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"It is not just about doing or saying the right things": Working systemically with parents whose children are placed in public care

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Abstract

This article explores the possibilities of a systemic approach in the support of parents whose children are placed in public care. The article is based on a qualitative study interviewing six parents who have received support from Norwegian Family Counselling Services (FCS) and seven systemic family therapists from FCS. Both groups were interviewed individually and in focus groups. The findings suggest that parents experienced less judgement from therapists in FCS than from caseworkers in CPS. Even if it could be challenging, the systemic therapists found a systemic approach useful to help parents develop agency and make meaning of their lives, as the parents struggled to have agency and understand why their children were placed in care. The article concludes that systemic approaches can be useful in these cases, combined with appropriate child protection interventions as necessary.

KEYWORDS

child protection services, knowledge, power, qualitative research, Systemic family therapy

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Practitioner points

- It is a challenge for the Child Protection Services (CPS) to support parents after their children are placed in public care.
- Parents' feelings of powerlessness towards the CPS made them align with the CPS's requirements
 even when they did not understand or disagreed with the requirements.
- Systemic family therapy seems to be a promising approach for working with parents to explore their own narratives, to improve and contextualise their meaning-making.

BACKGROUND

How public services support and help parents following placement of children has been brought up in political debates in Norway, especially since several parents have brought cases to the European Court of Human Rights (ECHR). In addition, Norwegian Child Protection Services (CPS) have been criticised by the UN Convention of the Rights of the Child for failing to safeguard the interests of parents following placement of children and for a lack of focus on the return of children after placement.

Supporting parents after child removal has been deemed inadequate in Norway (Slettebø, 2013) and other Western countries (Morgan *et al.*, 2019; Schofield *et al.*, 2011). Explanations for this lack of support have centred on the argument that CPS have a difficult dual responsibility both in placing the children against the parents' will and then offering the same parents support (Schofield *et al.*, 2011). This demanding situation led Norwegian politicians to decide that the state-run Family Counselling Services (FCS) should assist CPS as a supplementary support service to such parents. The Norwegian Child Protection Act mandates CPS to support parents. According to the act, CPS have a legal responsibility to reunite the child with his/her parents unless a reunification is not in the best interest of the child. However, no official guidelines for this work exist. FCS offer the parents an optional service, which is not regulated by law. The purpose of their mandate is to help parents process the loss of care for their children and support them in their new role as visiting parents. Most of the therapeutic practices used within Norwegian FCS are inspired by systemic family therapy approaches. FCS fall under the Norwegian Act of Family Counselling and thus are in a different and more independent position than CPS, without any decision-making authority in these cases.

Several studies have described the interactions between parents and CPS as challenging after parents lose their children to public care. In a study from the US, Sykes (2011) showed how mothers developed strategies to avoid being labelled as bad parents. These strategies led to little productive collaboration, with caseworkers being frustrated that parents took little responsibility for what they believed parents had inflicted on their children, with parents spending energy on defending themselves. In a Swedish study, Höjer (2011) found that parents described an experience of powerlessness in relation to CPS, along with an experience of being punished for the neglect CPS claimed they had inflicted on their children.

A central aspect of the context of the relationship between CPS and parents is power relations. According to Foucault (1980), power is relational and becomes apparent when exercised. Consequently, Foucault was occupied with how power happens, how it operates and what its strategies or techniques are, rather than with who exercises power (Brown, 2007; Guilfoyle, 2003). A Canadian study of parents' experiences with CPS identified two types of relationships between parents and CPS: one in which CPS were perceived by parents as using power as *control* and another where they were perceived as using power as *support* (Dumbrill, 2006). When power was perceived as control, it seemed that parents tended either to openly fight it or 'play' with it, pretending to be collaborative.

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When parents perceived power as support, they were more likely to collaborate with CPS. In a scoping review, Toros *et al.* (2018) identified that the asymmetry of the power relationship between professionals and parents seemed less urgent if CPS focused on parents' strengths and resources as opposed to only focusing on their deficits. In sum, prior research has shown that power and control play an important role in the relationship between parents and CPS caseworkers.

Researchers have also argued that CPS do not sufficiently emphasise the parents' context and living conditions when interpreting parents' behaviours after a child removal. Parents in Schofield *et al.*'s comparative study from four Western European countries (2011) expressed how CPS expected them to act rationally following the crisis they were in after the loss of their children; these parents perceived this as an unrealistic expectation. In a study from New Zealand, Hyslop and Keddell (2018) showed how poverty led to difficult family dynamics, which were interpreted by CPS as inadequate care. These confusions and misapprehensions highlight the need for a contextual understanding in the interpretation of parents' behaviours and interactions with CPS; thus, systemic family therapy has been recommended as an approach to support parents who have lost care of their children (Morgan *et al.*, 2019).

Currently, several models coexist within the umbrella term 'systemic family therapy' (Boston, 2000; Lorås *et al.*, 2017), such as solution-focused therapy (De Shazer, 1985), collaborative therapy (Anderson and Gehart, 2007; Anderson and Goolishian, 1988), narrative therapy (White and Epston, 1990) and reflective processes (Andersen, 1991). One of the main ideas in systemic family therapy is that problems are not to be understood as individual issues but as relational, circular processes which must be perceived in context (Bateson, 1972), and that reality is not fixed but created and maintained through social interactions (Anderson and Goolishian, 1992). A therapist position based on a social constructionist perspective thus means a not-knowing position (Anderson and Goolishian, 1988), where doubt and uncertainty can safely be explored (Mason, 1993, 2019).

In sum, studies have shown that there are often challenging interactions between parents and CPS after a child placement. These interactions seem less challenging when caseworkers focus on parents' strengths and use their power in a way in which it is perceived as support rather than control (Dumbrill, 2006; Toros *et al.*, 2018). Therefore, systemic family therapy has been suggested as a promising approach to parents whose children are placed in public care (Munro, 2010). Some British studies of systemic approaches within CPS have shown how caseworkers appear to be drawn to linear causal explanations (Bingle and Middleton, 2019) and that it is important in contexts with power imbalances to reflect on various explanations (Watson, 2019). However, less is known about systemic family therapy in collaboration with parents after the loss of their children. The purpose of this study is to explore parents' and therapists' experience of a systemic approach in FCS and discuss the potential for systemic support of parents after the loss of their children. Thus, we address the following research questions: How do parents experience their client positions in Norwegian FCS as opposed to CPS? What kind of challenges do therapists in FCS encounter when working with parents whose children are placed in public care?

METHODS

Qualitative design

This article is based on a qualitative practice research study contextualised within a social constructionist epistemology which assumes that people's social realities are negotiated through language, relationships and culture (Gergen, 2015). The aim of the study is to explore several versions and perspectives rather than to provide definitive findings. Research within a social constructionist perspective replaces the idea

of something being 'revealed' with the idea of something being 'constructed' using language in relational practices (McNamee, 2010). The research process thus became a way in which we co-created knowledge with those we interviewed, where we mutually influenced one another.

Recruitment and participants

Six parents with experience with FCS and seven family therapists with experience of supporting parents in FCS, either individually or in peer groups, were recruited to participate in the study. Of the six parents, one was male and five female, and of the seven therapists, two were male and five female. All therapists were trained in systemic family therapy. To find participants with experience from the FCS support services, the therapists were recruited through a key person working to develop national guidelines for this support, and the parents were recruited through a key person in an independent organisation supporting such parents.

Research ethics

Ethical approval to conduct the study was granted by the Norwegian Centre for Research Data. All participants gave their informed consent. Anonymity was ensured at every point of the study. To anonymise the participants, we have consistently used female pronouns in our report. Taking part in the study was voluntary, and anyone could withdraw without explanation. However, no one did. But it is important to take into account that it may have been difficult for parents to withdraw from the study, as it could have been understood as a personal weakness or lack of control.

Data generation

To generate data, we conducted two focus group discussions with parents and two focus group discussions with therapists. The participants were also interviewed individually to further elaborate on themes which appeared in the focus groups. The interview process with the two groups took place between June and December 2016. We were inspired by a multistage focus group design in which the same groups were interviewed several times (Hummelvoll, 2008). By following participants over time, both the participants and we as researchers had the opportunity to explore certain topics in depth and record the themes we wanted to explore further. Focus groups are beneficial because they allow discussions to arise, reflections to be shared and ideas to be developed by the group (Piercy and Hertlein, 2011). In this study, this resulted in the generation of practical ideas for improving the FCS–parent relationships, which could have been difficult to develop through individual interviews. Then, individual interviews provided the opportunity to further explore themes or phenomena which participants suggested, without the interruptions associated with a focus group.

As a starting point for all the interviews, we developed a semi-structured interview guide. The guide themes included parents' experiences with FCS, their need for assistance and therapists' experiences with this parent group. The interview guide had a 'rolling' design for both groups. This meant that, based on the experiences from the first interview, new questions were added to the next interview (Stewart and Shamdasani, 2015).

Data analysis

To analyse the transcribed data, we used constructionist thematic analysis, a method for organising and constructing themes within a data set (Braun and Clarke, 2006). The analysis was conducted

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concurrently with the interview process. This allowed the material to be analysed at every stage. After the transcriptions were read several times, the research questions were used to identify preliminary themes in the empirical material from the parent and therapist interviews and focus groups. Meaningful elements, such as quotations and descriptions of themes, were identified and then sorted into tentative categories for each group. Then we tried to link themes from the two data sets. One such link was parents' descriptions of following orders from CPS, which they did not understand, and therapists' experiences with parents' lack of agency. Through this step-by-step process of thematic analysis, four themes were identified: (1) parents trying to live up to an ideal without understanding the ideal, (2) therapists' dilemmas when parents' needs conflicted with the systemic approach, (3) parents' experiences of being seen as not a failure and (4) stories of meaning-making and reunions with children.

FINDINGS

The purpose of this study is to investigate therapists' experiences of supporting parents whose children were placed in public care and parents' experiences of receiving support from systemic-oriented family therapists. The first and third findings are based on parents' experiences, while the second and fourth findings are based on therapists' experiences.

Parents trying to live up to an ideal without understanding the ideal

Parents described how they tried to live up to an ideal of parenting despite not knowing what that ideal looked like in practice. Parents said that they did not understand why CPS had placed their children in public care, that they experienced a feeling of disempowerment in their relationship to CPS, but that they still chose to collaborate with CPS as a strategy to secure a way to see their children more often and increase their chance of having their children returned. The way parents described this collaboration was that they followed instructions which they did not understand and/or did not agree with. One of the mothers said that she always had CPS in mind when faced with small choices in everyday life, such as what gift she should buy for her child and how much to pay for a pair of shoes for herself. She was afraid that all these small choices could be called into question when her caring ability was assessed at a later date. Another mother had the experience of having her children brought back. Her experience was that 'It is not just about doing or saying the right things. You have to understand why.' In the last focus group, one of the mothers reflected that so many of the parents did not understand why their children were placed in public care. She thought that this reaction could be about protecting themselves because understanding would mean opening the door to anxiety. These examples show how parents were guided by what they perceived to be the requirements of CPS. But this collaboration between parents and CPS did not necessarily lead to an increased understanding among parents of why their children were placed in care; nor did this arrangement seem to reduce their feelings of powerlessness towards CPS.

Therapists' dilemmas when parents' needs conflicted with the systemic approach

Therapists talked about different dilemmas they faced in working with parents whose children were placed in care. One such dilemma was that therapists in FCS experienced parents as doing little to develop agency in their lives or to 'grasp an expert position' – the position which is aimed for within

the systemic approach. Therapists also reported that parents expressed a lack of awareness of their need for assistance. Parents' stories, according to the therapists, involved many experiences of loss, especially in relation to CPS. One of the therapists said that it was easy to be overwhelmed by parents' stories and start trying to fix things on their behalf. Another therapist was concerned about not making parents out to be victims of a system. She said that 'If we treat them as victims, I'm afraid they won't move forward.' Seeing oneself as a victim may have parallels to the lack of control one feels over one's own life. Some of the therapists felt that such a lack of control could be related to the position parents had been given in their collaboration with CPS. One therapist said that 'They are used to going somewhere because someone else thinks they should. When they come here, nobody thinks they should do anything in particular.' Another therapist supplemented this by saying that 'My experience is that parents are looking for what they think I want them to answer, rather than trying to understand why'.

Several of the parental stories recounted by therapists and told by the parents in the focus groups could appear improbable. One parent described how she forgot to put napkins on the dinner table during a CPS caseworker's supervision and that it led to her child being placed in care. Another parent said that her daughter called the police and showed them a bruise that her mother had allegedly given her. According to the mother, the daughter had drawn this bruise on herself, and the police washed it away. Nevertheless, the daughter was placed in care by CPS. In a discussion in the therapist group, one of the therapists (who had previously worked in CPS) said that she found it difficult to believe parents' stories because she had been lied to by parents several times before. Another therapist said that the truthfulness of parents' stories was not significant – what was more important was that they as therapists acknowledged parents' stories. However, these experiences posed a dilemma that such acknowledgement could lead to difficulties in collaboration with CPS, who were more concerned with finding 'the truth'.

Parents' experiences of being seen as not a failure

Parents described meeting with FCS as different from meeting with CPS. They felt less judged and controlled by FCS. One of the parents described this as follows: 'We were not just failed parents'. She added that she experienced CPS as searching for her weaknesses rather than her resources. The same parent added that the fact that she had been subjected to gross neglect and abuse in her childhood had been used against her to argue that she had not learned or experienced good care. With FCS, however, she was met with an approach guided by curiosity and questions as to what it had been like to experience this abuse. These questions, she said, were not posed to her by CPS. One parent described this as follows: 'When CPS has pulled out all the negative things they can find about me through several court proceedings, then I do not want to explore my history with CPS.' But even though parents seemed to favour FCS, their relationships with CPS remained important for them, particularly because of that agency's decision-making authority.

Stories of meaning-making and reunions with children

Several of the therapists thought that it was important to explore parents' stories rather than be critical of their content. When a parent told a story, the therapist treated the story as the one that the parent chose to tell. It was then the therapist's job to explore the story with the parent. One of the therapists said: 'This exploration can more easily happen if the parents feel that they no longer need to convince you of how terribly they have been treated.' Another argument used by the same therapist to show the importance of acknowledging parents' stories was how parents had previously been met with disbelief from CPS (and other systems). She said: 'I think they meet many who do not believe their stories. I hope we can offer them something different: knowing that they come to a place where they

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feel greeted and listened to in a different way.' The same therapist explained how, in three cases, she had gone through a process with parents which started with their need to understand, and ended up as a successful story of returning their children to them. In all three cases, she had focused on exploring parents' stories through systemic principles.

DISCUSSION

This study explores different client position in relation to FCS, as opposed to their position in relation to CPS, and investigates systemic family therapists' experiences of supporting parents whose children are placed in public care. Based on our findings, we will discuss possibilities for a systemic approach in the support of the parents. We will also discuss the findings in relation to Dumbrill's (2006) two types of power – *power as control* and *power as support* – and Mason's (2019) notions of knowledge as *certain* or *uncertain*. Power and knowledge are both essential elements of systemic approaches based on social constructionist perspectives (Brown, 2007; Guilfoyle, 2003).

Using systemic family therapy approaches in a context of power imbalance

CPS represent a context where the power balance between caseworkers and clients is skewed, particularly in cases where parents lose their children to public care. Feelings of disempowerment were described by parents in our study. Disempowerment seemed to deepen when they described how they did not understand why CPS had placed their children in public care. Similarly to previous studies, this lack of understanding could be interpreted as stemming from parents' need to protect their identity as good parents within a context such as CPS, where parents may experience the feeling of being totally powerless (Schofield *et al.*, 2011; Syrstad and Slettebø, 2020). However, it can also be understood as a manifestation of dysfunctional communication between parents and CPS (Höjer, 2011; Sykes, 2011). This type of collaboration can be understood as a form of *power over*, as described by Dumbrill (2006), and could further contribute to limiting parents' meaning-making process with caseworkers in which parents will be left feeling inadequate and disempowered (Syrstad and Ness, 2019). In such situations, Dumbrill (2006) observed that parents tended to either fight against the perceived authority or enter into collaboration with it because they found it useless to fight. Parents in this study gave the same explanation concerning their willingness to collaborate with CPS.

This power imbalance and parents' habitual position of following orders given by authorities was one of the explanations given by therapists for parents' not taking agency in their own lives, or as the therapists expressed it, their tendency to rely on expert opinions. This could be understood as the parents' being deprived of expert status by CPS labelling them as 'not good enough' or by their labelling themselves as 'failed parents'. Nelson (2001) argued that, if someone was devalued, this could lead to a mistrust of his or her own judgements and opinions. According to the therapists, parents often expressed a lack of awareness of their need for assistance, and they did not understand why their children were removed. This lack of awareness and understanding was also reflected in a previous study (Schofield *et al.*, 2011). For systemic therapists, it is challenging to work with parents who fail to take agency or an expert position, as their own aim is to collaborate in creating understanding (Anderson and Goolishian, 1988,).

Parents' descriptions of their encounters with FCS were different. They described feeling valued as FCS focused more on their resources than their deficiencies. Studies have shown that professional approaches which focus on parents' resources lead to a better collaborative climate (Toros *et al.*, 2018). Parents in our study described how it was easier to open up on difficult topics which they felt were unsuitable to share with CPS, because their experience was that such topics could easily be used against

them at the next trial, putting them in a sort of 'Catch 22' situation, as Ross *et al.* (2017) described it. The conceptualisation of power in systemic family therapy may have parallels to Dumbrill's (2006) description of the second form of power, which parents described in this study: *power with*. When parents in Dumbrill's study (2006) experienced CPS using their power to support (power with), there was a greater chance of parents wanting to collaborate with CPS.

The results from this study indicate that the power relations are different in CPS and FCS. The two systems also have different mandates. Within its mandate, FCS can practise systemic family therapy without the same controlling and evaluative role as caseworkers from CPS. According to Guilfoyle (2003), they can use their power to help parents make meaning in a climate where it is easier to gain trust. In such a climate, it is easier to explore one's own situation and position in order to take a more active role in one's own life. Nevertheless, FCS therapists described it as problematic that several parents did not seem to take agency in their own lives and might not want to be treated as experts. Järvinen and Mik-Meyer (2012) argue that it is important not to impose on clients an agency or an expert position that they are unable to manage. These authors further argue that this is particularly so for marginalised groups, which have no preconditions for or familiarity with holding such an expert position.

Systemic family therapy approaches in risk-focused contexts

In addition to CPS representing a context with a power imbalance, they also represent a context in which the overall mandate is to protect children from risky situations. Risk elimination is often linked to the need to arrive at 'safe knowledge', where CPS caseworkers position themselves as 'experts' (Mason, 2019). This dynamic reflects the discussion of therapists in this study, in which they considered whether it was important to search for a 'truth' in these cases or whether *one* 'truth' even exists. On the one hand, it is important to identify facts in cases where for example a child is being abused (Mason, 2019). On the other hand, this risk focus can often lead to parents being positioned as risk factors in their children's lives (Featherstone *et al.*, 2018), which again, as described by parents in our study, can make it difficult to build alliances and constructive collaboration between CPS and parents. To build this alliance, therapists in our study stated that they had to acknowledge parents' stories.

Previous studies have indicated a tension between systemic approaches and approaches in CPS, where caseworkers seem to be drawn to linear explanations (Bingle and Middleton, 2019; Watson, 2019) which are often built on specific 'truths' about reality. Mason (2019) argued that some linear explanations were necessary in CPS but added that, if CPS's practices were primarily based on knowledge which was understood as 'facts' or 'safe certainty', caseworkers could easily end up in a position where they were trapped without any room for dialogue. This concern was also raised by Munro (2010), who added that such practices could lead to a simplification and standardisation of knowledge and to limited organisational learning. From a social constructionist perspective, CPS caseworkers' role involves contributing in their work to the creation of knowledge, but this was not a process which they showed an awareness of in Langsrud *et al*'s, 2017 study.

Although the power and control aspects of CPS entail the need for certain knowledge, studies have shown that it is important to reflect on one's own power position in contexts of power imbalance (Watson, 2019). If power is not reflected on, CPS can lose their legitimacy and trust. Trust is especially important for CPS, as their decisions are constantly challenged by the media and through the legal system to protect vulnerable clients. For parents to make meaning in their situation after their children are placed in public care, this study indicates that it is important for CPS to build alliances with parents. According to Anderson and Goolishian (1992), for parents to make meaning, therapists have to collaborate with them rather than convince them of a particular way of understanding the world. Such a dialogic form of collaboration will necessarily mean sharing power (Dumbrill, 2006)

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and moving to a position where one remains open to understanding phenomena from different perspectives (Mason, 2019). This might be a worthwhile approach in the support of the parents, as this study has shown that when parents are met with curiosity about their stories, they are more likely to explore their own stories further rather than sticking to their pre-existing 'truths' and 'perspectives' as part of a battle with CPS. Following this argument, we suggest that it will be useful for caseworkers within CPS to take up a more collaborative position and move beyond the sort of dysfunctional communication patterns we have described. One way could be training in systemic family therapy, or to make other caseworkers than those involved in the removal of the child/children work with the support of the parents. Another proposal could be to do what Van de Vijver and Harvey (2019) describe, establishing a team that contains both family therapists and caseworkers, so that one can focus on safety and the other can be more curious.

CONCLUDING REMARKS

This study shows that parents' feelings of powerlessness towards CPS in these cases made them align with CPS's requirements and instructions even when they did not understand or agree with these requirements. Yet, the study shows that there are opportunities in parents' participating in exploring their own narratives, which could help them to gain an improved understanding of their situation. The study suggests, however, that it is important that parents are not pushed to have agency that they are not yet prepared to handle; collaborative dialogue that helps them build a better understanding may be an important preliminary step.

The study also includes a discussion as to whether the understanding of knowledge as fixed or socially constructed is decisive in how to approach parents' stories. It could be difficult within the mandate of CPS to enter an approach where knowledge is understood as socially constructed. Many parents whose children have been removed get very little attention from the state (Morgan *et al.*, 2019; Schofield *et al.*, 2011; Slettebø, 2013). Thus, one conclusion of this study could be that other countries should be developing services for parents, such as the Norwegian FCS, to maximise the possibilities of meaningful support for the parents.

Our study shows the difficulties involved for CPS in building effective collaboration with parents whose children are placed in public care and demonstrate a need for further study of how this best can be achieved. However, we believe that our study of parents' experiences from both CPS and FCS provides us with useful information related to parents' need for support that is useful also for guiding CPS' approach to parents in such situations. We suggest that further understanding of power and knowledge in CPS in these cases could pave the way for better dialogue with vulnerable parents. This could address some of the criticism that Norwegian CPS have been subjected to by the UN and the ECHR. Finally, we propose that future research should investigate how a systemic approach can be applied to these parents within a CPS context.

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