Fathers who expressed an interest in the research were asked to provide their telephone numbers and a member of the research team contacted them to discuss in greater detail what was involved in the research. Recruitment of fathers to the study was generally difficult and time-consuming; despite making repeated contact with family law solicitors, child protection social workers and non-governmental service providers for the purpose of informing *past* service users about the research, it yielded only two additional potential interviewees; one of whom could not be contacted and the other was

unavailable at the time. Recruitment from the past service user population was ultimately unsuccessful. Out of a total of ten service using fathers who received phone calls from the research team, eight fathers agreed to participate or to consider participating and five fathers were actually interviewed. Fathers who declined to participate were not asked for a reason but the explanations they gave were diverse and included too many work and other commitments, a fear that the interview could cause them too much distress, and the presence of a partner in their lives who did not wish them to participate.

Seven staff members participated in two focus group interviews. All of these with the exception of one had experience of supervising child-parent contact; four were in supervisor roles at the time of interview. Six of the seven staff were female. The staff members were aged between 25 and 50 and their professional backgrounds were in psychology, social care, and community work. Six external stakeholders (a child protection social worker, a family law solicitor, a community project worker, and three Guardians ad Litem - GALs), took part in a focus group interview. Of these six participants, two were male and four were female. Staff members and stakeholders were invited by email or telephone contact by the research team to participate in focus group interviews.

### *2.2 Participant Demographics*

For each father, the following information was elicited in interview: age; number, age and gender of children; current living situation; current relationship status; current employment status; and the father's perceived reason for the contact being supervised. All five fathers were aged 30 years and upwards. Four fathers were Irish and one was Eastern European. Their length of engagement with supervised child-parent contact ranged from 5 months to 6 years. One father accessed the centre through private family law proceedings, while the remaining four fathers were using the centre due to child care proceedings. Only one had a shared parenting arrangement for a period after separation; four of the fathers had not been primary care givers. Three of the fathers were having contact with children who were in the care of the state, while two fathers had contact with children resident with their mothers. Three out of five fathers spoke in interview of poor socio-economic circumstances, adverse personal childhood experiences, or both. One father was having supervised contact with five children, while the other four fathers were using the centre to have contact with either one or two children (who varied in age from infancy to teenage years). At the time of interview two fathers had contact visits once a month; one had contact visits weekly; and two had contact visits fortnightly. The duration of contact visits was either one or two hours.

*2.3 Interview and Focus Group Questions*

Two semi-structured topic guides were created: one for the individual interviews with fathers and one for the focus group interviews with staff and external stakeholders. The individual interview guide was predominantly informed by the aim of the study, as well as points that emerged from literature, and ideas offered by the project steering group and service staff members in informal conversation. The fathers were asked to describe what it was like to attend the centre; to describe what their supervised child-parent contact visits were like and to describe the centre's facilities. They were asked what they found positive about supervised contact and what they found difficult. They were asked to describe the features of good supervision, good quality contact and the sources of formal and informal support they had before and after contact visits. They were asked to identify how long they experienced supervised contact and to assess progress being made and their hopes for the future for themselves and their families.

A separate topic guide was created for the focus group interviews with staff and external stakeholders. This topic guide was informed by both the literature and the data gathered in the interviews with fathers. Interviewing fathers before conducting the focus groups allowed the data gathered from fathers to prompt some of the questions asked in the focus groups and to stimulate discussion as to how positive experiences and outcomes for children and their families could be enhanced. Staff members were asked to give details about the experience they had of supervising child-parent contact visits, with particular emphasis on contact involving fathers. They were also asked to describe the purpose of supervised contact and what knowledge and skills they thought important for supervising contact, as well as identifying the optimum duration for supervised contact. They were asked to describe what they thought it was like for fathers using the centre for supervised contact and if it differed from mothers using the centre (and in what ways). Staff were asked to identify the positives and negatives involved in supervising contact visits and what they thought was required for good supervision and good quality contact.

The external stakeholders interviewed were also asked to identify the goals of supervised contact and the factors which facilitate or inhibit fathers' engagement with supervised contact. They were asked what was good about the centre's service and what think thought could be better. They were asked their views and experiences of referring families to the centre. They were asked about their expectations pertaining to progress and outcomes and their views on long term supervised contact.

*2.4 Data Collection*

All data collection took place between March and June 2017. All individual interviews were conducted by the principal investigator, while the focus group interviews were conducted by all three authors. Four of the individual interviews with fathers took place in the office of the principal investigator, while one interview and all the focus group interviews were conducted in a room on the centre premises.

Individual interviews on average took over one hour; the staff focus group interviews took one hour and ten minutes, while the stakeholder focus group discussion lasted for one hour and 45 minutes. All interviews were audio recorded and transcribed using NVivo transcription software.

*2.5 Ethical Considerations*

Ethical approval for this research was given by the Centre Ethics Committee and University College Cork Social Research Ethics Committee in January 2017. All interviewees and focus group participants were provided with an information sheet pertaining to the research being conducted and its contents were discussed prior to data being collected. Tailored consent forms were completed by all research participants in advance of data collection. Pseudonyms were used for all participants. No incentives were employed in the research for ethical reasons, but fathers were reimbursed for expenses incurred and were thanked for their participation by being sent a gift voucher.

*2.6 Data Analysis*

A thematic analysis was conducted (Braun and Clarke, 2006). Each transcript was coded manually and independently by two research team members. Open coding and coding with the research questions in mind were employed so that some codes were data-driven and others emerged from questions asked of the data. Codes were then organised into sub-themes and themes, which took account of consistency and contradiction in perspectives and experiences. Preliminary thematic documents were then shared, discussed, further developed and refined between the team members. The findings presented are organised under four broad themes, covering their scope and content. Each theme is divided into the sub-themes as they emerged in the data gathered with fathers and then as they emerged in the focus groups with supervisors and stakeholders.

## 3. Findings

The findings are presented under four broad themes, each of which are sub-divided as they reflect how they emerged from the interviews and the focus group discussions. The four themes are: Gender as a factor in supervised child-parent contact; Purpose and experience of supervised contact; Expectations of the role of the supervisor; and Progress and outcomes in supervised contact.

### *3.1 Gender as a factor in supervised child-Parent contact*

#### 3.1.1 Gendered Parenting under Supervision (Fathers)

Gender emerged in the discussions with both fathers and staff/stakeholders, however, it did so in different ways. While the service providing the contact centre was feminised in terms of its staff complement and the image it projected to the public via its website, this was not raised by the fathers or supervisors. Most of the fathers stated that how they were treated by supervisors was more important to them than the gender of the supervisor or how the centre advertised its services. Instead, gender was significant in how fathers talked about the kind of parenting expected of them, and made possible in the supervised contact programme. As supervised contact predominantly happened inside a centre in small rooms where interactions were easier for supervisors to observe and record, it was evident from the fathers that there was limited opportunity to do 'father-like' activities with children in the outdoors, such as sport, cycling, and so on. For example, one father, James, mentioned that he could be with his children in ways not possible in the contact centre because he had *"cycled with my children, joined swimming with them"* and had brought them wall climbing. Philip, another father, complained that most, if not all, of the visit took place in the dedicated rooms in the centre rather than in the outdoors, sometimes, in his opinion, for no other reason than to facilitate the ease and comfort of supervisors and to make the task of supervision easier.

#### 3.1.2. Gendered Emotional and Relational Capacity (Fathers)

Gendered conceptualisations of fathers were encountered by some fathers. Matis, one of the fathers interviewed, recounted his perception that the Irish court system and the related professionals regard fathers as limited in their relational and emotional capacity:

> *"I feel that overall, they* [professional practitioners] *don't care about fathers at all. They think that men have no feelings. …They don't realise that same as the mother,*

*when the child is born, the father has the strong parental kind of feeling or kind of urge to be there for them"*.

Contrary to this idea of men having "no feelings", all the fathers interviewed talked about their intense feelings of sadness and loss akin to that of 'disenfranchised grief' (Baum and Negbi; 2013, p.1679). Philip commented that *"there's a lot of pain, there's a lot of grief and it takes a long time… it's like a death you know when your kids are taken away and you're being supervised and stuff like that"*. Fathers claimed that as they practiced parenting in such a restricted way for such limited periods and under such an intense spotlight that the parenting time they were afforded via supervised contact was very difficult but also precious to them. They talked about how it took on a meaning and significance in their lives that they thought was probably different to parents accustomed to being with their children every day. Fathers interviewed acutely felt the stigma and the shame of having their contact with their children supervised. Such findings pertaining to the fathers' feelings are unlikely to be particular only to them but they underscore the importance of emotional support for all parents if quality contact is to be achieved.

3.1.3 Gender Equality and Gender Difference (Focus Groups)

When supervisors were asked how they engaged with mothers and fathers of the children participating in supervised child-parent contact, a *gender equal* approach was what the staff members agreed the centre advocated and sought to practice. Supervisors expressed the view that they should treat mothers and fathers *"the same and that there shouldn't be any difference"* because they argued that to treat them differently would be unfair. While this could give the impression of a practice which is heavily standardised, when supervisors talked about their everyday practice with families, it was clear that most of them took account of some of the difference / disadvantage created by gender difference (and other differences). Certainly, there was an appreciation among supervising staff of fathers' presence in a social service dominated by female professionals and mothers. They were also attuned to the differences between fathers who accessed the centre privately through the family law courts and those referred to the centre due to child care proceedings. According to supervisors, fathers paying for the centre's services expected more from the centre and the supervisor and were also more likely than other fathers (i.e., fathers of families referred due to child care proceedings) to advocate on their own behalf to make the service more responsive to their needs. Anne, a supervisor, noted that when fathers are referred privately to attend supervised contact, supervisors could expect to encounter fathers angered by *"what society deems to be*

*the dad's role in the child's life"* particularly if they believed they were "*after getting a raw deal in court"*. In addition to the differences among the fathers attending, a few supervisors spoke about how fathers and mothers presented differently to the centre on their first visit. According to one supervisor, a non-resident father attending the contact centre for the first time could present to the service like the "*poorer cousin*". In his experience, generally the mothers who were newcomers to the centre tended to have family support and to show more confidence, which he thought may be attributable to them having an already established primary caring role prior to their child being placed in care. He perceived that the fathers on first visit appeared much more self-conscious and unsure of themselves by comparison.

It was acknowledged by a Guardian ad Litem in a focus group discussion that supervised contact potentially constituted a significant *"wake up call"* for fathers to become more involved in their children's lives. She pointed out that up until this time their opportunity to be involved or to practice day-to-day childcare may have been limited. Indeed, of the fathers interviewed, only one had experience of a shared parenting arrangement prior to contact. Similarly, referring to fathers involved in supervised contact specifically, Dave, a supervisor, claimed that the supervised contact arrangement should provide "*an opportunity* [for fathers] *to learn and to give the fathers' presence value"*, particularly if they have not experienced this prior to supervised contact. Supervisors showed an awareness of how important it was to help fathers without direct caregiving experience to establish a visit routine during the contact visit which closely approximated day-to-day parenting and caregiving – rather than visiting – if they were working towards shared parenting arrangements or family reunification.

3.1.4 Engaging and Retaining Fathers (Focus Groups)

Some professionals acknowledged that they may, by default, focus their attention on mothers, as they are predominantly held responsible for children. One staff member noted that *"the mother will come to any meeting about the child and sometimes we as professionals forget to say we want the father to come too. We … are complicit in keeping the status quo, we can do better as services*". In the focus groups with stakeholders, concerns were expressed about the absence of the fathers in the lives of children in state care and the failures of services to support fathers' continued involvement. Sinead, a GAL commented, *"the reality is that we need the dads in those children's lives… you'd wonder what we need to be doing to be maintaining dads"*. In this context, it was acknowledged in discussion that child welfare

professionals can be unsettled by both the presence and the absence of fathers in children's lives when the children are taken into state care or at risk of being taken into state care.

It was also acknowledged in discussion that practitioners can maintain the gendered status quo in child welfare by only reluctantly engaging with the fathers who present to practitioners in ways which convey disinterest, hostility or aggression. Jennifer, a supervisor, describing a scenario of a couple coming to the centre for their first contact visit: *"…the father is quite hostile, the mother wants to be there, you have a full caseload and an access visit straight after, you try a little* [with the father] *but eventually you know…* [you give up]*"*. Supervisors acknowledged that organisational demands on supervisors and their perceptions of fathers can potentially intersect in a way to make their effort at father engagement less likely.

*3.2 Purpose and Experience of Supervised Contact*

3.2.1 Who is Supervised Contact For? (Fathers)

Fathers in this study picked up different messages about what supervised contact was about and who it *was for* from the supervisors they encountered in the centre. The communication and practice of some supervisors as perceived by fathers embodied key features of a child- and family-centred approach. Matis was participating in supervised contact to begin to bond with his infant son, who was born after his relationship with the child's mother had finished. He was very positive about the service he experienced: *"In regards to our access, my son's and mine, it's getting better very quick… they* [centre staff] *put effort in to the access for it to get better, to progress"*.

Fathers also spoke of experiences of supervisors that left them in doubt as to whose interests were predominantly served by supervised child-parent contact. For instance, Philip claimed that along with very positive family-centred supervisory practice experienced at the centre, he also encountered supervisors who perceived the activity at the centre as *"a business"* provided predominantly for the Child and Family Agency, rather than for families. He stated that *"their clock-in, clock-out"* approach to supervision, inadequate preparation and rushed feedback caused him to think that doing their best for children and families' interests were not central to how they conceived their practice.

Considering that legally a child's rights and needs are at the centre of contact, significant relational challenges exist in making contact visits work for all concerned. While

Philip appreciated that a child-centred approach should predominate in supervised contact, he also worried that parents like him can feel marginal in the process or may be left uncertain as to what is expected of them, particularly if a child-centred approach is too myopically interpreted by supervisors. He explained:

> *"See it's very child-centred and I understand … it's supposed to be but when you make something more family-centred, if you can help a parent, support a parent, its… good for the children. The children get more out of it. … when it's only child centred… you feel that you're on the outside, you don't know what's right you don't know what's wrong, you don't know how to do better… you're kids aren't getting the best of you"*

When supervisors were asked in the focus groups if a business-like approach to contact supervision could be experienced by parents, they conceded that it could, but only because of the volume of work in the centre and the challenges pertaining to timing contact visits. Overall, the impression conveyed was of a practice setting where the values of child-centred practice, family-centred practice, and the demands of operating a business are held in tension.

### 3.2.1 Experiences of Supervised Contact (Fathers)

The rules of supervised child-parent contact can be beset with contradictions making it an intense and anxiety-inducing experience for parents. The rules of the centre, principally in place to ensure children's safety and welfare, required that fathers avoided whispering, talking about certain subjects, questioning a child about their day-to-day care or activities, or doing things that could potentially be construed as upsetting a child or undermining their caregivers. In this context, fathers reported feeling sad that effectively they could enquire little into their children's lives or had come to know their children very little beyond what was afforded to them during the period of the supervised visit. Some fathers talked about feeling very anxious about how they should relate to their children when being supervised for fear that evidence of bad parenting was being gathered. For James, feelings of loss and sadness were particularly acute as he negotiated the transition from sharing caregiving to a parenting role governed by the significant restrictions supervised contact imposed. James refused his child's request to play the familiar game 'hangman' on the basis that he thought this may be recorded by the supervisor and used as evidence against him. For Stephen, being supervised impacted on how he and his children communicated: *"I can't talk to my kids about anything… they can't say anything either and that upsets them"*.

Stephen stated that supervisors, on occasion, helped him with parenting and with disciplining his children during a contact visit. However, for Stephen being supervised and observed deterred him from practicing actual parenting during the contact visit, fearful as he was that if he was perceived to do it badly, it could jeopardise the arrangement he had and in his mind possibly further prolong family reunification. He stated *"… if the kids are arguing, she* [supervisor] *helps me then… and I leave her do it then like… I'd prefer to do it myself … but I could lose my access and I don't want to be in trouble either with the law"*. In this context, it has to be asked if court-ordered supervised contact can successfully balance the support and supervision requirements so that parents like Stephen can safely try out the skills of parenting, with *the* aim of enhancing their capacity as parents so that they can move beyond the supervised setting. The weight that can be given to observations recorded in the supervised contact setting also merits consideration in terms of how representative such observations may be of parent-child interaction and parenting capacity or incapacity beyond the limitations of the setting. Supervisors showed awareness of how being supervised and observed induced anxiety and affected the behaviour of parents in the supervised contact context. One supervisor, Sandra, commented that for one father *"it was almost like he was afraid to do the wrong thing or the right thing. …If the circumstances were different and he was in a typical home, this wouldn't necessarily be the case"*. While some supervisors acknowledged the limitations for children and parents of the centre and what it offered, others perceived that such limitations presented an opportunity for them to more accurately assess parental capacity required for everyday parenting.

### 3.2.3 Role and Scope of Supervised Contact (Focus Groups)

The external stakeholders – to a much greater extent than fathers and supervisors – held significant and wide-ranging expectations of the supervision of child-parent contact. They stated that supervisors should be prepared to support parents, to role model positive interaction with children, to mentor parents and to impart useful parenting skills to them – in addition to carrying out very carefully their supervisory and observational obligations. A comment from Alison, a GAL, that the role of a supervisor is not solely to *"sit behind a mirror in a room with a notebook, it is someone who is actually facilitating contact"* elicited agreement from other participants.

However, despite the wide-ranging expectations identified in discussion, some supervisors expressed misgivings about being expected to restrict their supervision to

observation and report writing. Supervisors noted that when a social worker sets a brief for the supervisor observing the contact of a child in care, the supervisor on occasions could comply with a directive to do nothing more than observe and to take notes. Indeed a social worker also stated in discussion that a supervisor would be requested to supervise contact *"with these matters in mind"* and if the content of the report suggested otherwise, she could not have confidence in the assessment of the contact observed. Some supervisors emphasised their obligations to comply with court orders and to their proxy statutory responsibilities by adhering to briefs given by social workers and by enforcing rules social workers required for contact visits. Others stated they found it ethically challenging to comply with very restrictive supervision briefs, particularly if they perceived that the quality of the contact visits could be poor for children and if they felt there were doing little as supervisors to progress potential family reunification. Supervisors also reported that the quality and credibility of their observations could on occasion be contested by social workers – an issue also acknowledged by social workers and other stakeholders in discussion.

#### 3.2.4 Supervised Child-Parent Contact as a 'Bargaining Chip' (Focus Groups)

Notwithstanding supervisors and stakeholders appreciation of the serious child protection and / or child welfare concerns, which they put forward as the justification for contact being supervised, some stakeholders claimed that supervised contact can be used as a kind of 'bargaining chip' or a 'consolation prize' in Irish courts when long-term statutory care orders are being sought. Such a pragmatic approach, they noted, were not conducive to child-parent contact arrangements which best serve children's needs and interests. With reference to children in long-term care specifically, it was stated by one focus group participant that once a child contact arrangement was in place, it could receive little attention at subsequent review meetings unless parties proactively raised questions about the arrangements.

### *3.3 Expectations of the Role of the Supervisor*

#### 3.3.1 Relationship-based Practice (Fathers)

Relationship-based practice was what fathers wanted from supervisors. They emphasised honesty and good communication. If they established a good rapport from the outset, they perceived this to be very beneficial. Supervisors who were perceived to demonstrate interest in the children and to create a mutual rapport with them helped to improve the quality of the visits for all concerned. Philip commented: *"My kids developed a*

*good relationship with a supervisor, there was trust built up there and there was good communication and the kids… they felt she was very approachable. …she was a great support"*. Some fathers were very appreciative of supervisors who they thought viewed and treated them and their children as a family, rather than just another contact visit. Philip singled out one supervisor, who he stated gave great support to him and his children before and after the contact visit and who followed up with him to share useful information.

Consistency of supervisor – and the relationship-building that this facilitates – is generally emphasised as important for children in supervised contact. However, for the fathers in this study, a change of supervisor was usually only conceptualised as a significant risk if it led to communication breakdowns, which they perceived disadvantaged them in court. For example, Matis pointed out that *"different people were supervising the access and none of these people, when they left, communicated with the other so basically I have no proof that* [his child's] *mother was blocking the access"*. However, fathers welcomed a change of supervisor if rapport could be successfully established and if the change brought new ideas or a fresh approach, which benefitted all concerned.

3.3.2 Specialist Practice Skills and Consistency (Focus Groups)

Fathers valued features of relationship-based practice from the supervisors; this was also evident in the data from supervisors, although not as strong a theme. Being conscious of the difficult experiences families had experienced with professionals prior to the contact arrangement, supervisors appreciated what was at stake. One supervisor interviewed compared the delicate first encounter with a family to *"walking on eggshells"*. Another supervisor explained, *"It is very personality driven, if you appear confident, if you appear friendly… you'll get a lot of work done with parents"*.

However, the specialised skills deemed important for supervising contact (e.g., specialised knowledge of child development, skills pertaining to risk assessment and detection of parental manipulation or subtle perpetration of abuse) was a very strong theme in the focus groups. According to stakeholders, supervisors needed to attend to the seriousness of the task of observation and they needed to have confidence and competence to intervene when required. A few supervisors stated that the demands of supervision were such that they would welcome feedback on their supervision practice if the recordings of the visit were used for this purpose. For example, Sandra commented, "*Sometimes you'd nearly wish that there was somebody in the room observing you … so that they could give you feedback"*.

Supervisors also perceived that because supervision of contact only comprised one of their work responsibilities, it may not always receive dedicated attention in their own clinical supervision, which, it could be argued, serves to undermine the value ascribed to the role.

Supervisors reported that the role of supervision required what was described as *"outside the box thinking"*: considering what might work for different families before and after contact visits. Some talked in positive terms about the opportunity to be creative in their practice and to contribute to a family's *"experience"*. Finding ways to facilitate positive indirect contact between children and their parents was one of the ways in which supervisors thought they helped fathers, who were not residing with their children.

To a much greater extent than fathers, supervisors and stakeholders endorsed consistency of supervisor. Indeed Sandra, a supervisor, acknowledged that the recorded notes on contact visits kept on file in the centre provided only a very limited resource to prepare a supervisor taking on for the first time the supervision of a family's contact. Contrary to the strongly held view about the importance of supervisor constancy in focus group discussion, Sinéad (a GAL) noted that the replacement of a regular supervisor at times resulted in new observations which were beneficial to decision-making in relation to the best interest of the child.

*3.3 Progress and Outcomes in Supervised Child-Parent Contact*

All of the fathers talked about what they were doing in their lives to make progress towards reaching their goal to be reunified with their children. Kevin was one father who had adverse life experiences. He had a history of institutional care and abuse, a criminal record, very limited education and income and was in recovery from a drug addiction. Frustrated as he was that significant progress made by parents may not register with supervisors to bring about the desired change in a reasonable timeframe, he was actively engaging with multiple services provided by the centre and other services to address the factors that led to his children being taken into care and to his contact with them being supervised. He also showed an awareness that progress from supervised to regular contact and toward family reunification would take time and was contingent on him and his partner making significant and sustained changes in their lives and on them overcoming some of the significant material deprivations (e.g., poor quality housing) impacting on their circumstances.

In this study, three of the five fathers interviewed were very long-time supervised contact service users (i.e., three years plus) and they had in common their frustration that the

relationships they could have with their children in supervised contact were limited and had not progressed or changed in any significant way over time. Kevin commented that *"they're* [Child and Family Agency] *asking us to do this and we do these things… there's no recognition, there's no give and take, it's all kind of one side, one- way traffic"*. Two fathers questioned if their having made progress on the factors that made supervision necessary in the first place was making any difference as the arrangement had not changed over time. The third father complained that prolonged service use was impacting on his children, who had over time become bored by the toys and games available, the routine of the contact visits and the associated rules and limitations.

### 3.3.1 A Short-Term Transitional Service (Focus Groups)

While there is little evidence pertaining to the optimal duration of supervised contact (Saini *et al.* 2017), it was consistently viewed by supervisors and other professionals as a transitional service of a relatively short duration, while parents address the issues that make the supervision necessary. However, supervisors noted that families privately engaging in supervised contact tended to transition faster than families referred due to child care proceedings because, according to one supervisor, there is more emphasis on the contact arrangements in these situations *"being therapeutic"* and on *"driving the outcome of this* [the contact arrangement] *to be moved into the community"*. Focus group respondents strongly agreed that long-term high intensity supervised contact arrangement should not be prolonged and that if it was perceived that children's identity and their bonds with family members should be supported, this should be done in other ways rather than through a supervised contact arrangement. According to Joanne (a GAL), *"you lose fathers with that sort of intensity, it's not meant to go on forever"*. Another GAL, Sinéad, noted that *"if you thought you were indefinitely going to be supervised… that would destroy anybody"*. Sandra, a supervisor, recalled advising fathers, who were feeling hopeless when the kind of change they desired was not happening, *"not to give up"*. Another supervisor, Laura, acknowledged that prolonged supervision increased parents' frustration and she commented that parents would say to her: *"I'm doing everything I am supposed to be doing and you're not letting me move on, you're not letting me progress"*. It was very evident that the parents interviewed desired to see change happen faster than the centre staff were prepared to facilitate. Chiming with research findings showing transitioning contact out of a centre can be more challenging than anticipated (Murphy & Holt, 2013), supervisors identified on occasion their reluctance

to have a contact arrangement moved out of the centre into the community if they believed it was likely to fall apart without their involvement.

### 3.3.2 Support to Transition from Contact (Focus Groups)

It was clear from the focus group discussion with stakeholders that social work activity intensified in the lead up to a care order application but after the court order came into effect, a supervised contact arrangement could become the only plan for children and their birth parents and particularly if family reunification was perceived unlikely. A query remains as to what extent child protection and welfare services (where the focus of the work is on the child) or other agencies are motivated to provide the required support to parents of children in long term care to address the risk factors that led to their children being place in care and to their contact with their children being supervised. Supervisors stated their expectation that social workers would organise the therapeutic supports families needed to transition from supervised contact, and in this context, they did not perceive themselves to have responsibility. It was therefore not evident to what extent plans were put in place for fathers to identify and use services and therapeutic supports critical to enable them to transition from supervised contact. The picture which emerged from the different data sources is one of fathers and supervisors operating from different starting points, sometimes with an extremely restricted set of shared or workable goals and limited access to wider social supports.

## 4. Discussion

Considering that working positively with fathers in child welfare settings has been identified as a persistent challenge (Featherstone *et al.* 2010; Brandon *et al.* 2017; Philip *et al.* 2018), this research sought to uncover to what extent the supervised child-parent contact centre was father-inclusive. In framing their engagement with parents in supervised contact, supervisors emphasised gender equality and this detracted from the ways in which they attuned their practice to the *"difference that difference makes"* (Rhode, 1989, p.13). In contrast, the data gathered from fathers showed parenting identities and practices which were markedly gendered. Fathers perceived themselves to be *fathers* and to *do fathering* – as distinct from being *parents* and *doing parenting*, even when accounts of their parenting in the interviews seemed not so constrained by their gender. Although mothers were not interviewed, the findings suggest that fathers may experience the supervised contact

differently to mothers involved. One distinct difference from any mother is that there will be fathers attending supervised contact who have never seen their child prior to their engagement in supervised contact. Some fathers engaged in supervised contact (e.g., first-time fathers who have no contact with their children) may not have primary care experience, or indeed any child-caring experience.

As in other studies (e.g., Larkins *et al.* 2015), fathers interviewed shared some very positive views and experiences of the supervised contact programme and of the supervisors. What fathers identified as important in the relationships with supervisors was very similar to what child welfare service users have identified as important in their relationships with professionals in other studies (Coady *et al.* 2013; Campbell *et al.* 2015; Kiraly & Humphreys, 2015). It bore many of the hallmarks of relationship-based practice (Howe, 2014, Hingley-Jones & Ruch, 2016). Consistency of supervisor – and the relationship-building that this facilitates – is emphasised in the literature as important for children in supervised contact (Saini *et al.,* 2012) and this was reiterated in this study by supervisory staff and stakeholders. However, as in Larkins *et al.'s* (2015) study, a change of supervisor could be experienced positively or negatively by fathers.

There is an appreciation in the literature that making supervised contact work for each of the involved parties is a challenge, particularly in the absence of guidance for parents and in the lack of consensus among child welfare professionals as to the precise role and scope of supervised child-parent contact (Triseliotis, 2010; Saini *et al.* 2012; Marschall, 2014; Wilson & Devaney, 2017). Studies show that training across supervised contact services varies (Caffrey, 2013), that skills for supervision are rarely well defined, and that the delivery of good quality contact programmes require a range of complex skills (Pulido *et al.* 2011; Saini *et al.* 2012; Murphy & Holt, 2013). In Ireland, students of social work and social care receive no discrete training for child-parent contact supervision but can find themselves solely supervising a contact arrangement while on a work placement. This could suggest that child-parent contact supervision, which is recognised as being particularly challenging (Larkins *et al.* 2015), may be accorded less significance than other aspects of child welfare work.

Variance in the quality and credibility of observations in supervision can depend on a range of factors in the supervised contact setting: the disciplinary background of the supervisor, their training, the frequency and type of supervision available to the supervisor, the experience and cultural sensitivity of the supervisor, how a supervisor interprets or

assesses what is observed, the biases and preconceived expectations of supervisors about parent-child interactions, supervisor knowledge about the background of the parents and children being observed (Saini & Polak, 2014; Wilson & Devaney, 2017). Saini and Polak (2014) describe 'observer reactivity' (i.e., the changes in people's behaviour in response to being observed) as a feature of supervised contact, suggesting that there is no one way to observe and record contact and that observations of contact vary between supervisors. Other relevant factors include the parents' anxieties and fears relating to being supervised (Triseliotis, 2010; Schofield & Ward, 2011), the breadth or narrowness of the supervision brief, the features of the setting, and the timing of visits and the supervisors other work commitments prior to or immediately after the visit. This research highlights the confusion on the part of parents as to what they can say or do during contact, due to a lack of clarity on their part as to how this may be assessed when it is observed. Other studies have also taken account of the lack of clarity as to what supervised contact is and what it should entail (Morrison *et al.* 2011; Taplin *et al.* 2015). This points to the lack of a consistent protocol for the assessment and recording of observed contact and a mechanism for assessing to what extent a child's needs are being met over time.

It has been argued that contact supervision which is therapeutic is more likely to propagate the kind of active parenting required for reunification (Bullen *et al.* 2015) and that long-term supervised contact may not be beneficial and should thus not be seen as a long-term solution to the maintenance of contact between children and their parents (Bala *et al.* 2016; Saini *et al.* 2017; Sheehan *et al.* 2005). The professional supports for service users decreased with the passing of time, a finding also in studies of divorced and separated service users (Saini *et al.* 2017). In the absence of a dedicated more comprehensive study, it can be inferred from the findings that, in Ireland, supervised contact may be the final destination for some children and their parents rather than a difficult transition. It certainly seemed that a possible outcome of a long-term care order could in effect be nothing more than the consignment of some families to a supervised contact centre once a contact arrangement had been put in place. The evidence suggesting that in Ireland supervised contact can also be used less purposefully as a 'bargaining chip' in child care proceedings echoes a finding in a study of contact visits for children in long-term care in Canada (Morrison *et al.* 2011).

Evidence reviews are increasingly finding against 'one-size' approaches to contact for children in long-term foster care in favour of arrangements which are carefully planned, regularly reviewed, and centred on individual children's needs and welfare, rather than their

wishes (Sen & Broadhurst, 2011; Boyle, 2017). While the findings from this study provide no reason to argue against such an approach, the evidence was not convincing that all the requirements were in place in the centre for such an approach to be practiced consistently. There was some evidence of *compliance-focused* rather than *autonomous* practice (Caffrey, 2013) on the part of centre staff contracted to do the contact supervision. Supervision was reported to be at times limited to the tasks of observation and reporting, at the request of social workers. The contact arrangements made for families of those interviewed tended to be relatively formulaic and showed too little variation over time to be catering for the individual and changing needs and interests of children. To foster autonomous supervisory practice and to offer variety in contact frequency and format to meet individual children's needs would have required resources (e.g., a dedicated child contact manager, additional supervisors) that in this instance the centre did not have.

### *4.1 Limitations*

There are key study limitations. The research was confined to one centre and a small sample of fathers was interviewed, which significantly limits the degree to which the study findings are representative of fathers engaged in supervised child parent contact and generalizable to other centres. All the fathers interviewed were centre users at the time of interview, a factor which may have impacted on what they were prepared to say in interview about their experience. While data were gathered from multiple perspectives, the views of mothers, children and foster parents were not obtained. There was evidence from three of the five interviews conducted of long-term service use but it is not clear to what extent long term service use would be found in a larger sample. The administrative data collected by the supervised contact centre were not adequate for research purposes or for programme planning and review purposes. A standardised comprehensive supervised contact information database was not in place in the centre to profile service users or to track their progress through the programme. The findings support the case for further research engaging multiple methods and exploring progress and outcomes of supervised contact with a large diverse sample of service using families.

## 5. Practice Implications

The views of fathers, supervisors and stakeholders provide useful data for identifying how supervised child-parent contact may be enhanced in particular ways for all involved.

### *5.1 A Gender-Sensitive Approach*

Rather than solely gender equality, a *gender-sensitive* approach, such as that advocated by Philip *et al.* (2018) has much to offer supervised child-parent contact. It takes due cognisance of gender and how gender intersects with other differences (social class, race / ethnicity, disability) as well as how these play a significant part in the lives of service users and supervisors and in their interactions with each other in child-parent contact environments.

*5.2 Considerations for Assessing Contact Observed*

Evidence of divergent professional interpretations of observations and parents' anxieties as to what interpretations can be drawn from observations do provide some support for developing a common framework of assessment and one which has the capacity to go beyond the assessment of observed child-parent contact in a supervised setting (Wilson & Devaney, 2017). If strategies informed by a strengths-based approach to supervised contact, (as articulated by Tobin Smith *et al.*, 2014) were to be incorporated into the provision of supervised contact, supervisory staff in centres may be better supported to provide a child-centred service that also consistently and actively engages parents and siblings.

*5.3 Making Progress and Recognising Progress*

The findings draw attention to the need for centres to support supervisors to practice in a way which is not solely compliance-focused (Caffrey, 2013), as this is unlikely to serve the interests of children or parents in families. They also emphasise the importance of goal-setting and exit planning from the outset by supervised contact centres, as well as regular internal and external review mechanisms to prevent or challenge drift in service use. Detailed and specific court orders outlining the risk factors that need to be addressed for the contact not to require supervision could help families to move through the supervised contact programme in a timely way, rather than to get 'stuck'. Consistent and effective oversight and management within supervised contact services could facilitate better exit planning for families or, where necessary, further support and supervision and clear communication with parents as to the need for continued supervised contact. Noting and communicating to parents their progress (however limited) over time in a child-parent contact arrangement may maintain parents' confidence and morale by showing them that progress they are making is being recognised and having impact.

*5.4 Transitioning from Supervision*

In child care courts, if child-parent contact arrangements are addressed independently of care order applications, due attention and care could be given to the best interests of children in making arrangements to ensure that there is enough evidence already gathered to indicate that supervised contact can be reasonably expected to be of benefit to a child. Contact planning also needs to attend to the transition out of supervised contact, so that clear timelines and enforceable review procedures are also in place to follow through on the plan. The service provision and therapeutic supports needed by parents to help them in transition from supervised to regular contact and to reunification as envisaged, also need to be available for a plan to be put into practice.

## 6. Conclusion

This study was conducted in Ireland over a period of nine months in 2017. The study was relatively unique in its focus on fathers' experiences of child-parent supervised contact. The study therefore put a spotlight on how gender features in fathers' experience of supervised contact and it makes the case for a *gender-sensitive* approach to supervision practice. While a commonly agreed goal for supervised contact is to safely and properly assist children to maintain meaningful relationships with non-custodial parents so that they may transition to reunification, achieving this can be undermined by a lack of research attention and resources dedicated to this area of child welfare practice. Achieving quality contact for children and their families is predicated on many factors. In countries such as Ireland, where the prospect of family reunification is never foreclosed, it is reasonable for children and their non-custodial parents to have responsive short-term supervised contact provision with key supports, rather than a long-term supervised contact arrangement of questionable value to them.

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