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CHILD CARE STAFF IN A CHILDREN'S INSTITUTION

by

Trevor Harrison

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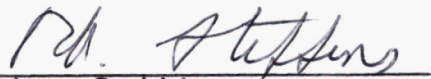
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THE UNIVERSITY OF CALGARY  
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The undersigned certify that they have read, and recommend to the Faculty of Graduate Studies for acceptance, a thesis entitled, 'Child Care Staff In A Children's Institution', submitted by Trevor Harrison in partial fulfillment of the requirements for the degree of Master of Art.

  
Dr. Charles Reasons, Supervisor  
Department of Sociology

  
Dr. Robert Stebbins  
Department of Sociology

  
Dr. Jacqueline Ismael  
Faculty of Social Welfare

August 15, 1985  
(date)

## ABSTRACT

This study seeks to present an account of the working experiences of child care workers within one children's institution. The study examines, from the perspective of the workers, their relationships and interactions with each other, children, management, and other professionals. By examining these relationships, it is possible to gain an understanding of the total effects of a total institution upon front-line staff working within it.

The study is an exploratory account of child care work in a children's institution in Alberta. Using the methodology of grounded theory, it focuses on the interpersonal relations of individuals hired to staff the institution. By focusing on the relationships, interactions, and arrangements which staff engage in during the course of their work, the meaning of the institution to them is explicated.

The study may be seen as addressing two areas of sociological importance: 1) The work situation of a low-level occupational group; and 2) The institutional context in which the care and treatment of children occurs.

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## DEDICATION

To MY DAD, MY MOM, and MY BROTHER

who fostered my sociological imagination

and

who tolerated the occasional chaos which that entailed.

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## PREFACE

From March 1980 until May 1983, I was a Juvenile Probation Officer with the Department of Social Services and Community Health in Fort McMurray, Alberta. During that time my work with adolescents led me into extensive contact with the Youth Assessment Centre in that city. The Centre is a twenty-bed facility conforming to Goffman's (1961:4) definition of a total institution. Its mandate, at that time,--it has since been licensed to do treatment--was the detention and/or assessment of children between the ages of twelve and sixteen. In practice, however, some inmates were slightly younger or older than this.

During the course of my visits to the Centre, either for case conferences or in order to simply keep in touch with my child-clients, I came to perceive the institution as presenting an unique environment. The word 'community' appeared, to me, to be appropriate for it seemed that the Centre constituted more than a mere work site. It seemed to me that the interactions of the child care staff with the children, and the same staff with each other, were invested with both conflict and cooperation to a degree that went beyond the mere functional requirements of the job. Moreover, it also became apparent to me that the sense of solidarity held by the YACkers (as the employees were colloquially called) went beyond the doors and shift-hours of the Centre, and was part also of their existence in the outside world.

In the Spring of 1984, I returned to the Centre in the capacity of a child care worker. The study which follows resulted from observations garnered during that time and subsequent interviews with past and present employees of the Centre.

Throughout the text, the reader will note that individuals, whether workers, children, or others, are occasionally referred to as 'he' or 'she'. It should be recognized that, in all cases, the terms are interchangeable and that sexual stereotyping is neither consciously nor unconsciously intended.

## CHAPTER ONE

### THE HISTORY OF CHILD CARE WORK

#### The Rise of Children's Institutions in North America

Beginning in the 16th century, the Western world became increasingly concerned with its problems of vagrancy and unemployment. This ultimately resulted in a series of laws which attempted to deal with the poor (Heywood, 1965). By the 18th century, even as Linnaeus developed his classification of scientific phenomena, reformers in England and elsewhere had begun to classify the types of people who comprised the poor. The development of these typologies enabled reformers to:

. . . differentiate and separate the various classes of the poor and create institutions designed specifically for each. For poor-law reformers, the crucial distinction was between paupers and independent laborers; for educators, between the working classes and the ragged classes; for prison reformers, between the ragged and the dangerous classes (Himmelfarb, 1984:378).

Implicitly, classification provided the basis for a series of new occupations which would later arise, since defining some people as needy engendered the possibility of their opposite: the need providers. Because need is also an amorphous term, the new occupations which were to emerge were also assured of both justification and a never-ending scope for their activities. Finally, more subtle differentiations of need could be defined so that more specialized occupations would later arise in order to meet the needs of a more specialized clientele.

The fact that the separation of clientele did not often lead to the provision of specialized treatments indicates that these classificatory schemes were functionally important in justifying the existence of certain

occupations. For example, although dependent and delinquent children were classified as different, and were placed in different types of institutions, they shared a commonality in their perceived needs of discipline, love, and education (moral and practical).

The classificatory schemes which emerged placed individuals along a continuum representing varying degrees of dangerousness to society (Heywood, 1965:9). Whereas, prior to the 18th century, dependent or delinquent children were maintained in common with adults in almshouses, hospitals, churches, or prisons, they increasingly constituted a separate category of persons in need. Differing only by age, the typologies which came to describe children were essentially a parallel of those which classified the adult-poor. By the middle of the 19th century, Mary Carpenter, a leading proponent of reformatory schools in England, had defined four classes of children and the particular institutions which might meet their needs:

For the working classes there were the day schools run by the National and British societies. For the ragged classes whose "want of character or necessary clothing" made those schools impractical, there were the ragged schools. . . . For the perishing classes who had not yet fallen into crime but were likely to do so, there were industrial schools. And for "juvenile offenders" or "delinquents" . . . who had already committed crimes which brought them within the "iron grasp of the law" and who were, in effect, "children of the state", there were reformatory schools (Himmelfarb, 1984:379).

At the same time in the United States, Henry Barnard, one of the founders of the American Association for the Advancement of Education, produced a journal which covered subjects under the headings of institutions for orphans; schools of industry, or institutions for truant, idle, or neglected children, before they have been convicted of crime; reform

schools, or institutions for young criminals and institutions for the deaf and dumb, blind, and idiots (Marks, 1973:11).

Nonetheless, the movement towards classification did not immediately divide children from adults in all situations and in all countries. Indeed, almshouses were supported in 1824 by J.V.N. Yates, the Secretary of State for New York, who recommended:

The establishment of one or more houses of employment, under proper regulations, in each of the counties of the state, with a farm of sufficient extent to be connected with each institution; the pauper there to be maintained and employed at the expense of the respective counties, in some healthful labor, chiefly agricultural; their children to be carefully instructed, and at suitable ages, to be put out to some useful business or trade (Thurston, 1930:24).

The number of children in almshouses in the United States decreased steadily only in the latter part of the 19th century. This was due largely to the belief that housing the young with adults predisposed the former to a life of crime and indolence. Still, in 1923, there remained 1,896 children under fifteen years of age in almshouses in the United States (Thurston, 1930:37).

The first separation of children from adults in American institutions began with the creation of orphanages. The first orphanage was built in New Orleans in 1729 and was followed by another in Savannah in 1738. Both of these were founded by religious orders. Throughout the 18th and early part of the 19th Centuries, most institutions for the neglected and dependent child were built and managed by private or religious organizations. By the end of the 18th century, orphanages had also been built in Charleston, Philadelphia, and Baltimore (Folks, 1907). Between 1800 and 1830, fifteen privately sponsored orphanages were

built in the United States. By 1849, fifty-three child care institutions had been opened (McCauley, 1976:7). In 1880, orphanages in the United States averaged forty-two children in care; in 1910, sixty children in care; and in 1923, forty-six children in care. Although the peak average occurred in 1910, a time when large institutions began to fall into disfavour, it is notable that thirty-five institutions held more than 400 children each in 1923, as opposed to only eleven institutions of such size in 1880, and only twenty-four in 1910 (Marks, 1973:37-8).

The first institution for young offenders, designed with the purpose of separating them from adults, was that of The House of Refuge, built in New York in 1825. Two 'classes' of children were accepted to the House, as described by Lewis:

- (a) Those children convicted and sentenced for crime, and
- (b) the children who were not convicted of crime, but who were destitute or neglected, or both, and who were in imminent danger of becoming delinquent (1967:297).

In short, what is now termed pre-delinquent behaviour was part of the criteria for institutionalization as early as 1825. As Houston remarks, 'The distinction in states between neglected and criminal in effect translated as potentially vs. actually criminal' (1978:176).

In Canada, low urbanization combined with the cohesiveness provided by extended families, as in Quebec, largely precluded a perception of children as being a problem. For example, as late as 1880, when his State of Prisons and of Child Saving Institutions was published, Enoch Wines noted that neither the seriousness nor the frequency of offenses in Newfoundland had thus far been deemed sufficient cause for a reformatory for juvenile offenders to be built; while, of the other provinces,



save Quebec and Ontario, he makes no mention at all of young offenders. Such prisons and jails as seem to have existed in these places appear to have provided both minimal care and supervision to a small conglomeration of indigents and mentally-impaired adults (Wines, 1968).

Only in the emergent urban areas around Kingston and Toronto were children seen to constitute a problem in need of redress. As did their compatriots in the other rapidly-urbanized areas of the Western world, citizens in these parts of Canada witnessed the results of migration, poverty, and industrial change. 'To some citizens the increasingly familiar figure of the street urchin--ill clad, undisciplined, and most importantly, unschooled--assumed sinister significance' (Houston, 1978:169). From the time of the passage of The Orphan's Act in 1799 until the enactment of The Apprentice's and Minor's Act in 1851, apprenticeship was the only available means of dealing with orphaned or deserted children (Ontario Ministry of Community and Social Service, 1979). The perceived rise in the number of dependent and delinquent children left at large in the community led to changes in the ways of dealing with them. Shortly after it opened in 1835, Kingston Penitentiary for adults also began to house children. In 1846 Kingston held sixteen children under the age of sixteen, and seventy-five youths between the ages of sixteen and twenty. A Royal Commission, convened in 1848 to deal with this problem of mixing, recommended the establishment of two Houses of Reformation for juvenile delinquents in Upper and Lower Canada. These were to be constructed similar to the Houses of Industry already existing in the United States. In 1858, the first reformatory was built at Isle aux Noir in Lower Canada. The following year, Penetanguishene Reformatory in Upper Canada was opened. Within four

months of opening, the latter housed forty juvenile offenders between the ages of nine and twenty-one. A year later, Penetanguishene's inmate population had risen to eighty, and in 1861, construction on a new wing commenced (Shoom, 1972b). In 1875, in the midst of a heightened campaign for the reformation of children, its inmate population increased to 173, of whom sixty-one (35%) were under the age of twelve (Houston, 1978:184). Of these reformatories, Wines remarked that:

Their government is similar to that of the penitentiary. Youths, convicted of offenses for which they would otherwise be sent to the penitentiary for not more than five years, or to a common jail for not less than fourteen days, may be sent to these reformatories instead, if their age does not in the one case exceed twenty-one, in the other sixteen years (1968:250).

In the 1860s, concern for the costs of maintaining reformatories led to renewed attempts to differentiate between delinquent and dependent children. The result was that the care of those children who were deemed to be 'destitute and dependent' was increasingly given over to voluntary agencies. Because these 'Homes' or 'Ragged Schools' were dependent upon both voluntary funds and the voluntary attendance of the children, the problem of dependent and neglected children was not immediately resolved.

Except for the two reformatories and a number of voluntary 'Homes', including religious schools, Canada was largely able to avoid the massive increase in children's institutions which occurred in the United States in the last half of the 19th century. For example, in New York City alone, between 1875 and 1890, forty children's institutions were incorporated (Folks, 1907:181). There have been several

explanations given for what occurred in the United States. Marks (1973) suggests that evangelistic fervor led to the creation of numerous orphanages. 'There can be no doubt that both Protestants and Catholics were guilty of "child saving" in such a sectarian sense that some groups were accused of child snatching' (Marks, 1973:46-7). Social control, the maintenance of cohesion during a volatile period in history, and the reduction of an over-supply of child labor following the industrial revolution are other explanations reviewed by Downs and Sherraden (1983). Folks (1907) suggested that State-provided inducements encouraged the building of institutions, as well as the retention of as many children as possible, since funding was dependent upon the number and length of stay of the inmates. Certainly, the rise of children's institutions in the United States occurred concomitantly with an increase in governmental involvement in funding.

Finally, there can be no doubt that many of the well-meaning reformers of the day saw institutions as fulfilling a social need, whereby otherwise neglected children might be usefully trained and educated. Thus, Wines and Dwight in their Report of the Prisons and Reformatories of the United States and Canada, published in 1867, could state:

We have expressed the conviction, very sincerely felt, that our juvenile reformatories are the best managed and most effective institutions we have for the prevention of crime. But they are far, very far, too few in number, and need to be increased manyfold (1973:363).

Around 1870, a spirit of reform spread across the United States and Canada, fueled by a desire to re-make society. Whereas the previous classificatory schemes developed by social thinkers had primarily delineated 'problems', the leaders in the new social movements actively

promoted themselves as having the means to deal with them. These self-promoters were, as Strauss (1975) has outlined in his examination of the rise of professions, possessed of a sense of mission:

It is characteristic of the growth of specialities that early in their development they carve out for themselves and proclaim unique missions. They issue a statement of the contributions that the speciality, and it alone, can make in a total scheme of values and, frequently, with it an argument to show why it is peculiarly fitted for this task (1975:11).

The child savers, as they have been termed, possessed 'a resolute belief in the righteousness of their mission' (Platt, 1972:3). Infused with this belief, the first charity society movement in the United States was established in Buffalo, N.Y. in 1877 with the intent of using helping agents to provide services to individuals and families. Two years later, the first national organization of charity workers, the National Conference of Charities and Correction, was established (Gartner, 1976). The thrust of these, and other similar organizations, was towards the reform of social institutions. In this sense, the reforms which occurred in children's institutions per se were only part of wider efforts to change the way in which children would be socialized.

In Canada, as in the United States, this led to the establishment of compulsory education. This was first adopted in Ontario in 1871 (West, 1984). Educational institutions became an alternative to the more formalized housing of children in other types of facilities. This was followed in 1874 by the provision of legal authority to charitable societies to prevent the maltreatment of apprentices. This opened the way for adoption and institutional care to become alternatives to the apprenticeship system which had previously existed. In Ontario, in 1884, The Industrial School's Act was enacted, providing for the establishment of

residential training schools, although financial constraints prohibited their subsequent wide-spread construction by the municipalities. Finally, Ontario's Children's Protection Acts of 1888 and 1893 were passed (Ontario Ministry of Community and Social Services, 1979). Throughout Canada, similar Acts were passed which defined children's dependent relationship to the State, and the State's subsequent responsibilities to children.

While reformation and education appear to have always represented a partial intent of institutions, the age of reform demanded that these goals be pursued more adamantly and systematically, and with greater sophistication. These demands would lead, eventually, to the emergence of child care work as an occupation.

#### The Rise of Institutional Child Care Work in North America

If one wishes to look for the occupational antecedents of institutional child care work in the early 1800s, the jobs of guard in a reformatory or prison or of matron in an orphanage appear to be most closely related. Indeed, the male-disciplinary function of the former and the female-nourishing function of the latter can be seen as complimentary roles which have been brought together in the modern role of child care work.

A clear differentiation of power, roles, and status appears to have existed between these early front-line workers and their supervisors and administrators. The functions of lower-level staff were to maintain routine, order, and cleanliness, while it was upon the shoulders of the administrator that the duty of molding the style and form of the institution was placed. The influence of lone administrators in placing their stamp upon certain institutions is described often in the literature (e.g.

Folks, 1907). That this essentially hierarchical form of organization still persists in many institutions today appears to coincide with Stinchcombe's observation that, 'organizational forms and types have a history, and that this history determines some of the aspects of the present structure of organizations of that type' (1965:153).

Front-line staff positions in children's institutions have never been well paid. In some cases, people may have worked at the institutions for little more than room and board. For example, when the State Almshouse at Monson, Massachusetts was formally abolished in 1872 and turned into a primary school, many of the adult paupers remained at the institution in the capacity of helpers (Folks, 1907:34). That such arrangements may have occurred is also suggested by Marks (1973) who notes the likelihood that the children of staff were included in the institutional roles. A commissioner, commenting on the care at Randall's Island, New York, in 1847:

. . . condemned unsparingly the custom of detailing adult paupers, vagrants, and even criminals from the city institutions to care for the children. "Proper and efficient nurses should be hired, whose characters are a guarantee for the propriety of their actions" (Folks, 1907:20).

Work-for-wages, even minor amounts, was also accompanied by an attendant loss in status and authority, for the care and reformation of children was perceived as a mission which could only be lessened by mercenary considerations. For example, the Roman Catholic Chaplain at Penetanguishene Reformatory in Upper Canada expressed doubt as to whether professional prison workers, such as school teachers, could deal conscientiously with young prisoners since:

. . . to labour day and night cordially and cheerfully for the moral reformation of young offenders is a

work of charity, and which can hardly be expected from hirelings (quoted in Shoom, 1972b:262).

Thus, persons with a dedicatory ethic 'which elevates service motives and denegrates material rewards' (Lortie, 1969:40) obtained compensatory benefits of status and authority. The role of the volunteer, although below that of the supervisor, was higher in status than that of the lower-level guard or custodian.

Although orphanages may have been somewhat less regimented than the institutions for delinquents, on the whole one is impressed with the stress placed upon routine and discipline in the day-to-day functions of all institutions. The perception that children, whether dependent or delinquent, were ultimately indistinguishable as to their needs led to similar routines. Moreover, individual considerations were often subject to the demands of the institution for order. As Marks (1973) has commented, obedience was considered a prime virtue of every institution. Obedience, routine, and discipline coincided with the orderly management of the institutions, particularly in those where the inmate population was large. Thus, inevitably, the best intentions of reformers were often subordinated to the requirements of the system.

Yet, a few forward-thinking administrators of the time appear to have considered the role and the personal qualities of the staff who had to maintain these routines. For example, Joseph Allen, the administrator of the Westborough Reform School from 1861 to 1867, wrote:

The most difficult thing a superintendent has to do is to select assistants adapted to the work required of them. Such as have more than a "dim idea of their duties and responsibilities" should be demanded in Massachusetts. If he is successful in this, all his other duties will be comparatively light. One inefficient officer will more than neutralize the labors of an excellent one (quoted in Marks, 1973:53).

Allen's concerns about staff were soon reiterated by numerous reformers. The credentials, qualifications, and characteristics required of people who would function in the social occupations was regularly mentioned in reports of the late 19th century. In their Report of 1867, Wines and Dwight noted several suitable qualifications of prison officers: strict and uniform sobriety; mild temper; quiet manners; pure conversation; decisiveness and energy; humaneness and benevolence; high moral principles; habits of industry, order, and cleanliness; sterling and incorruptible honesty; etc. (1973:120-22). At the International Prison Congress, held in London in 1872, the American delegation made a series of proposals dealing with the need for increased professionalization of staff in prison settings. Besides possessing a faith in the capabilities of reform, prison officers were stated to require:

. . . entire self-devotion, a calm and cautious judgement, great firmness of purpose and steadiness of action, a keen insight into the springs of human conduct, large experience, a true sympathy, and morality above suspicion. Prison officers, therefore, need a special education for their work, as men do for the other great callings of society. Prison administration should be raised to the dignity of a profession. Prison officers should be organized in a gradation of rank, responsibility, and emolument; so that persons entering the prison service in early life, and forming a class or profession by themselves, may be thoroughly trained in all their duties (Wines, 1968:51).

The American delegation also made suggestions in regards to the function of institutions for children:

Preventive agencies--such as general education, truant-homes, industrial schools, children's aid societies, orphan asylums, and the like, designed for children not yet criminal but in danger of becoming so--constitute the true field of promise in which to labor for the prevention and diminution of crime (Wines, 1968:52).



Beyond the prevention and diminution of crime, the true field of promise for institutional workers lay in increased status and salary, and, finally, in the hope of a career. In the wake of new reforms and what has been termed The Age of Treatment, people-changing became both a profession and a moral injunction (Platt, 1969:67). In order to become part of this movement to professionalism, institutional workers were required to view their own work duties as more than custodial; and, in turn, to convince others of this perception. This further demanded that they reject the ideas of biological determinism which were predominant at the time. As Platt has remarked concerning correctional workers:

. . . even though the job of guard requires minimal training, skill, or intelligence, crime workers did not wish to regard themselves as merely the custodians of a pariah class (1969:29).

There can be no doubt that, towards the end of the 19th century, every institution, whether for children or adults, was infused with the new paradigm of treatment. In children's institutions, treatment meant education and training, and reformatories became 'industrial schools' (Folks, 1907).

At the same time, these changes in the function and purpose of the institutions did not immediately alter the role or status of the front-line staff within children's institutions. Instead, the role of technicians of change (and accompanying benefits) went to the newly-emerged occupations of social work and psychology.

This chapter will not describe, in detail, the rapid growth and acceptance which social work, in particular among the helping-professions, was able to attain in the early years of the 20th century. Suffice it to say that training in social work was being given in some

colleges early in the century, and soon spread elsewhere; and that between 1917 and 1926, five national social work organizations were founded in the United States (Gartner, 1976). To the extent that these represent a rapid, if rudimentary, attempt to possess two of the attributes of a profession--systematic theory and a professional culture (Greenwood, 1957)--social work can be seen to have reaped many of the benefits of the reform movement.

In the early 1900s, as social work fully asserted itself as an occupation in the community, the construction of large-scale institutions decreased. This was due in large part to the perception that such facilities were not suitable environments for many types of children. Instead, smaller, cottage-like facilities were constructed, and foster home placements encouraged. Orphans and less-disturbed children were kept in their own communities, out of the large institutions which still existed.

In the 1920s and 1930s, children's institutions began to change from giving purely custodial care and education to providing individualized psychological treatment. However, this change did not benefit the front-line staff in the institutions.

Professionals became responsible for carrying out the new treatment ideology, leaving the child care staff with custodial or behavior management responsibilities. The result was a hierarchical system which, for many years and continuing to the present time, caused a major split between the roles of the child care staff and the professionals (Machson and Tailby, 1976:1-2).

This observation is supported by Austin who notes:

. . . the field of residential care adapted, not by professionalizing those staff who had been working all those years directly with the children, but by creating a professional middle class of social

workers, psychologists, etc. . . . The result was that the child care worker remained uneducated, underpaid, and exploited. In fact, with the emergence of this professional middle class, his status actually declined (1981:250-1).

Thus, into the previously existing organizational structure of superintendent and custodian was now introduced the therapist.

The occupation of child care worker began to fully emerge in the 1930s and 1940s through the efforts of Aichborn, Bettelheim, and Redl (Machson and Tailby, 1976). Through their efforts the concept of the 'therapeutic milieu' became widely accepted. Whereas the routines involved in population maintenance and control within an institution had previously been perceived as merely a necessary requirement of the institution, they were now seen as part of the treatment required by the inmate. The new perception viewed the institution as part of the treatment, and not merely the place where treatment occurred (Shyne, 1973:121). Moreover, as the technicians who oversaw the systematic running of the institution, front-line staff could now be seen as performing duties which not only pre-conditioned treatment, but which were, in themselves, a form of treatment. This perception, which lies at the heart of modern institutional child care, will later be elaborated upon. Finally, due to the work of Anna Freud in the 1940s, the importance of relationships as part of the therapeutic milieu became a tenet of child care theory.

While the status, role, and commensurate benefits of child care workers have not altered greatly since the emergence of the occupation in the 1920s, the last fifteen years have seen an increase in the number of universities providing child care degrees, and a proliferation of child care associations (Austin, 1981). Today, numerous debates are

occurring in the literature as to the relative merits and techniques which might propel child care into recognition as a profession. (For example, Toigo, 1981; Austin, 1981; Peters, 1981; Berube, 1984.) Setting aside the question of what being a professional means, it is interesting to note that child care work in North America has today obtained enough status to at least be considered, as Roth (1974) might term, an 'on-the-make profession'.

Having presented, albeit briefly, a history of child care work in North America, the following segment of this chapter shall more particularly investigate the growth of the occupation within the Province of Alberta.

#### Child Care Work in Alberta, 1905-1952

When it became a province in 1905, Alberta was largely a rural society. This, combined with financial considerations and the new philosophies of how to deal with children-in-need, acted to restrain the construction of institutions throughout the early decades of the century. The new ideas encouraged the placing out of children into foster homes or, alternatively, small, cottage-style facilities. Only in the case of certain types of children were large institutions still considered a viable means of treatment. An examination of these two groups--those deemed to be suitable for institutions and those not--suggests that, by the beginning of the 20th century, the classification systems had come to represent a means by which the origin of a problem was located. In the case of neglected and dependent children, the source of the problem lay outside of them. Since they were not in need of treatment, the number of facilities built to house them decreased. For chronic delinquents, the mentally ill, the physically handicapped, and the retarded, however, the

source of the problem was now firmly located within the child.\* Although Alberta was to remain largely de-institutionalized for many years, this criteria was to have major influence upon the types of institutions which were built.

In 1908, Children's Aid Societies were formed in Calgary, Lethbridge, Edmonton, and Medicine Hat for the care of neglected children. In the same year, the Industrial School Act was passed by the Legislative Assembly of Alberta, empowering the Attorney General to appoint a Superintendent of Industrial Schools.

One of the first actions of the newly-appointed Superintendent was to conduct a study of the problem of neglected and delinquent children in the province, with particular emphasis upon the latter. His report, submitted six months later, recommended that:

. . . owing to the cost of the installation of the modern Cottage System institution, and owing to the fact that the Province of Manitoba was prepared to accept the care and training of boys needing Industrial School training at the Industrial School at Portage la Prairie, an agreement should be entered into with that province for the care of boys who were beyond the stage where it was possible to deal with them outside of an Industrial School (Dept. of Attorney General, 1913:7).

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\*That this distinction still exists can be shown by the following quote from Kadushin:

The impetus for placement in institutions for the dependent and neglected comes primarily from pathology manifested in the social situation; impetus for placement in other more specialized types of institutions (those for delinquent, emotionally disturbed, mentally ill, physically handicapped, and mentally retarded children) results primarily from pathology manifested by the child (1973:148).

In 1909, nine children were sent to the Industrial School in Portage la Prairie by the Province of Alberta. This occurred despite the fact that the Juvenile Delinquents Act, which became Federal law in 1908 (West, 1984), was not actually proclaimed in the Province of Alberta until April 25, 1914 (Department of Public Health, 1939). In later years, the number of children sent to the school appears to have averaged between nineteen and twenty-four per year. The children were rarely under the age of fourteen. The school operated according to a level system, whereby the children obtained various privileges depending upon their behaviour. The school emphasized practical education, and therefore provided training in laundry, kitchen, stable, poultry, gardening, tailoring, carpentry, and blacksmithing (Department of Attorney General, 1912:33).

The Province's arrangement with Manitoba appears to have continued until the establishment of Bowden Institute in Alberta in the early 1950s. In fact, as the Alberta Royal Commission on Juvenile Delinquency pointed out in 1967, the province has never had a legally constituted industrial school (1967:38).

While the arrangement with Manitoba dealt with some delinquents, the province still had to consider the case of dependent children. In 1909, the Children's Protection Act was passed. The Office of the Superintendent of Neglected and Dependent Children was established to administer the Act, under the continued auspices of the Attorney General's Department. Under the new Act, the province continued to pursue non-institutional interventions. Children were left with their natural parents whenever possible, or were placed with relatives, or in foster homes. Occasionally the children were sent to Roman Catholic or

other boarding schools. The Department appears to have consciously located the problem either within the family or within the child himself. In those cases where the problem was seen to be the child's, and where placing out in a foster home did not resolve the problem, then mental or physical defects were looked into. Only as a last step, and where the children's problems had manifested themselves in continuing delinquency, were they sent to an industrial school. While delinquent boys were dispatched to Portage la Prairie, wayward girls were sent to a twenty-bed institution in Edmonton built in 1911 and managed by the Sisters of the Home of the Refuge of the Good Shepherd (Department of Attorney General, 1913:39).

Besides financial considerations, Alberta's continued refusal to be involved in the public institutional care of children appears to have been influenced by the prevailing social work philosophies of the day as shown in the Superintendent's Report for 1910-11:

Were a large institution erected in the province, the tendency would be to send children to that institution who could be more readily disposed of in foster homes, and disposed of with a greater advantage to the child, and a greater advantage to the state (Department of Attorney General, 1912:20).

Alberta's continuing policy of non-institutionalization of delinquent children was noted on numerous occasions during the succeeding decades. For example, a Royal Commission investigating the penal system in Canada in the mid-1930s noted:

The authorities at Edmonton, Alberta have evolved a scheme as an alternative to training schools that has had considerable success. They have prepared a panel of foster homes. These homes are thoroughly inspected and well supervised and are usually situated on a farm some distance from the city. When it has been decided that juvenile delinquents should be removed from the surroundings of their delinquency,

they are put in one of these foster homes on probation and under supervision. The judges of the juvenile court and the children's aid authorities of Alberta report that marked success has attended this treatment . . . . We are advised that the success of this system in Alberta has been due to the very strict character of the supervision exercised over the youths and over the homes in which they have been placed (Department of Public Health, 1939:160).

As late as 1941, the Superintendent of Child Welfare and Mother's Allowance Branch remarked:

The report of a department dealing with the child problem must of necessity be a report dealing practically with the whole social machinery, working against community irresponsibility and mitigating those tendencies that have a bearing-down influence on the whole life of the community . . . . The fact that Alberta has been conducting this work practically without the use of institutions is significant in as much as the system is new and gradually breaking down old traditions that expensive institutions with a great deal of machinery are necessary for handling neglected and delinquent children. In all probability statements will be advanced by those who advocate the institutional care of children that the institutional system is the only one possible, but it is sufficient to say that Alberta has found it possible to carry on a reformatory without an institution and to handle neglected children without permanently housing them within the walls of an institution, for their permanent care and protection (Department of Public Health, 1946:173).

The Superintendent had been particularly proud the year previously to report that 'no child was committed to a Reform school during the past year' (Department of Public Health, 1941a:177).

At the same time, the province did experience a growth of smaller institutions for dependent children during the early years. By 1911, there was a Children's Shelter in Calgary, operating out of the Old Maternity Hospital; by 1912, another Shelter existed in Lethbridge, and in Edmonton, a forty-five bed Shelter had been built which boasted of being 'possibly the most modern Children's Shelter in Canada, and one



of the best on the American continent' (Department of Attorney General, 1913:32). Other sectarian or private homes for dependent children emerged throughout the province.

The most serious concern of the Department appears to have been the number of defective children in the province, estimated at twenty in 1909. By 1913, the number of mentally deficient children in the province was estimated at between 150-200. The concern was expressed that a lack of proper accommodation might see these children placed in the industrial schools along with delinquent children (Department of Attorney General, 1914:36). As a result of these concerns, the first Home for Mentally Defective Children was opened by the Education Department in 1918 (Department of Attorney General, 1919:9). In 1923, the Hospital for Returned Soldiers in Red Deer was renamed the Provincial Training School and the children from the Home for Mentally Defective Children were removed to this facility (Department of Public Health, 1924:5).

While the possible age of inmates was not restricted, children tended to predominate the School's census. Of the total of 190 inmates at the Training School in 1931, 114 (60%) were under the age of nineteen. The Annual Report of that year describes a camp held by the institutional children at Sylvan Lake:

The children thoroughly enjoyed the camping and bathing as a relief from the year-long routine of institutional life, were greatly benefited (sic) in health. Some, also, were benefited (sic) in disposition and temperament . . . .

Two of the staff have got together an enthusiastic group of Girl Guides. The matron and registered nurse have given the high grade girls some simple instruction in elementary nursing and first aid. A number of Sunday School classes are now being regularly held for both boys and girls (Department of Public Health, 1932:109-10).

In 1925, the Children's Protection Act was superceded by the Child Welfare Act. The Superintendent of Child Welfare became responsible for administering the new Act though still under the Attorney General's Department. This was to remain the case until 1936 when the Child Welfare division, including its supervision of delinquents, was placed under the Department of Public Health (Powell, 1977:152).

In 1929, a Mental Hygiene Clinic was started in Edmonton. This was soon followed by similar clinics in Calgary and Lethbridge. These clinics received clients either by self-referral or by referral from other agencies (Child Welfare, Juvenile Court, schools, parents or guardians, Salvation Army, etc.). Patients received both physical and mental examinations, including psychometric tests on occasion, and recommendations were made as to treatment. While in theory clients could be of any age, the majority of patients were young; for example, of 354 cases referred to the three clinics in 1931, 69.5% were less than fifteen years of age; another 14.9% were between the ages of sixteen and twenty. The largest percentage of these young clients was male (Department of Public Health, 1932:81). In keeping with the philosophy of the government at the time, treatment recommendations tended to avoid institutionalization. Changes in home or school discipline were often suggested, or a more organized social life emphasized. When institutional treatment was recommended, the Provincial Training School, the Provincial Mental Hospital at Ponoka, or the Industrial School in Portage la Prairie were the facilities mentioned. These three institutions can be seen to represent the range of problems viewed as occurring within children: retardation, mental illness, and delinquency. More minor behavioural disturbances were presumably subsumed beneath one of the

other typologies, or otherwise dealt with through the placing-out system of foster homes.

During the early decades of the province, institutional care of children tended to focus primarily upon the mentally ill or retarded. Overcrowding is mentioned frequently in the reports of mental institutions during this period. For example, a report by the Mental Hygiene Clinics in 1931 stated that:

. . . the greatest obstacle and the most discouraging feature of the work has been the lack of facilities for dealing with the cases presented. The training school is filled to capacity, and with so long a waiting list that only the more urgent cases can be admitted. These cases, so frequently low grade, crowd out the more hopeful, higher grades. Supervised hostels for girls, farm colonies and vocational schools for boys, and even a list of good homes to which appropriate cases could be sent for supervision and training, are greatly needed (Department of Public Health, 1932:80).

In 1931, there were two children under the age of fifteen at the Provincial Mental Hospital at Ponoka; twenty-one others were between the ages of fifteen and nineteen. In the same year, at the Provincial Mental Institute, Oliver (later, the Provincial Mental Institute, Edmonton), there were two children under fifteen, and twelve others between fifteen and nineteen; and at the Provincial Training School in Red Deer, sixty-one children under fifteen, and fifty-three more between the ages of fifteen and nineteen (Department of Public Health, 1932).

By 1941, the same institutions had the following totals of young inmates: Ponoka--eight under the age of fifteen, thirty-three between fifteen and nineteen; Edmonton--eight under the age of fifteen, thirty-eight between fifteen and nineteen; Red Deer--forty under the age of

fifteen, eighteen between fifteen and nineteen (Department of Public Health, 1942).

The Report of a Royal Commission in 1948 established the need for examination and approval of foster homes. It also paved the way towards paid rather than free foster homes, although the latter continued to exist in Alberta until 1962 (Kufeldt, 1977:9). It is perhaps significant that this change occurred simultaneously with shifts in the province's socio-economic structure, brought on by the oil discoveries of the late 1940's.

In summary, the years 1905 to 1950 saw in Alberta the same sort of delineation of the problem as had occurred all over North America. The typology, and hence, the types of institutions created to meet the needs of each, consisted of four categories: the dependent, the delinquent, the mentally deficient, and the mentally ill.

Dependent children were cared for either through foster care or by private boarding schools. Delinquent's were generally placed on probation and left at home, or sent to foster homes, or as a last resort, sent to an industrial school: the one in Portage la Prairie for boys, or the home in Edmonton, operated by the Catholic Sisters. Mentally deficient children were sent to the Provincial Training School in Red Deer, and the mentally ill to one of the mental hospitals. On the whole, minor behavioural disturbance does not appear to have been defined.

The classification scheme adopted by the province, and the mode of dealing with the perceived problems prevented the growth of institutional child care as a profession in the province. The closest occupation to child care during this time appears to have been that of attendant; however, reports of the institutions suggest that this occupation was

largely custodial in nature, and that therapeutic and decision-making roles remained the domain of the nursing staff, or occasionally, a social worker.

#### Child Care Work in Alberta, 1953-Today

Beginning in 1953, responsibility for delinquents came under the Attorney General's Department once more. In the same year, Bowden Institute was opened as a provincial jail and training school for young offenders between the ages of sixteen and twenty-four years. In 1955, an extension was added to the main building. This extension was meant to be a custodial and training institution for juvenile delinquents.

From its inception, Bowden appears to have been fraught with problems. The Royal Commission report of 1967 commented:

Problems being faced by the staff of the Juvenile section of the Institution, in their day-to-day operation, can be attributed in large measure, to the total inadequacy of the physical facilities. These problems are further magnified by frustrations stemming from an illogical administrative structure and policy conflicts (1967:44).

The illogical administrative structure mentioned refers to the ambiguous and contradictory jurisdiction held by two separate offices at the time: the Superintendent of Juvenile Offenders and Probation Branch; and the Superintendent of Correctional Institutions.

In 1958, the Alberta Institution for Girls was opened in Edmonton, with an addition built in 1965. The role of 'on the floor' workers at these two institutions was aptly summarized by the Royal Commission's report:

One of the most striking contradictions apparent to your Commission in assessing the Juvenile Section of Bowden Institution and the Alberta Institution for Girls, was that at Bowden where the physical facilities are minimal for both inmates and staff, the

staff, largely untrained in professional therapeutic sciences, had made every personal effort to employ rehabilitative treatment, to the extent that during the past year they were directed to desist and perform merely a custodial function. On the other hand, at Alberta Institution for Girls where the physical facilities are excellent, no such attempt has been made to stress and implement sound therapeutic treatment. Under the existing administrative structure and policy, however, the Alberta Institution for Girls is operating in complete obedience to administrative policy (1967:50).

When the jurisdiction over the treatment of juveniles went over to the Department of Health and Social Development in 1970, Bowden Institute remained under the administration of the Solicitor General's Department. However, the Alberta Institute for Girls became part of the Department of Health and Social Development and was made co-ed. Today it is known as the Youth Development Centre.

During these same years, the Department of Public Welfare had retained responsibility for dependent and neglected children. A few privately-run institutions and homes for these children arose during the 1950s. In 1960, the first public institution for emotionally disturbed children was built in Red Deer as a special unit of the Provincial Training School (later, the Alberta School Hospital), and was named Linden House. According to the First Annual Report of the Home:

Staff were selected on the basis of better than average intelligence, previous demonstration of ability to cope with disturbed children at the school and a certain amount of sanguinity of temperament. In addition to nursing staff there were also two psychologists, two social workers and the Medical Superintendent, acting in lieu of the House psychiatrist (Department of Public Health, 1962:180-1).

Attendant staff were included in training and consultations at the House. Therapy seems to have involved routine and the teaching of

good habits. Corporal punishment was not employed. The House's Fourth Annual Report sums up the therapy used as follows:

It may be of interest to note that no rigid adherence to any specific psychiatric philosophy for the therapists was ever prescribed. Therapists with conventional, psychoanalytic or Pavlovian orientation were allowed to employ any or all of these techniques and all found merit. In the main, the therapy staff tended to utilize a "psychiatric pot-pourri" in coping with therapy problems and this was found most successful (Department of Public Health, 1965:195).

It is apparent that the perception of the role of the institutional front-line staff was changing during this time. Whereas therapy was previously described as something that occurred in the institutions and was the preserve of the nursing, psychiatric, or social work professions, the institution and its operation appears to have been increasingly seen as being part of the therapy. This change in perception is alluded to in the Annual Report of the Child Welfare Branch for 1961-62:

It has been particularly gratifying to note the interest and willingness of every child care institution in the province in changing their function from a purely custodial type of care to a specialized defined service that meets the specific needs of specific types of children (Department of Public Welfare, 1962:28-30).

The Annual Report for 1962-63 further noted:

The tremendous change and development of specialized services in the privately operated children's institutions has been one of the highlights of the year. The opening of such institutions as the Roper Hull Home in Calgary and the Kiwanis House in Edmonton has provided much needed treatment facilities for the adolescent boy who cannot adjust to or fit into a foster home. Special institutions such as the Don Bosco House in Calgary and Our Lady of Charity School for Girls in Edmonton have cared for many youngsters who are not yet ready to adjust to foster home placement (Department of Public Welfare, 1963:26-7).

The delineation of specific types of children provided the basis for new types of institutions and concomitant care. The Tenth Annual Report of Linden House for 1969 noted that:

Over the years it has become increasingly apparent that the term "emotionally disturbed children" has little diagnostic validity. If some attempts were to be made to establish nomenclature, this should be under three broad categories: psychotic children, psycho-neurotic children and socially maladjusted children, associated with faulty environmental factors (Department of Health, 1971:144).

It was further stated that the preponderant category was that of the 'socially maladjusted child'. Such a classification legitimated the existence of an occupation which would deal with neither the severely mentally ill nor with the severely mentally retarded. Thus, during the 1960s an increasing number of group homes and larger institutions were built to house the new type of child. In addition to those facilities already mentioned, the old South Side Boys Home in Edmonton, which had been a detention unit for several years, became a closed unit for seriously emotionally disturbed boys in 1964, (Department of Public Welfare, 1966:11). In 1967, the Westfield Diagnostic and Treatment Centre for both boys and girls opened in Edmonton as an outgrowth of the Boys Home. In 1969, Westfield became part of the Department of Health and Social Development as it was widely felt that juvenile delinquents, neglected children, and other children with emotional or behavioural problems all fell into the same rehabilitative category (Report of the Provincial Ombudsman, 1979:8).

In 1973, the first Youth Assessment Centres were opened in the province. These were designed as locked facilities to be used for the purposes of detention and assessment. Changes to the Child Welfare Act



in 1977 were particularly important for these Centres as the new Act allowed for the confinement of youths for a period of ninety days thought either a Compulsory Care Order, authorized by a judge of the Juvenile and Family Court; or through a Compulsory Care Certificate, authorized by the Director of Child Welfare. Extensions could also be obtained by Certificate. Offenders, meanwhile, were also confined at the Centres under the Juvenile Delinquents Act. The periods of detention, in these cases, were not necessarily fixed, but usually amounted to thirty days. The importance of these Centres for child care work was that they combined the dual roles of the traditional custodian with that of the emergent diagnostician.

By 1981, there were at least fifty public or publicly-funded residential resources in which child care workers were employed in the province of Alberta (Appendix A). According to 1984 figures, there were approximately 1,400 child care counsellors in Alberta, either public or private, working in either residential care or community day programs (Berube, 1984:1). As of March 19 1985, there were 406 child care counsellors in the Public Service of Alberta.

As child care began to emerge as a specific occupation, it also began to assert its status within the domain of the helping professions. This can be seen in the rise of associations within the province towards the end of the late 1960s. In 1967, the Alberta Association of Child Care Centres was incorporated. While one of its stated objectives has been to 'endeavor to obtain and maintain the best working conditions for all employees working in the child care field' (Undated:2), the Association has also been the medium for the setting of standards in child care for the province. In 1975, a Standards Development Committee was

formed to investigate and submit recommendations for standards in child care. This resulted in the publication, in 1979, of Standards for Child Care (Alberta Association of Child Care Centres, 1981).

Meanwhile, following four years of informal activity in the Calgary region, the province-wide Child Care Workers Association of Alberta was formally established in 1972. Its main function has been to provide a forum for child care workers. The association has also sought to create uniform standards of rates of pay, educational requirements, and hiring procedures. In an effort to advance the autonomy and status of child care work, the Association has established its own code of ethics and has recently been granted sole authority for certifying child care workers in the province.

Finally, the emergence of Child Care as a specific occupation, combined with pressures from each of these associations, has led to the establishment of Child Care Education programs at both Grant McEwen College in Edmonton and Mount Royal College in Calgary. According to a telephone conversation held between myself and a past executive-officer of the Child Care Worker's Association of Alberta, other programs are also likely to start in the near future in Lethbridge and Grand Prairie.

At the same time as it has grown in acceptance as an occupation, child care in Alberta has also experienced problems of high turnover, low occupational solidarity, job reclassification, and privatization.

An indication of the first is given by Berube who reports that 'Child Care Counsellors have the highest turnover rate of all the major health and social service manpower groups in the province' (1984:1). The turnover rate in Alberta in 1979 was 35.8%; 43% in 1980; 47% in

1981; and 26.6% in 1982. The drop in 1982 was attributed to the state of the provincial economy at the time (Berube, 1984).

The problem of low occupational solidarity can be seen in the inability of the Child Care Workers Association of Alberta to increase its membership. Of the Association, Berube states:

. . . it was only through the efforts of a few committed and hard working individuals that it has survived until today in spite of limited interest and a small membership. At present the Association has 140 paid members and this number must surely be increased substantially if the Association is to become truly representative of the field and if it is to have a significant impact on the policies and practice in child care (1984:7).

The past year has also seen a major change in the way in which young offenders are dealt with by the Law. In April, 1984, the Young Offenders Act replaced the Juvenile Delinquents Act, whereupon offenders between the ages of twelve and sixteen are now dealt with in a manner similar to that in the adult system. Young offenders in Alberta are now dealt with by the Solicitor General's Department, which has meant a transfer to that administration of some facilities previously operated by the Department of Social Services and Community Health. The Youth Development Centre in Edmonton was part of this transfer. For child care workers at this institution, it has meant a reclassification into the correction's officer series, with attendant changes in function and benefits. The relative ease with which child care workers could be redefined to become correction's officers does little to enhance a perception of uniqueness concerning the worker's skills. Moreover, whatever reclassification might mean for these particular workers, it surely means a loss of potential members from the Association, and in turn, a concomitant loss of influence in pursuing larger occupational aspirations.

Finally, the increasing trend towards privatization of social services holds the possibility that fewer child care workers will be employed within the public service. Although current provincial labour laws prohibit the right of public sector employees to strike, privatization may leave workers with even less opportunity for collective bargaining. Left as individuals to arrange their contracts, workers will likely find their salaries, benefits, and job security subject to the profit motive of their entrepreneurial employers.

### Summary

This chapter has traced the rise of child care work in North America and, particularly, in Alberta. This history has highlighted two important facts about child care work which were present at its birth and which have continuing influence upon the status of child care work today: 1) Its emergence from a primarily custodial background; and 2) Its concomitant conflict with other established professions in attempting to create for itself a separate identity and status.

In order to further understand the position of modern child care work, it is necessary to examine certain dominant themes within child care theory which structure the worker's day-to-day experiences in the job. This will be the task of the following chapter.

## CHAPTER TWO

### CHILD CARE WORK AS AN OCCUPATION

#### Dominant Themes in Child Care Work

##### Treatment

Treatment is the manifest justification for the routines and actions implemented by the child care worker. Even in institutions which are not designated as providing treatment, the maintenance of order and routine are seen as being of therapeutic benefit. That this perception of the value of routine is central to child care theory is readily evidenced in the literature:

The "structure" of the institution represents a fundamental therapeutic component of residential treatment. It should provide a life rhythm of routines and expectations. This tends to diminish conflict because there are fewer individual choices about routines of daily living. It represents concreteness rather than vagueness, certainty rather than confusion, and simplification instead of complexity (Adler, 1976:3).

This perception, originally addressed by reformers in terms of the physical conditions of the institutions, also obtains in regards to the role of staff in the institutions:

Too often, the necessary routines related to physical care of the child that are inherent in any form of group living have been accepted as sheer drudgery, in no way part of a treatment program. This is unfortunate since, when routines are properly understood and used, they are among our most valuable educational and treatment tools (Stone, 1963:6).

and

. . . the child care worker is the person to whom institutionalized youngsters can look for the stability, order, and security that are so often missing

from their lives both in the institution and outside (Beker et al., 1972:4).

Thus, the necessary exigencies of institutional management are perceived to be inseparable from treatment. That which is the need of the institution for regularity and control is also the need of the child.

Two basic needs are the foundation of child care: safety and security. To feel secure a child must know that there is stability and consistency in the environment and in the caretakers. This is one of the most important values of routine in child care. Routines provide predictability in the short-term future and this helps one to feel more secure (Klein, 1975:24).

The stated function of child care workers is to maintain a 'milieu' which both is, and is conducive of, treatment. Maintenance is ensured through surveillance; the provision or withdrawal of rewards; the isolation of 'problematic' children from the group, so as to avoid contamination; and programming. The latter consists of formalized activities designed to occupy the inmates time. These activities are often justified as having therapeutic value.

When the milieu is disrupted, the worker must gauge the degree and extent of disruption. Depending upon this judgement, the worker may then employ either one of several formal mechanisms and rules designed for the purpose of re-establishing the routine. Formal rules might include various losses of privileges, while mechanisms might include physical restraint or, in some cases, confinement to an isolated area of the institution, often referred to as 'the quiet room' or 'the thinking room'. In whatever manner the milieu is maintained, or reinstituted in its routine, justification lies in the need of the disruptive child (and other children around him) to perceive order.

At the same time, child care workers are also told that they must remain cognizant of each child's need for individuation. While maintaining the fundamental structure perceived as necessary to the group, the worker must also remain flexible towards the needs of the individual child. Without appreciably resolving this dilemma, Adler does describe this conflict:

The uniqueness of the individual must not be neglected for the benefit of group control. Although group living should be designed to provide optimum growth possibilities for each child, one cannot expect child care workers (or teachers) to disregard group needs to meet an individual child's excessive needs for physical care, attention or special treatment (1976:7).

The provision of treatment through the maintenance of routine and order thus constitutes both a primary theme and in imprecise dictum which child care workers must consider in performing the day-to-day functions of their job.

### Teamwork

Teamwork is the organizational form through which treatment plans are to be made and implemented. The individual child care worker is part of two teams: 1) that which is his own team, consisting of other child care workers and headed by a supervisor; and 2) a larger therapeutic team consisting of social workers, psychologists, teachers, and other professionals. The primary task of the first team is to implement the plans devised by the second team.

Because of his direct day-to-day contact with the child, the child care worker is the focal point through which the plan is brought to fruition (Klein, 1975:29). However, the worker is not autonomous:

He is part of a team and cannot "do his own thing".  
The worker carries out the plan, applies the

knowledge and information, and works toward a commonly held goal (Klein, 1975:30).

Adler further advises:

Change or deviations from established practice cannot be left to the discretion of an individual (1976:4).

Moreover, the separate identities of child care workers 'must be submerged into a team identity' (Klein, 1975:79). This means that, once a plan has been devised, all members of the team are supposed to go along with it. Unity of approach and implementation is considered to be an important aspect of effective child care work. Team integration maintains both the therapeutic environment and enhances goal achievement (Johnson, 1982). Mayer states:

It is difficult to implement a plan with which one disagrees, yet this is necessary at times, and the child care worker is expected to do so in a convincing way. To do otherwise would confuse the child. The attitude and reactions with which a plan is put into effect should not betray to the child the differences of opinion which may exist (1958:154).

Teamwork fulfills two important needs: First, by reducing internal conflict, teamwork meets both the child's and the institution's needs for order. Adler (1976) stresses the harmful effects of team disunity and role confusion upon the child. Similarly, Berry (1975) advises against allowing children to perceive rifts among the staff, as they provide for the possibility of manipulations by the children. The second need which teamwork fulfills is that of providing support, both emotional and practical, to individual child care workers (Mayer, 1958; Johnson, 1982).

In order to maintain teamwork, it is suggested that, prior to the worker's hiring, both he and the institution be aware of the other's



attitudes and values. In this way, potential disagreements may be diffused (Johnson, 1982). Beker et al. suggest that:

Since child care workers are usually happiest and most effective in settings whose philosophy mirrors their own, candidates for child care positions would do well to think through their own philosophies and to ascertain those of the institutions in which they are interested before accepting employment (1972:7).

Once the worker is hired, communication is considered to be the key to creating and preserving teamwork (Mayer, 1958; Eisikovits, 1980). Problems should be resolved either through direct contact between the conflicting parties, or with aid from an intermediary, such as the supervisor. In order that communication be effective, however, it is necessary that the child care worker be open to constructive criticism. This entails a willingness on the part of the worker to critically examine his own performance:

In a team it is necessary that each one ask himself, "What did I do to bring about a breakdown in teamwork, and what can I do to make the teamwork better?" (Mayer, 1958:152).\*

At the same time as the child care worker is told that he must submerge his identity and critically examine himself for the good of the team, he is also told that his individual personality is a key factor in

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\*Similarly, Strauss (1975) notes that nurses have been socialized to commit severe self-examinations and accusations. This socialization appears to be more successful than that occurring with child care workers. Strauss adds that, 'Nurses are generally much more vulnerable than the aides, because they are much more likely to assimilate psychotherapeutic concepts' (1975:214). In this regard it may also be noted that social workers appear to be more capable of self-examination and accusation than are child care workers, perhaps for the same reason as stated by Strauss.

being able to create the necessary therapeutic relationship with the child. Within the constraints of regulation and the team ethic, the child care worker does his job 'with his own unique style and personality, understanding, interpretation and warmth' (Klein, 1975:30).

The child care worker is also told that, although he performs a different function from other members of the therapeutic team, there remains a basic equality among everyone involved in the care of the child (Mayer, 1958:164). Such statements appear to be based more in faith than in a realistic appraisal of the situation, however. As noted in the previous segments of this review, there are marked historical differences in the power and status ascribed to child care workers and the other helping-occupations. That these hierarchical relationships continue today is noted by Berube (1984). Machson and Tailby also note 'residential staff often find that their supposedly separate but equal function on the treatment team is more theoretical than real' (1976:33).

Thus, as does the theme of treatment before it, teamwork represents, for the child care worker, an ambiguous requirement; for the worker must remain an individual within a team, and an equal among peers who have decidedly more power, status, and authority than himself.

### Generalism

Generalism is the form of the child care worker's actions in carrying out treatment plans. The generalist form of child care work can be seen in its definition as found in the Canadian Classification and Dictionary of Occupations (Appendix B). Klein notes that, 'The child care worker is not a therapist, nurse, social worker, or maintenance worker, although he does perform some of the functions of each' (1975:26). To these, Adler (1976) appends the additional functions of recreation

worker, housekeeper, and parent-as-teacher. As a generalist with whom the child interacts on a regular basis, the child care worker is a model of total adult functioning.

Recently, attempts have been made to redefine a child care counselor as a 'specialist who makes the general a speciality' (Berube, 1984:5). While this is clearly an effort to delineate the uniqueness of the occupation so as to enhance its status, the statement also magnifies the ambiguity which child care workers must face in their attempts to forge an occupational identity.

### Relationship

Relationship is the primary tool which the child care worker is to use in order to facilitate treatment. Beker et al. have stated that:

Much as the sculptor works with clay and the writer with words, the child care worker utilizes relationship as the basic substance or medium with which he works (1972:8).

The type of relationship described in child care literature as being therapeutic involves obtaining the trust and respect of the child so that he will begin to model himself after the worker (Klein, 1975).

Before he can create this relationship however, the child care worker is faced with overcoming a different form of relationship which is brought into existence at the moment of the child's entry into the institution. Of this relationship, Goffman has remarked that:

. . . one of the main accomplishments of total institutions is staging a difference between two constructed categories of persons--a difference in social quality and moral character, a difference in perceptions of self and other. Thus every social arrangement in a mental hospital seems to point to the profound difference between a staff doctor and a mental patient; in a prison, between an official and a convict; and in military units (especially elite ones), between officers and men (1961:111).

The form of the relationships which Goffman describes has been referred to by Simmel (1964) as that of 'superordinate and subordinate'. It has also been referred to by Shoom (1972a) as the 'authority relationship'. Whereas this form of relationship may be either transitory, or subject to reversal, or otherwise obscured within the open community, it is an explicit and ongoing fact of institutional life, coloring even the barest transactions which, of necessity, must occur. Within children's institutions, this relationship of unequals is made even more manifest, if perhaps more natural, by the difference in age between those being 'held in' and those doing the 'holding'.

Thus, the child care worker must get beyond this basic form of relationship if he is to engage in treating the child. Failure to overcome the inhibiting aspects of the authority relationship means that the worker's role is reduced to that of a mere custodian, or as stated by many workers, a 'baby-sitter'. The pressure to engage in a closer relationship with the child leads to an involvement cycle similar to that described by Goffman (1961:82). Goffman identified a closeness felt by attendants towards adult inmates as a result of constant contact. However, in the course of ongoing interactions, the attendants might withdraw for fear of being too close only to subsequently become involved once more with the inmates, thus beginning the cycle again. This sense of closeness is an unintentional aside to the roles being performed by the attendant and the inmate. Within children's institutions, however, a relationship of closeness between workers and children is both expected and encouraged. At the same time, as in the case of the attendant and the inmate, this relationship must also be kept within limits.

These limits describe once more the ambiguity of the child care worker's functions, an imprecise continuum along which the worker 'floats' in the course of performing his job; for, while he must obtain trust from the child, the worker simultaneously remains wary of him. The worker is warned to be aware of being manipulated (Mayer, 1958; Berry, 1975; Eisikovits, 1980) and is advised of the necessity of maintaining face (Berry, 1975; Adler, 1976). Similarly, the relationship cannot be totally open; indeed, it is largely a one-way communication of self. The child is expected to reveal the essentials of himself, while the worker parcels-out only those aspects of his character which model appropriate behaviour. For the worker, therefore, the theme of relationship involves a question of distance: to be neither too far nor too near to the child under his care.

#### Professionalism

Beker et al. state that, 'The effective child care worker functions as a professional' (1972:8). This is reiterated by Klein (1975). Ambiguously, however, such writers do not mean that the child care worker is a professional. Rather, the professionalism of child care workers refers to the manner in which they are expected to conduct their functions. The exact meaning of a professional manner is necessarily obscure because it is meant to deal with situations which are themselves undefined and undefinable. The emphasis upon worker's acting in this way is important precisely in these instances because of management's need to control the worker's actions.

Perrow (1979) has described three methods by which management, in various jobs and in various circumstances, may exercise control over a worker. These are: 1) direct control, consisting of fully obtrusive

measures such as order, rules, regulations, and surveillance; 2) bureaucratic controls based upon factors of specialization, standardization, and hierarchy; and 3) unobtrusive controls which attempt to control the cognitive premises underlying the worker's actions.

For child care workers, there are innumerable rules and regulations, and they are under relatively constant surveillance from both supervisors and co-workers. Child care workers also function within a hierarchy. However, the unpredictable nature of working with emotionally disturbed and/or delinquent children often requires unique and sudden responses beyond the immediate control provided by these methods. Under these circumstances, management is compelled to rely upon the worker's 'good judgement' in devising responses which will be compatible with requirements. By promoting professionalism, management gains assurance that the worker's premises will be such as to lead to proper actions. Curiously, in such circumstances, child care workers are deemed to be accountable in that they must be able to retrospectively explain their actions and why they did them; yet, they may not be considered responsible in the sense of knowing right from wrong since they are seen as lacking the occupational expertise to have handled the situation differently.

Another potential benefit to be gained by management in promoting professionalism among child care workers is in the reduction of labor strife, such as occurred at the Children's Service Centre in Calgary in July of 1980. At that time, 78 child care staff and over twenty support staff went out on strike (McConnell, 1982). By encouraging the adoption of a professional attitude, particularly a dedicatory or service ethic

towards clients, management potentially gains by the reluctance of workers to militantly pursue self-interest through labor action.

It is an administrative definition, as a synonym for expected and responsible behaviour rather than occupational status, which constitutes the meaning of professionalism as a theme in child care theory. In essence, the workers are asked to act in a generalized and obscure manner without being provided with the legitimating requisites which normally accompany the act in a true profession. In street slang, 'They have the name without the game'. The theme of professionalism leaves child care workers open to censure, for ultimately, what a professional manner is is in the eye of the beholder.

#### Summary

The foregoing has examined five themes which structure the way in which child care workers must do their jobs. As demonstrated, each of these themes constitute ambiguous demands made upon the worker. The theme of treatment demands simultaneously maintaining order for the whole while remaining attentive to the needs of the individual. Team-work demands submerging the self; yet the worker must remain an individual in his relationships with the children. They are said to be equals of other members of the therapeutic team; on the other hand, they lack the power and status afforded to them. The child care worker is said to be a generalist; but in order to gain in power and status, he is compelled to delineate the unique and specific functions which he fulfills. She uses relationships based on warmth and trust to affect change; yet her role of custodian involves a dyadic relationship of superordinate and subordinate. Finally, the child care worker is told

that he must be professional; however, he possesses few of the occupational requisites with which he might verify this claim.

The purpose of this review has been to present the historical roots and current theoretical structures underlying the occupation of child care. With these as a framework, the remainder of this study will examine the relationships, interactions, and arrangements which child care workers engage in during the course of their working time within an institutional setting.



## CHAPTER THREE

### A STUDY OF THE FORT MCMURRAY CENTRE

#### Description of the Site

##### The City of Fort McMurray

The City of Fort McMurray lies 435 km. north-east of Edmonton. It originally emerged as a trading centre, at the confluence of the Athabasca and Clearwater Rivers, during the 1800s. In the 1920s, with the arrival of the Northern Alberta Railway, the town became a terminus for freight shipments via barge to settlements along the Mackenzie River system. Fort McMurray remained a relatively small community, however, until the early 1960s. In 1962, Great Canadian Oil Sands Corporation obtained a permit to construct a heavy oil extraction plant 32 km. north of the town. This was the first commercial attempt at extracting oil from the tar-sands, and led to what was termed Fort McMurray's first 'boom'. This boom continued until the late 1960s, but was almost immediately followed by a second, and larger, growth spurt brought on by the construction of the Syncrude plant 40 km. north of the town. The construction years of the Syncrude plant (1974-78) resulted in especially rapid growth of Fort McMurray, with the town developing a reputation for easy money, transiency, and concomitant social problems (Co-West Associates, 1978). In the peak year of the plant's construction (1976-77), over 7500 workers were continuously employed at the site, with an annual turnover rate of 200% (Humphrey's Engineering and Management Consultants, 1980). The following population statistics for the City of Fort McMurray give some indication of the rapid social changes which have occurred since 1961:

<u>Year</u>	<u>Population</u>	
1961	1,181	
1962	1,186	GCOS permit obtained
1963	1,303	
1964	1,804	GCOS plant under construction
1965	2,515	GCOS plant under construction
1966	3,378	GCOS plant under construction
1967	4,984	GCOS opens September 1967
1968	5,943	
1969	6,132	
1970	6,684	
1971	7,146	
1972	8,148	
1973	9,942	Syncrude obtains permit
1974	11,000	Syncrude plant begins construction
1975	13,393	Syncrude plant under construction
1976	15,300	Syncrude plant under construction
1977	20,340	Syncrude plant under construction
1978	24,500	Syncrude plant begins operation
1979	26,500	

(Humphrey's Engineering and Management Consultants,  
1980:13)

In 1981, the population of Fort McMurray was 31,000 (Statistics Canada, 1981). The largest source of this population increase was migration, primarily from outside of Alberta. The average age of the population of Fort McMurray has remained very young, approximately 23 years.

A 1978 Report of the Alberta Oil Sands Environmental Research Program listed the following social characteristics of Fort McMurray: difficult working conditions; disproportionately high incidences of alcohol and drug-related problems, violence, racial discrimination; restrictive social stratification; and social disorganization of the native community. The same report listed the following personal and family conditions of Fort McMurray: difficulties in adjustment to life in the community; work-related stress; isolation, alienation and anomie; high incidence of mental and emotional distress; family breakdown; poor identification with

the community; and a 'no one stays here long enough to die' syndrome (Alberta Oil Sands Environmental Research Program, 1978:3-4).

It was within this social environment that the Youth Assessment Centre was opened in April, 1979.

### The Centre

#### Physical Design

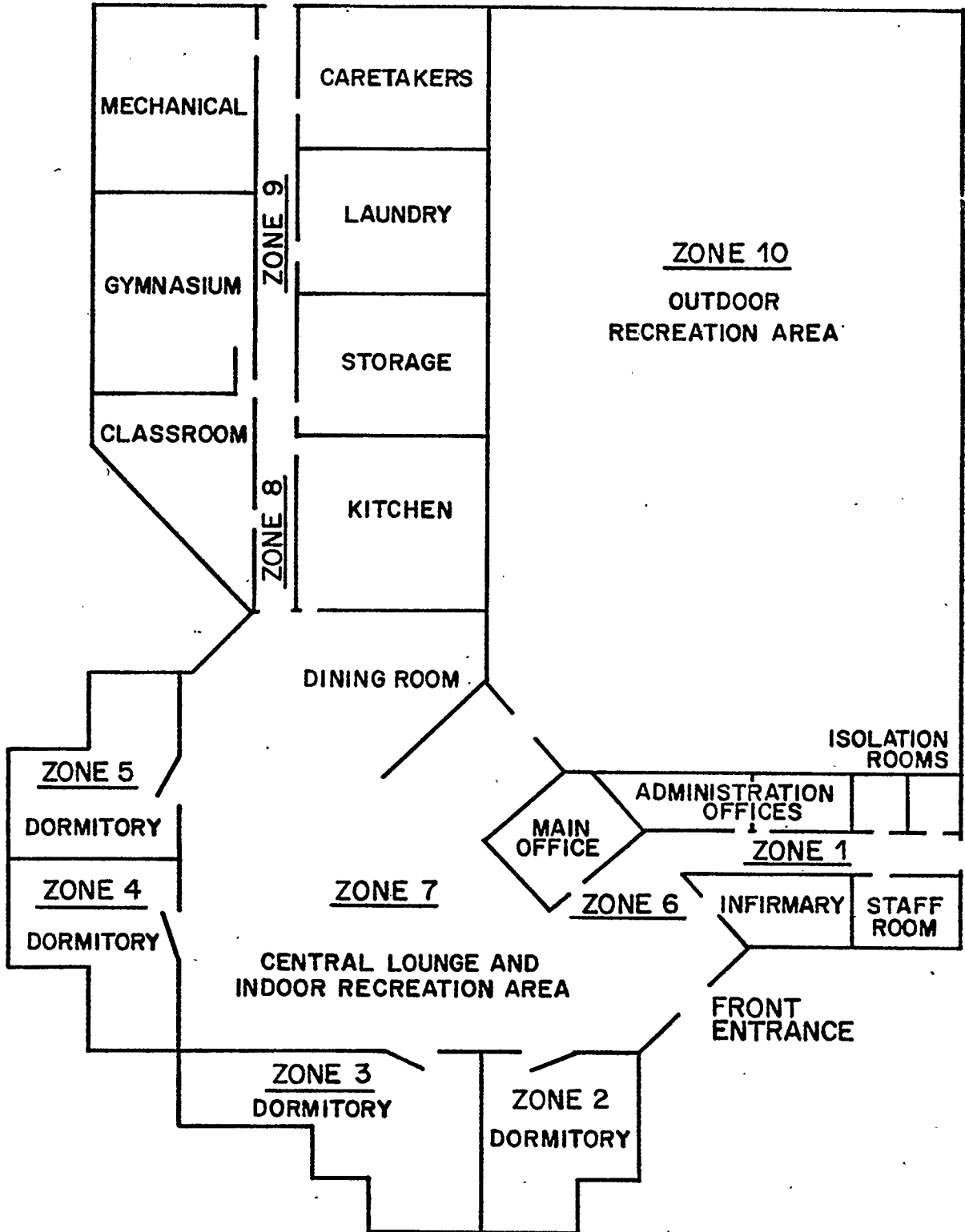
The Fort McMurray Youth Assessment Centre was one of seven such facilities built in Alberta between June 1973 and August 1979. Staff training began at the Centre in May 1979 with the first children admitted in June of the same year. The design of the Centre in Fort McMurray (Diagram 1) includes four dormitories (Zones 2-5), each comprised of four bedrooms of either single or double occupancy. Official capacity of the Centre is twenty beds although it is also allowed two emergency beds. The bedrooms open onto a small, common lounge enclosed by plexi-glass windows through which the staff can observe the children's activities. The four dormitories, in turn, open into a central lounge and recreation area (Zone 7). This section also includes a sunken area known as 'the pit' which is used for television. Other major areas of the Centre include the front entrance and office (Zone 6; the dining room, kitchen, and classroom (Zone 8); the storage, laundry, caretaker, mechanical, and gym rooms (Zone 9); staff and isolation ('quiet rooms') (Zone 1); and the enclosed, outdoor recreation area (Zone 10).

Three key concepts influenced the physical organization of the Youth Assessment Centres within the province: 1) Normative environment; 2) Assessment; and 3) Containment and control.

A desire for normative environments meant that the facilities were designed to be non-threatening and comfortable, with provision for

Diagram 1

Design of the Youth Assessment Centre in Fort McMurray



space, privacy, and de-accentuated routine. Particular emphasis was also placed upon reducing the institution presence of the facilities. For example, the following features were considered to be important in the construction of the Centres:

- A. Scale of the building: the centre should not intrude into the community by appearing to be overly large or different.
- B. Spaces for staff should not be made conspicuously different or better than the areas for the children.
- C. Interior decor should be lively and variable, not all the same. Surfaces while necessarily durable should . . . look warm. Items, pictures, etc. should be allowed on the walls.
- D. The treatment of spaces should recognize the informality of most juvenile activities. There should be no need to have any space that is highly formalized or specifically designed to limit activity.

(Alberta Department of Social Services and Community Health, Youth Assessment Centre Program. Unpublished.)

Assessment has involved two components: formal assessments through specific interviews and tests conducted by various professionals; and informal assessments obtained through observation of the child's conduct and behaviour throughout the day. Although child care workers occasionally administer the tests, they do not score and evaluate them. The workers are particularly involved, however, in the informal assessment process as they are in constant observational proximity to the children. It is also this component of observation which makes necessary both the open spaces and the windowed areas by which visual contact can be maintained.

Containment and control involve two different methods of limiting the freedom of youths placed in the Centre. Containment is passive limitation as provided by the physical structure of the facility. Thus, the windows are non-opening; the doors are constructed of insulated metal and/or solid core wood; and each of the zones can be locked off from the others in order to restrict the need for monitoring or, if necessary, to prevent contagion of misbehaviour from one group to another. Control, on the other hand, involves the active limitation of freedom through the use of power or authority in the various forms of losses of privileges, including the loss of association with others through placement in the isolation rooms.

#### Mandate

The Youth Assessment Centres were initially developed to fill the need for juvenile detention outside Edmonton and Calgary following the transfer of the juvenile offender program to Social Services in August 1971. However, it quickly became evident following the opening of the first centre in 1973 that the facilities were capable of meeting a broader range of local needs . . . . In many cases juvenile court judges remanded children for extended assessment periods recognizing that concentrated efforts with the child might avoid the need to move the child to a treatment facility away from his family and community (Residential Services Branch, 1984:1).

Although the official mandate of the Centres remained one of short-term 'detention and assessment', the above quote suggests that a 'quasi-treatment' component also became part of their unofficial mandate. This change was reflected in the number of beds set aside for children who were under Compulsory Care Orders. When the Centres opened, only 20 percent of their beds were to be retained for this use. However, as long-term facilities throughout the province reached capacity, and as the desire among judges and social workers to keep children

within their own area increased, Compulsory Care became a method of retaining children within the local Centres. By 1982, fourteen of the twenty beds at the Fort McMurray Youth Assessment Centre were listed as reserved for Compulsory Care use. While the average stay was three months, local children who were in need of institutional treatment were often retained at the Centre rather than transferring them to an out-of-town institution. Additionally, the original intention to house only children between the ages of twelve and sixteen soon gave way to housing inmates who were often younger and, occasionally, older than these limits. At the same time, the Centre in Fort McMurray maintained an official mandate of providing short-term assessment and detention for either delinquent or mildly-disturbed children, as shown by its description in the 1982 Guide to Community and Residential Resources:

The Youth Assessment Centre provides accommodation for children who require confinement for their own or the community's protection. The children are facing charges or being held or remanded into custody by the Court. The program is not suited to children who require long-term care or children who require assessment but for whom no legal precedent exists for being placed in a closed or locked setting. It is not suited to children who exhibit severe mental or physical disorders (Alberta Department of Social Services and Community Health, 1982: no page given).

At the time that this study was conducted, it was the mandate of detention and assessment which was officially adhered to by the Centre. All children held at the Centre were legally bound according to one of three Orders: a Warrant of Committal, issued by a judge in respect to a Young Offender; a Compulsory Care Order, issued by a judge of the Family Courts; or a Compulsory Care Certificate as provided by the Director of Child Welfare. The Centre was designated as a closed or

locked facility with exit and entry obtained only by the use of keys. Towards the end of the study, however, the Centre and its staff were informed that the mandate was to be changed, and that the Centre would soon be classified as doing 'treatment' while retaining its previous functions.

In the Fall of 1984, this change was brought about. Although the doors of the Centre remain locked, children need no longer be placed there under the various Orders of detention. The facility has become semi-open. At the present time, four of the beds are retained for the use of the Solicitor General's Department; two other beds are of shared usage by the same Department and Child Welfare; and the remaining beds are classified as flexible, including use by children who are under an 'open-status'.

#### Theoretical Approach

Ostensibly, the theories of Rudolf Dreikur underly the purposeful interactions conducted by staff with the children. Especially important are Dreikur's beliefs in the use of encouragement rather than praise or reward, and natural and logical consequences rather than punishment. Natural and logical consequences are differentiated from punishment in the following manner:

- A. Natural Consequences: The natural results of ill-advised acts. The unavoidable consequences of the deeds which they follow. The inevitable reactions entitled by the child's actions whether or not the adult is present.
- B. Logical Consequences: The consequence has a logical relationship to the misdeed. It is in effect arranged by the adult rather than being solely the result of the child's own acts. A choice is given between two or more alternatives. If a misjudgement is made the child



rather than the adult accepts the responsibility for the consequence.

- C. Punishment: A method by which a 'superior' enforces his demands upon his 'inferior'. Punishment is retaliatory, illogical, and arbitrary rather than corrective.

(Alberta Department of Social Services and Community Health, 1984: no page given)

### Routines and Rules

The routines and general rules of the Centre are based upon those being used at the Sifton Centre for children in Lethbridge. The specific rules and disciplinary measures were developed by the management of the Centre with input from the child care workers. Specific rules and procedures remain subject to change depending upon the characteristics of the children being housed. Programming is also determined on an ongoing basis subject to the characteristics of the children and the capabilities and interests of the workers.

The routines of the day are scheduled as follows:

A.M.	7:30	wake-up, chores
	8:15	breakfast
	9:00	school
	10:15	smoke-break
	10:35	school
	11:30	recreation
	12:00	lunch
P.M.	1:00	school
	2:00	smoke-break
	2:20	school
	3:15	free time
	3:30	Mandatory Physical Activity (programmed recreation)
	4:30	free time
	4:45	supper
	5:30	free time
	6:00	'quiet hour' - visiting hour or time spent alone and quietly in own room
	7:00	programming
	8:00	showers
	8:30	free time
	9:15	snack
	9:30	television
	10:15	bed time
	10:30	lights out

### Staffing

Staffing at the Centre is supposed to consist of seventeen care workers, five of whom are assigned to each team with two extra workers as floaters; three supervisors; two clerks; one cook; two cleaning porters; and one houseparent. Staff are overseen by a Director and an Assistant Director. There are four different levels in the child care series of job classifications, each of which requires different credentials and/or duties (Appendix C). The first two levels comprise front-line positions. The Child Care Counsellor III position is that of a team supervisor while the Child Care Counsellor IV position is that of the Assistant Director.

When the Centre first opened, most of the child care staff came from outside of the province of Alberta. The largest number of staff came from Ontario, with several others coming from the Maritime provinces or Newfoundland. Most of the staff have had previous experience working in treatment centres or children's homes. Arriving at the same time seems to have instilled a sense of cohesiveness among the original staff of the Centre. In conversation, several 'old-timers' have commented that everyone 'was in the same boat' in terms of not having any other contacts in the community of Fort McMurray. This sense of cohesiveness is borne out by turnover rates during the first couple of years of the Centre's existence. While other children's institutions around the province experienced turnover rates of 30 to 70 percent, Fort McMurray had relatively little change in staff for the first two years. Even into the third year, turnover at the Centre remained relatively low.

### Management

The first Director of the Centre was also instrumental in the hiring of staff, the devising of routines and rules, and the creation of a general philosophy for the institution. His commitment to an open-door policy of interaction with staff is mentioned by several people who worked under him as being important in giving them a sense of democratic involvement in the Centre's proceedings. In January of 1982, this Director left to takeover a temporary position elsewhere, and later, to go on educational leave. His position at the Centre remained 'on hold', however. This resulted in a series of Acting Directors occupying the position over the next few years until the original Director returned to his post in May 1985. It is difficult to estimate the overall effect of this instability upon the Centre and its staff. However, it is noteworthy that turnover has been higher during the last three years than previously.

### Study Design

The basic purpose of this study can be stated as follows: 1) To examine the effects of institutional life upon child care workers, and 2) To describe from their point of view, the relationships, interactions, and arrangements in which child care workers engage in the course of their day-to-day existence within a total institution.

Sociological studies of total institutions have largely ignored the work-lives of front-line staff employed within them. In his seminal analysis of total institutions, Goffman (1961) did devote a section to the role of staff. However, traditional literature in the field of institutional child care work has tended to describe the occupation from either a theoretical or ideal perspective (for example, Mayer, 1958; Beker et al., 1972;

Klein, 1975; and Adler, 1976). By ideal, I mean to suggest that such literature has confined itself to the way in which child care workers ought to experience their job. Moreover, this literature has often focused on the scientific management of workers rather than understanding the job from their perspective.\* Nonetheless, in the study which follows, these texts may be said to present a background against which the reality of child care work becomes highlighted and distinct.

Somewhat closer to the task of examining the occupation of child care from the perspective of the workers are the efforts of Berry (1975) and Bartollas et al. (1976). The former must be commended for her examination of many of the sources of stress and conflict which beset child care workers in the course of their job. The latter presents some valuable insights into the underlife of a juvenile institution. Still, these analyses fall short of investigating the meaning of the institutional 'community' (Adler, 1976:10) to the workers.

Literature concerning other types of institutional occupations may provide information pertinent to this study. In particular, studies of corrections officers (Bartollas et al., 1978; Ellis, 1979; and Pool 35 al., 1981) are likely to suggest points of similarity and difference with child care work.

However, because no systematic study of child care work from the perspective of the workers has been previously conducted, a theoretical and empirical base is lacking that would enable more than a mere guess at a set of hypotheses. For this reason this study takes hypothesis generation as its prime goal. Before a set of hypotheses can be

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\*For an excellent example of the medical model approach to managing child care staff see Klein, 1975:263-4.

verified, it is necessary to have an understanding of the subject of research sufficient to generate plausible propositions for testing. Exploration is the process by which such understanding is gained. It is naturalistic investigation.

The object of exploration is to discover and articulate hypotheses which will enable future verification of these newly found propositions to proceed from an empirically valid and logically sound basis. While verification research takes its hypotheses more or less for granted, exploratory research of this kind finds the hypotheses themselves as problematic. Thus, the design of this project has focused on techniques conducive to the construction of theory firmly grounded in data (Glaser and Strauss, 1967).

Specifically, this study was conducted in three phases. The first, and primary, phase involved participant observation within the Centre.

Participant observation refers to the process in which an investigator establishes and sustains a many-sided and relatively long-term relationship with a human association in its natural setting for the purpose of developing a scientific understanding of that association (Lofland and Lofland, 1984:12).

This phase of the study consisted of approximately 600 hours of observation conducted over a period of three-and-a-half months during the summer of 1984. It provided the basis for the rest of the study and constituted the major period during which I was in direct contact with the subjects.

Shaffir et al. (1980:7) have described four stages of field experience pertinent to this period of research: entering the field; learning to play the role; maintaining field relations; and leaving the setting. Entering the field was relatively easy in the case of this study. My

previous contacts with the Centre and its employees made resistance and suspicion of my efforts minimal. I believe that my forthrightness in revealing my intentions also encouraged trust. Moreover, I believe that it also elicited curiosity, such that my opportunities to learn what the job was 'really like' were enhanced by workers wanting to 'set me straight'. Finally, previous friendships also paved the way for me to become readily acquainted with and accepted by newer workers at the Centre.

Learning to play the role was helped by my previous knowledge of the Centre and some of its routines. At the same time, there were some demanding aspects to the work, particularly in the areas of rule-enforcement and tolerance, that proved to be increasingly difficult as my days in the Centre went on. By remaining aware of my own responses to the demands of the work, however, I was able to gain valuable material for later discussions with other workers.

Maintaining relations in the setting was not a difficult task for the most part. However, towards the last days in the job, some workers who had been initially curious did press more strongly to obtain some of my perceptions of child care. While I was able to deflect these questions with such responses as, 'I'm much more interested in your impressions', I was also glad to be soon leaving the field. My feeling then, as now, was that I had collected all of the pertinent data that I could obtain by the participant observation method and that other methods of research would now have to be employed. The final step, therefore,--leaving the setting--came as a relief to me in terms of my research, even as I also had some regrets over leaving some new friends and old friends re-discovered within the Centre.

As mentioned, data collected during this first phase of the study constitute the basis for this thesis. Information obtained in phase one was initially subjected to what Glaser and Strauss have termed the 'constant comparative method' (1967). This method consisted of coding each incident or event as soon as it was observed into as many categories of analysis as possible. As the study progressed, these categories and their properties were integrated and reduced to the smallest number. Finally, they were abstracted into concepts which were linked to form various propositions about the subject under investigation.

It follows that sampling in this type of research was done in the service of exploration rather than verification. The selection of data to be examined was determined by data previously collected and analyzed. The amount of data to be collected at any point was determined by what Glaser and Strauss (1967) have termed 'saturation'. 'Saturation means that no additional data are being found whereby the sociologist can develop properties of the category' (Glaser and Strauss, 1967:61). As I have indicated above, I believed at the time of completing phase one of this study that saturation by means of participant observation had occurred.

Towards the end of my employment period at the Centre, I began the second phase of my study: unstructured interviewing. In all, nine interviews were completed with either current or recent employees of the Centre. The average length of employment at the Centre of those interviewed was 22.7 months, with a range of two months to four years. Information obtained was used to supplement and verify understandings emergent from phase one.

The third phase of the study involved an extensive and wide-ranging investigation of the literature concerning child care and children's institutions. Reference to the literature was intentionally left until late in the study. Because this study was designed as exploratory research, it was felt that earlier reference to the literature might prematurely 'stifle' original insights into the phenomenon. When the literature was at last considered, it served both to supplement and to highlight the understandings obtained through exploration.

#### Reliability and Validity

The problem of reliability involves the 'replicability of observations' (Shaffir et al., 1980:11-12). In order to ensure reliability, this study required that events be observed in a similar form on several occasions. Adherence to this criterion served to differentiate between occurrences which were an ongoing part of the scene and those which were idiosyncratic.

On the other hand, 'The problem of validity in field research concerns the difficulty of gaining an accurate or true impression of the phenomenon under study' (Shaffir et al., 1980:11). Validity in this study was substantiated by the reasonableness of fit (Glaser and Strauss, 1967) of the emerging data. The reasonableness of fit criteria in field research mitigates against idiosyncratic interpretations since:

Observations, verbal reports, and written records, whether offered in groups or by individuals, whether revealed naturally or upon request, are all considered potential sources of information. Since multiple methods are used, validity becomes more assured (Shaffir et al., 1980:39).

The continued presence of the researcher in the field over time tends to reduce the initial concerns of 'reactivity'. Certainly, in the



case of this study, my role as an observer appeared to be forgotten by most of the child care workers within a very short period of time.

As in the case of reliability, any idiosyncratic perceptions which I might have had were dispelled by ongoing conversations and interviews with the workers. The interpretation and meaning of events had to be substantiated by either the participants themselves or by subsequent occurrences. Any limitations upon my sphere of observation were reduced by the already limited size of the institutional premises. Furthermore, because of the high stress placed by management upon communication of all occurrences happening within the Centre, events were readily repeated verbally and often in written form. Thus, I was able to remain informed of events occurring beyond my immediate observation.

Finally, the grounded propositions gained through participant observation in the field were once more subjected to the reasonableness of fit criteria through the successive triangulation of results by other methods of data collection used in phases two and three.

### Ethics

Before formally starting my study, a proposal outlining its intended purpose and methodology was submitted to the Ethics Committee of The University of Calgary. On the advise of the Committee, certain procedures were used throughout the study in order to protect the interests of the observed subjects.

The first of these procedures involved the posting of a written statement within the confines of the Youth Assessment Centre. This statement listed the purposes and goals of the study, and invited questions from interested or concerned staff members.

The second procedure involved the use of Consent Forms whenever I conducted a structured interview. A transcribed copy of the interview was later presented to the subjects for their clarification and implicit further permission to use any of the material contained therein. In this manner, the respondents were doubly protected while at the same time enhancing the quality and accuracy of the data obtained.

Finally, it must be remembered that, as an employee of the Provincial government, I was also compelled to sign an Oath of Confidentiality before beginning work at the Centre. This measure is meant to protect the interests of the children who are captive 'clients' of the institution. In order to conduct the study, it was also necessary that I obtain written permission from the Director of the Centre. These requirements meant that, in effect, the study was 'screened' through a second committee.

All of the material obtained through either observation or interviews was transcribed and codified while substituting real names of individuals for numbers identifiable only to myself. All information was kept in a secure, locked place during both collection and afterwards.

It was through these procedures that the primary considerations of anonymity and confidentiality were addressed by myself in the course of conducting this study.

### Summary

This chapter has described the site where the study was conducted. It has outlined the formal roles of the staff and the structures which ostensibly define the environment of the Centre. This chapter has also detailed the premises underlying both the theory and the techniques by which the study proceeded. In particular, its exploratory

nature was explicated. The remainder of this thesis presents the data obtained during the course of the study.

## CHAPTER FOUR

### WORKERS AND THE TEAM

Staff within the Centre are formally and objectively structured into three teams, each consisting of five child care workers headed by a supervisor. Such groups become teams in the subjective sense, however, when they can, in relation to an interaction or series of interactions, maintain the relevant definition of the situation (Goffman, 1959:104). At this point, the team becomes both constituted of, and a conduit for, the interactions occurring among the group. For child care workers, such a team represents their major reference group within the institution; for many, also, it is their primary reference group beyond the Centre's walls. Because of this importance, this chapter examines the process by which a formally organized group becomes a subjectively experienced team and the effects which this has upon worker interactions and relationships.

#### Information and a Sense of Team

Hypothetically, a team may be said to have a beginning and an end. A definite fixing of these points in time is not always possible however. In practice, a team is named after its supervisor so that it might be called 'Joe's Team'; and to the extent that the identity of a team is seen as primarily influenced by supervisors, one might define the lifespan of a team by his tenure. But this is too simple, for it ignores the extent to which relationships between workers continue even after supervisors have been replaced.

A team is formally created or altered by management according to three criteria: 1) The needs of a particular team, such as in those

cases where a uniquely-skilled individual has left and the team requires a like replacement; 2) The apparent abilities of the child care workers considered as replacements; and 3) The overall balance of the three teams at the Centre. The need for balance between teams is considered important by management in order that each team be replaceable by any other. In this way, the structure and routine of the Centre is preserved. In determining balance, such factors as gender, experience, skill, and personality are important variables to be distributed more or less equally among the teams.

Once the team members have been selected, the key factor in molding the team is the supervisor. All the supervisors at the Centre have worked their way up from being front-line workers. This, plus the fact that they continue to take an active interest in situations occurring 'on the floor', appears to provide workers with the sense that their supervisors understand what their job is like. As the facilitator of communication within the team, a supervisor is instrumental in shaping a consensual definition of the situation at hand.

The forging of a unified definition and, hence, approach to a situation, may not be easily achieved, however. For one thing, many of the workers at the Centre presented themselves as being strongly self-assertive. Thus, one cannot automatically assume that a supervisor, by virtue of his position, will necessarily possess overriding influence over his team. The ability to influence a team decision on any given matter may be determined by the particular speaker's character, experience, skill, or eloquence. The power to influence decisions may also be delegated to a person simply because the issue is of particular

importance to that person. As one worker has related, 'Workers don't take stands unless it is a big problem'.

The variation in personalities which make up the teams affects aspects of the formal structure of the Centre. For example, although the rules and regulations are administratively consistent, they may be interpreted differently by each team, or each member of a team. One worker, in recalling the growth of rules at the Centre, stated that:

We started out with fifteen rules and ended up with over two-hundred and sixty. But the workers couldn't remember them, so that, in effect, workers had to make decisions and interpret the situation themselves. One team would forget a rule that had been put in place and not enforce it, then the next team would come on and enforce the same rule.

Another worker has remarked that 'You can't remember many of the rules. Some of them were made so long ago, and so many of them, that you forget; then someone remembers and brings it to your attention'.

Even where rules are remembered, however, they still provide only a skeletal framework for dealing with situations which are frequently not amenable to clear-cut dictums. Finally, even this framework is open to expansion and contraction as part of an ongoing process of decision-making.\* Thus, a former worker at the Centre relates that:

It's in the nature of the work. You can only be so consistent, only have so many rules. There is so much room for discretionary and judgement kinds of decisions. Everyone has their own personality and

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\*Strauss et al. have noted in their study of hospital organization that:

Agreements are continually being terminated or forgotten . . . , but they are also continually being established, renewed, received, revoked, revised. Those in effect are considerably different from those that have been or will be in effect (1975:199).

relationship with the kids. You can't have rules to cover everything.

Formally, it is up to management to proclaim the limits of rules (and the rules which will have limits) at a given time. However, it is in the informal interactions on the floor that a new order-of-the-day may be negotiated. The skilled supervisor is she who can define a rule and its meaning which will find agreement with the team and which will subsequently obtain the desired result in dealing with a situation.

In order to arrive at a consensual definition it is important that information concerning an occurrence be communicated. Indeed, the degree of communication with each other is seen by workers as being an index of the quality of a team. The greater the communication the better the team. To understand this observation fully it is necessary to differentiate between three types of information which workers communicate to each other. These types may be termed peripheral, professional, and personal.

#### Peripheral Information

Peripheral information refers to any data which is neither pertinent to the functioning of the job, nor to the functioning of any persons with whom one might interact in the course of the job. News stories or a conversation about a hockey game played the night before would fit into this category. At the same time, a person's choice of topic or opinion about a subject may reasonably allow others to fill-in some personal information about the speaker. However, in the main, we can consider such information exchanges as a vehicle of introduction, conviviality, or time-killing.

### Professional Information

Professional information is any data concerning the performance of the job. Reports about children, or about rules and policies are examples of such information. It may be formally transmitted in three ways within the Centre: 1) Verbally at organized meetings (shift change, staff meetings, etc.); 2) Through internally-produced documents (daily logs, assessments, etc.); or 3) Externally-produced documents (Court Orders, psychiatric reports, etc.). Professional information may also be passed through off-the-record conversations.

There is a dialectic which occurs between formal and informal information of this kind. In the course of informal dialogue, workers take out or otherwise re-cast formal-professional information in such a way as to make it useable to them. Because the working world of child care workers is situated in the here-and-now, they require information which is immediately applicable. Thus, if a child is violent or suicidal, such information is highlighted in conversations about him.

In time, as more information about the child is added, informal conversations also provide the basis for formal documents. The result of such conversations is not merely to impart previous information, but to arrive at a consensual description of the child. In a sense, this description may be said to constitute new information. Thus, although assessments are individually written and may not always reflect formal team input, there is nonetheless an informal consensual assessment made by workers in the course of verbal exchanges. In the subsequent production of formal-professional information, the writer must, of course, return to a suitable idiom. Formal-professional documents are expected to represent the Centre within the wider professional community.



Therefore, an informal assessment by workers that a child is a 'jerk' would be substituted by the observation that he 'utilizes inappropriate attention-seeking devices'.

The passing of professional information occurs quickly in team structure because it is essential in devising and coordinating a unified approach for dealing with the children. For new team members, however, professional information, like peripheral information, also acts as a means of introduction. For example, when a team is created by management, team members may or may not know each other, or may know each other in varying degrees. In the situation of least information, each member may possess only an abstract idea of how a child care worker 'should be'. However, professional communications about a particular child might lead to the provision by one worker of semi-personal information about herself, for example, other jobs which she has held. Thus, the original form of the speaker's character, as held by the listener, will have been supplemented by new information.

Berscheid and Walster have noted that close proximity increases the 'probability of receiving information, pro or con, about another' (1978:34). They also suggest that attraction is more likely to be positive than negative in such circumstances. The size of the Centre assures the close physical proximity of staff. More importantly, however, job stress, shift work, and the Centre's physical isolation from the community appear to create an even smaller psychological space. Under these conditions, workers may become emotionally reliant upon a limited group of others. The passing of professional information facilitates the process by which team members become acquainted.

### Personal Information

Personal information is data about the self which the speaker, as Goffman (1959:2) relates, either 'gives' or 'gives off'. However, personal information may also include data about persons other than the speakers in a conversation but with whom each may interact in the course of their work.

Within teams at the Centre, the range and depth of knowledge about each other increases rapidly. Information concerning personal histories, relationships, attitudes, aspirations, strengths, and weaknesses become readily known, or perhaps more correctly, are believed to become known. It is not that each member speaks to every other member about the personal details of his life. Yet, within the team, certain items become common knowledge. Perhaps the height of intimacy comes in those moments when knowledge of the other allows for a subtle allusion in the form of a joke; for it is at the moment that the separation of the team from outsiders is most clearly revealed. To understand the joke is to be part of the team; one is 'in the know'.

Conversations involving personal information often appear to form a variation of the 'release binge fantasies' which Goffman (1961:50) has observed among inmates of total institutions. For example, a substantial amount of conversation among workers involves the planning of holidays or parties, or in fond retelling of past events of a similar kind. This is particularly the case at the end of a long work shift. As the day approaches, workers look forward excitedly to their time-off. Talk often revolves around what each is going to do during the break.

It is necessary at this point to return to the central thesis which lies behind this section of the study: that a team, as subjectively expe-

rienced, evolves out of a process of information. In this thesis, personal information can be seen to be of primary importance to the way in which job functions are performed. For child care workers, the possession of information about other members of the team helps create a sense that one can rely on them. The more that each member senses that they know the others, the more unified the group becomes. To know is to not need to be told, or even to observe, but to sense. To know is not necessarily to like or approve, but to be able to predict; to be unsurprised. Thus, one former employee at the Centre stated 'when you work with six people day in and day out for two years you can work together almost without speaking; you can read each other's mind'.

Of course, a high degree of verbal and written communication still continues to occur although it may more often be abbreviated. Non-verbal methods of communication such as looks or gestures may also be more frequently employed. The important thing is that group members at this point sense that they have become a team. When this occurs, members are likely to describe the team as being 'close'. This term, repeated often by child care workers who have worked together for a long time, deserves special scrutiny.

### Closeness

Of the many dictionary definitions for the word 'close', the one which would appear to replicate the meaning as used by the child care workers at the Centre is that which states 'near in space, time, relationship, or intimacy' (Scribners, 1980:168). Goffman (1959) has described team members who define each other as being 'in the know' as being bound by rights of 'familiarity'. He adds:

Among teammates, the privilege of familiarity--which may constitute a kind of intimacy without warmth--need not be something of an organic kind, slowly developing with the passage of time, but rather a formal relationship that is automatically extended and received as soon as the individual takes a place on the team (Goffman, 1959:83).

An intimacy without warmth, a kind of closeness based on knowledge rather than affect, appears to mark many of the relationships which are formed at the Centre. Involvement in the job is so intense that it is often only after they have left that workers realize how little they had in common. For this reason, many of the relationships formed while working together are soon dissolved when workers quit the Centre.

At the same time, however, the intense nature of the job does create an environment in which intimate relationships once formed may survive. Some ex-employees of the Centre still count among their 'best friends' people with whom they worked while there. For this reason, Goffman's statement, previously quoted, is simplistic in its neglect of the process by which familiarity is both broadened and deepened. The state of cold intimacy may only be a stage in developing further nuances to the relationship.

Finally, it must be stated that some current and former employees of the Centre perceive that the closeness of workers in the institution has lessened since the facility's inception. Five factors appear to be important in developing a sense of working-closeness. Some of these factors, as will be noted, have altered during the period of the Centre's existence.

The first of these factors are 'time' and 'physical space'. Physical proximity enhances contact which leads to increased knowledge of the other (Berscheid and Walster, 1978). As Simmel (1964:308) suggests,

knowledge is the basis for relationships. As time increases, knowledge of the other also increases. High turnover at the Centre in the last few years may mean that workers lack sufficient knowledge about each other with which to affect a sense of closeness.

Closely connected to these factors is that of 'psychological space'. When the Centre opening in 1979, all of the workers arrived together. As several workers of the time have expressed, 'We were all in the same boat'. The initial cohesiveness appears to have lasted for approximately a year. However, as workers began to make more contacts in the community, their emotional needs were increasingly met by sources other than the team. Those workers who came afterwards were no longer incorporated into an all-encompassing work environment.

A fourth factor in creating working-closeness appears to be a sense of 'contribution'. When the Centre first began, rules, regulations, and programming were created by management but with the substantial perception by the workers of their own contribution to this structure. However, as the rules have become more fixed and procedures more routine, workers appear to have lost the personal sense of contribution. To the extent that workers may now perceive the rules and procedures as inherent and invariant parts of the structure of the institution, they appear to see themselves as comparatively more marginal to the Centre than previously. This may suggest an aspect of the process by which institutions become progressively de-personalized.

Finally, what might be termed 'dialectical cohesiveness' appears to increase a sense of working-closeness. Cohesiveness, in itself, appears to lead to more efficient functioning. However, efficient functioning appears in turn to lead to increased cohesiveness. Thus, one ex-worker

has remarked that, 'We had a lot of pride because the Centre had a good reputation: not too many AWOLs, no staff getting hurt. The better the Centre functioned, the more together the staff felt'.

In the past couple of years, however, the Centre's reputation for stability and efficiency has lessened. For example, on one occasion two children stole a vehicle from the Centre. In another instance, children rioted and caused extensive damage to the facility. As perceived efficiency has decreased, workers are likely to have suffered a concomitant decrease in their sense of being part of a successful organization.

#### Off-Hours: The Supplementing of Information

As previously mentioned, most of the workers were new to the City when the Centre opened in 1979. Lacking any other contacts, they spent considerable time together. This contact was enhanced by the housing situation of the workers. In order to attract employees to the north, the provincial government provided both a Northern Subsistence Allowance and Northern Housing to its workers in Fort McMurray. For many child care workers this meant accommodation in one of a few apartments owned and rented by Alberta Housing Corporation. Although the government is now attempting to phase-out its provision of these benefits, they are still in existence today. Such is the close proximity of their housing units that two apartments and a nearby four-plex in downtown Fort McMurray are referred to, by workers, as 'The Ghetto'.

One worker has said that, 'The first two years were extremely close, even with people you might not be compatible with'. Another former worker relates that interactions with teammates were initially forced upon him as a 'survival method. . . : This person might not be great company at a bar, but at least you weren't sitting alone'. In

time, of course, staff were able to become more selective. Yet, certain pressures still remain which facilitate a high degree of personal contact off the job.

Besides the housing, the most significant of these pressures is shift work. Shift work reduces the number of community contacts outside of the team, while increasing the accessibility of contacts within the team. For example, workers on the evening shift (2:45 p.m. to 11:00 p.m.) are often keyed up after work. One worker has commented that, 'When you have had seven straight hours, certainly on evening shift, with twenty kids, you've had it when eleven o'clock comes around. It's extremely stressful'. Furthermore, events may have occurred during shift which the workers feel the need to discuss. More often, perhaps, they have feelings to 'vent'. Because of the availability of their own team members, after-work contact is frequent. This may involve going to a bar or a pizza place in an effort to unwind from the evening's events. These meetings are often instrumental in that team members arrive at a consensual understanding of what has transpired on the job.

Shift work may also mean that one's days-off occur during the week when people in other jobs are not available to contact. Thus, workers will often get together with their teammates. Such interactions may then involve parties, poker games, camping trips, and so forth. The results may be that, as one worker has remarked, 'Pretty well my whole social circle is tied up with work'.

As mentioned, the team also provides an environment in which the worker can have the sense of being understood. Unanimously, workers

believe that most people outside the field do not comprehend the pressures of being a child care worker.\* One ex-worker has remarked that:

There's a lot of pressure in the job and people tend to associate with other people who understand the pressure. . . . There's a very tight bond between you even if you have nothing in common personally. You're under the same kind of stresses, the same jeopardy, and if someone blows up, you know how they feel because you were there yesterday.

On the other hand, the team may also offer a sanctuary for the worker; a place where he may be himself, or another self, without threat of disclosure. Workers may voice complaints about management or other workers with little fear of reprisal. Similarly, the team may provide an environment in which behaviours, otherwise susceptible to negative sanctions, are given tacit permission. For example, over the years some workers have been known to drink to excess while a few have also engaged in the use of illegal drugs. While not necessarily condoned by teammates, such activities are rationalized as being a reaction to the stress of the job. The activity is often seen as being outside the worker's 'true' character. One ex-worker has stated this in the following way:

I think it's well recognized that this is part of our private lives: that we have to let off steam. However, I think we all compartmentalize. This happens, but this isn't the right part of me, this is just blowing off steam. And then we come back to work . . . . The more well-balanced people keep the abuse in the compartment.

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\*In some cases, marital relationships suffer as the worker may feel that his spouse does not understand. conversely, the spouse may at times feel as though she is married to the entire team, as when members regularly congregate around the house for parties or supper.



Off-work contact thus provides a situation in which emotions may be vented, previous information exchanged and re-evaluated, and new information about the self safely revealed. As such, the sense of knowing each other, which group members must possess to subjectively experience themselves as a team, is enhanced.

### The Division of Labour Within a Team

The fundamental reality of working at the Centre is that there are a set number of routines and functions to be performed within a limited physical space and limited time. Constant repetition often leads workers to become bored and to tune out. One worker stated that, 'You can only straighten-up files or xerox forms so many times'. In order to pass time, workers may engage in loose conversation, read magazines, or devise practical jokes. However, these must be constrained if upper management is nearby. Routine may also be overcome through competitive involvement in the recreational activities of the Centre, such as foosball or table tennis. For this reason, one male worker has suggested that males may last longer in child care work than females. Because male workers are more likely to be 'jocks', they receive positive feedback in watching their game skills improve. However, 'One day you find that you've played just one game of foosball too many, so you quit'.

Because of the routine there is often a great desire on the part of workers to get out of the Centre. They will readily volunteer to take children on a recreational outing or for a dental appointment.

Ostensibly, the routines and functions of the Centre are distributed equally among the workers, or are otherwise rotated on a daily basis. However, in practice, a division of labour occurs in the completion of tasks. For example, females tend to do 'women's chores', such as

folding laundry, tidying up, and making snacks. Males, on the other hand, conduct physical recreation or, as one worker stated, 'play the part of bouncers'. Often a division of labour occurs simply as a result of some workers being more energetic or conscientious than others. Some functions are also divided according to preference. A former worker relates that, after awhile, 'It gets to the point that whoever enjoys cleaning, cleans, and whoever enjoys picking up, picks up'. The result of this division of labour was succinctly stated by another former worker: 'Not only are there a lot of routines, but the routines you do become even more restricted'.

Because of the limited number of routines available to workers, it is often a welcome relief when added responsibilities are given to them. The opportunity to create special projects for the children, or to participate in training session, temporarily intrudes upon the predictability of the job. For the same reason, workers express a greater enthusiasm for the job when the Centre is at full capacity than when the number of children is small. A greater number of children offers an increased opportunity for structured programming. As one worker has stated, 'Sometimes it is hard to adjust to a lower number of kids'.

One might further suggest that the stress of dealing with difficult children is occasionally a welcome relief from the boredom felt when housing more obedient children. Difficult or unusual children offer more scope for diagnostic conversation and potentially unique interactions than do 'normal' children. In speaking about the challenge which difficult children offer, one worker said, 'They break up the monotony. They allow you to develop your skills, to try things'. As a gauge of the stimulus which difficult children provide to workers, one might add that

worker's tales are always replete with stories of problematic children, while obedient children may be scarcely remembered. Of course, problematic children, particularly when they are AWOL risks, may require an even more rigorous routine; for example, restriction to the premises of the Centre. In any case, however, they still require that the worker be actively involved. In this regard, it is notable that, when the number of children in the Centre is small and the group is particularly manageable, workers are most likely to see their jobs as 'glorified baby sitters'.

Whether problematic or not, the type of children being housed offers a final way in which the routines of the Centre may be made more tolerable. Where particular workers are able to manage certain children better, they may be allowed to engage in one-to-one activities of a more creative nature. Also, being formally assigned to a child in the role of case-worker provides the worker with an opportunity to engage in the relatively routinized, but individual, process of writing assessments and participating in conferences. Where the child represents an especially difficult or unusual case, the role of caseworker may lead to more non-routinized involvements. For example, the worker may investigate unusual post-institutional opportunities or placements for suggestion in his final assessment report.

#### Interactions Between Teams

Most workers believe that each team is different from the others. These differences are seen as primarily evidenced in the way each team interprets rules and deals with the children. The degree of difference perceived by workers is not uniform, however. While some workers believe that there is significant variance, others see these as largely superficial. Agreement is reached on one point, however: each worker

believes that his team is the best. These beliefs were summarized by one worker in the following say: 'Every team is different, every supervisor is different, and every team believes that it is the best team in the Centre'.

The best is able to understand, control, and bring about meaningful changes in the children better than the other teams. The best team also efficiently performs the functions of the job. The competition which is engendered by a desire to be the best team has some functional benefits for the management of the Centre. For example, the teams attempt to leave their shift in order; they get chores done and reports finished so that the following team cannot complain. To compete with others is to be compared with others. Thus, as one worker was overheard to remark, 'If someone's going to escape, let's not let it happen on our shift'. Similarly, an ex-worker at the Centre remarks that:

You're always supportive of the other teams as far as the job goes, but there is an element of rivalry as to who is the weakest team, who is the strongest. You don't want to make a mistake that another team made.

An index to this division of the teams can be seen at shift change. This occurs at 2:45 p.m. when the evening shift comes on to relieve the day shift. A formal meeting occurs between the two teams during which the leaving team details events of the day. The children's levels are discussed and revised at this time.

Shift change represents a formal transfer of power. Its symbolism is particularly obvious during the security check which completes the meeting. This function involves a member from each of the two teams. The members go throughout the building examining doors and locks and generally seeing that things are in order. The ostensible reason for two

staff doing this is safety. However, the action is also reminiscent of a pact between two clans in which a member of each witnesses the orderly transfer of power. In so doing, the responsibility for any problems occurring either before or after the shift is fixed.

Finally, and not unimportantly, by keeping the discovery of problems between them, both teams are able to keep knowledge of them from management. On the other hand, problems which are discovered unilaterally may not be concealed, as related by the following account from a former worker at the Centre:

If something isn't done by one team, another team is likely to point it out in order to make themselves look better. When I first started, a care plan was missing from a child's file, so I wrote it in the Blue Book.\* I was told afterwards that I should have brought it up personally with the worker, but never to write it in the Book because management reads it. But cover-ups are for fellow team members, not for other teams.

While some degree of competition and rivalry are judged to be normal by workers, it may occasionally escalate into conflict. Conflict between teams usually revolves around performance issues, particularly the following: rule interpretation, rule enforcement, professional attitude, adequate communication, and/or a professional competence.

On the other hand, if poor performance is subject to condemnation, over-performance may also be frowned upon by some workers. Thus, one team may be seen by another as being 'uppity' if it writes reports that are 'too good' or otherwise receives special recognition from management.

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\*A daily log which records occurrences at the Centre.

On occasion, personality and performance issues may also become confused. One worker at the Centre recalls the following story:

At a couple of shift changes when a couple of counsellors had a grudge it was a battle. One wanted to drop a kid, but the other wanted to raise him, even though he thought the kid should be dropped too, just to piss the other guy off. This went on for a couple of months, then a directive came down from management that this had to stop. The supervisors were brought in and told that shift change would be altered, shortened, with only a certain amount of discussion of each kid.

While intense conflict, particularly of a personal kind, rarely occurs, it must be recognized that shift change in itself contains the structural basis for potential conflict. Such potential exists because the shift change involves only two of the three teams. Thus, the third team, which is on days-off, is left out of the decisions made at that meeting. Upon their return to work, the team which was absent from the meeting finds that it must enforce the decisions of others.

Enforcement of another team's decisions may also result in potential conflict between the two teams which are on shift. Being asked to enforce one team's decisions often results in the second's perception that the other has 'shirked' responsibility. Workers often perceive that other teams 'put off' instituting a potentially volatile measure, such as taking away an inmate's privileges, instead leaving the 'clean up' to a team coming after them. Thus, a day team may be judged as having left a tough decision until shift change when the evening team takes over. Alternately, an evening team may be accused of having left clean up for the team arriving the next morning.

On the other hand, it must be recognized that a large degree of cooperation does occur between the teams, probably as a result of

common interest. There is an unspoken rule concerning the contradiction of another team's decisions. Each team is considered to have sovereignty over its own shift. Disagreements as do occur are often suppressed or dealt with behind the scenes. While competition is seen as natural and, in some ways, functional to the Centre, there is an understanding among workers that such conflict as may occur must be kept within bounds.

Potential disunity among the workers is also mitigated by off-work contact between the teams. While shift work interferes with interactions to some extent, that which does occur reduces the potential for conflict. Moreover, transfers between teams increase the knowledge which members possess of each other. The result is that while workers may have a special sense of closeness with their teammates, they often possess a wider identity with other workers at the Centre.

#### The Limits of a Team

Thus far, I have discussed the team in the sense of its inclusion of each member. It is necessary now to speak of that part of each member which it cannot include: his individuality.

It is obvious that the final form of the team, no matter the structures of the institution or the characteristics of the team supervisor, is already limited in the first instance by the personal characteristics of those who comprise it. These characteristics will more or less limit the types of approaches and amount of agreement which the members can ultimately attain. More importantly, perhaps, personality differences may prevent workers from achieving a sense of closeness. Yet, even if a team is not close, the functioning of each member requires that conflict and disagreement be handled carefully.

The way in which one worker performs his functions may affect the others. A worker who handles a situation badly may create future problems for the other workers on his team. On the other hand, there is a sense among workers that they must preserve an image of unity in front of the children. It is only when the workers get 'backstage' (Goffman, 1959) that disagreements may be voiced. In such circumstances, workers may confront each other in private. This may involve a potential risk to their relationship, however. As one former worker has remarked, 'I accepted it when the supervisor told me how to handle situations better, but I didn't like it when other staff did, because they weren't the ones who hired me'.

To accept it from the supervisor may not mean, of course, that one likes it; only that one recognizes the authority vested in the position which the supervisor holds. In order to overcome the problems which might occur when equals confront each other, a supervisor is often brought in to act as a mediator. On the other hand, when the problem to be discussed is seen as general to the team, a group meeting may be held. In whichever form the meeting occurs, however, disagreements must be voiced in language which will not interfere with working together afterwards. Conflict must be kept within bounds. This may require that the intensity of disagreement be restrained.

This tendency towards suppression does not, however, relieve workers from a sense that they are judged by their teammates. Many feel that they are under pressure to show that they are capable of 'handling situations'. Handling a situation means getting the child to do as he is told without causing a scene. 'Quickly, quietly, efficiently', as one worker has stated it. Handling a situation means not only managing



the child, however: it means saving face among one's co-workers. One worker has described feeling as though they were in a 'fishbowl'. This feeling has been described by a former worker in the following way:

It's very frustrating when the kid doesn't listen to you and there are people around watching--kids, other staff--how you handle the situation, what you are going to do next. You're supposed to act without being told or having to call someone and say you need help. Other staff judge your performance.

Thus, a worker may feel acutely the negative judgements of team members surveying his performance of tasks. He may feel coerced to take on an approach sanctioned by the rest of the team knowing that failure to do so may be judged to be an 'attitude problem'. Alternately, he may follow the team approach only to regret doing so later on. For example, one former worker at the Centre remarked that, 'I would get caught up in the approach that the team would be taking and get home afterwards and wonder why I had done it, because it wouldn't be my approach'. In short, a worker may begin to feel his individual self is being threatened by the demands of the team. This sense of 'threat' may be combined with a lack of personal satisfaction gained through membership in the team. For example, some workers remark that their personal sense of accomplishment in seeing a child's behaviour improve is diminished by the fact that any credit for the 'success' belongs to the staff as a whole.

Between allegiance to the concept of the team and the need to preserve themselves as individuals, workers may at times engage in a kind of 'involvement cycle' with each other similar to that which Goffman (1961:82) observed among custodians in their relationship with inmates. Workers may also begin to feel that they have begun to know things

about other members of the team which they do not wish to know. In some cases, off-work interactions may begin to interfere with working relationships. Although very close to teammates at times, workers may on other occasions actively seek to broaden their outside contacts in order to reduce what may be perceived as an unhealthy dependency. Ultimately, for workers, interactions within the team are conditioned by a balance between being close and being too close.

#### The End of a Team

A team may begin to break up for several reasons. Workers may decide to quit child care. In many cases this seems to be a temporary step followed by re-entry after perhaps a year or two. Reasons for this may involve the worker's sense that she is burnt-out, or simply in need of a change. Because Fort McMurray is an industrial city, some workers might seek temporary employment at one of the plants in order to make money in a hurry, but will then return to child care afterwards. Women often leave the field for awhile in order to have children. For these reasons, child care in many cases is an interrupted career.

In other cases, workers may leave child care and enter directly into a related field such as social work. Perhaps more often, workers will transfer to other children's institutions outside of Fort McMurray. This usually results from a desire to escape the perceived isolation which accompanies work in the Northern community. Transfers of this sort occasionally involve a promotion as well.

Because child care workers at the Centre, as elsewhere, have tended to be young, a desire to return to university often occurs. Many of those who return to school pursue further education in the Humanities.

Finally, and perhaps the most regularly occurring way in which a team comes to an end, is through internal transfer. While this may be at the request of the worker involved, this is rare. For the most part, teams and teammates do not like to be broken up. When a change does occur it is usually a result of a management decision. Sometimes this is done in order to re-establish a balance between the teams. For example, where several workers have quit one team, it may be seen as necessary to transfer an experienced worker to the team which is short-handed. New workers may then be distributed equally among all the teams.

Often, however, management brings about changes in the teams even when there has been no loss of personnel. This occurs when management perceives teams as having become cliques. When teams become too close, the overall unity of the entire Centre is judged as suffering. At this point, management will often move to break up the teams.

While child care workers may sometimes agree with the perception that the teams are too close, they may not agree on the need to break them up. Workers may attempt to argue against such changes. In some cases, they might covertly attempt to manipulate the perceptions of others. For example, a worker has related that:

One supervisor told us to not show how close we were, and to openly disagree with each other at shift change so that other people wouldn't think we were too close.

When they are transferred to another team, the experience may be quite traumatic for some workers. They may feel a sense of loss or temporary disinterest in the job. There is often a period of adjustment for them as they learn the way in which the new team performs its functions. A former worker has suggested that, 'When you join another

team it's almost like you're working independently in your own little world'.

In time, the worker adjusts to the new routines. Moreover, his social interactions change. A worker stated that, 'Because of the shift work, contact is within a team. You switch to another team and you can't keep up the contact'. A result of this is that in time the worker may gain an appreciation for the way in which his new team performs its tasks. In some cases, as a new sense of team evolves, the worker may become as ethnocentric about his new team as he was about the old.

The loss of a member, through any cause, may also affect the remaining team members and the team. For one thing, the vacancy which is created is soon filled by a new member. New members may be socialized into the traditional way of doing things, but in most cases they also bring their own unique approaches and personalities. Thus, while dealing with their own feelings of loss of the departed member, remaining workers may also have to adjust simultaneously to the presence of someone new.

Finally, in the case where the worker has not merely transferred to another team but has left the Centre's employ, there appears to be the potential for contagious feelings of flight. The departure of a member from a close-knit unit may result in other departures soon after. One ex-worker has related that:

Once I found that three or four people who I had known for three or four years were leaving, I felt no desire to start building relationships again. I knew it was time to leave.

### Summary

This chapter has focused on the amount and type of information about one another which child care workers obtain during the course of their work. It has traced the development among workers of a sense of 'knowing' each other. Beginning with the 'taken for granted' knowledge which each member of a team possesses of the other, this chapter has followed the supplementing of that knowledge by other information. As the amount of personal information about each other increases, workers may gain a sense of 'closeness'. This chapter has suggested that this sense allows workers to better perform the functions of their job, but may also detract from their personal sense of 'self'. Thus, at times, workers may feel either 'close' and/or 'too close' to each other. As a result, workers' relationships with each other may follow an involvement cycle.

## CHAPTER FIVE

### WORKERS AND CHILDREN

This chapter will examine, from the perspective of child care workers, the children and youth placed in the Centre. It will trace the development of the workers' perceptions of children from generalized entities to distinct individuals, and the conditions under which this occurs. Finally, the limitations of the worker-child relationship will be explored.

#### The Child As 'Form'

Simmel (1964:22) has described form as being like grammar in language. Although it originally arises out of the content, grammar also determines the type and shape of the content being included. The concept of form is particularly useful in analyzing nascent relationships since any interaction presupposes some degree of mutual knowledge by the actors. Ironically, while the relation is the condition under which a picture of the other emerges, the form is also the basis for the relationship in the first instance. According to Simmel, this unity 'cannot be expressed otherwise than by saying that we build the first upon the second and, at the same time, the second upon the first' (1964:309). Where the information deemed eligible for inclusion is restricted by the receiving agency, as in a children's institution, it can even more be considered that it is not the child's totality and individuality which enters the facility but, rather, a form. Indeed, it may be said that on the day that a child is admitted to the Centre, it is not so much he who enters as the form now made flesh and bone. The name of this particular form can be termed 'the child-in-need'.

By this name, the new admission is readily 'known' by the child care staff in the Centre, since, by definition, no child enters the facility who is not a child-in-need.\* This form is constituted of a cluster of attributes which describe both the child's identity and, specifically, his 'problem'. Among these attributes may be listed 'untrustworthiness' and 'manipulativeness'. Children-in-need are also termed 'untrusting' and 'insecure'. They are said to lack 'self-confidence' and to possess low 'self esteem'. At the core of these attributes is the notion that children-in-need are not 'real'. That this is a primary element of the form may be seen from the following quotes by two former workers at the Centre:

We brought children into an environment where they quickly learned that they either went by the rules or paid the consequences, and they learned very quickly. . . . Every moment was structured time, they were programmed to the teeth, and I don't think we saw the real kid. This is where the trained person is needed to see the little things.

Thirty days is too short to get an accurate assessment. Kids are either 'honeymooning' or play the game knowing that they can manipulate the placement choices. . . . Ninety days is sometimes too long, but anything less than thirty is too short to get an accurate picture.

In short, the child's appearance is not taken at 'face value'. Workers view the information 'given' and/or 'given off' (Goffman, 1959) by the child as a combination of 'unnaturalness' and 'pretense'. The former is seen as resulting from the Centre's 'artificial' environment, wherein

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\*Goffman similarly remarks, 'The interpretive scheme of the total institution automatically begins to operate as soon as the inmate enters, the staff having the notion that entrance is prima facie evidence that one must be the kind of person the institution was set up to handle' (1961:84).

the child is not able to display his real self. In this regard, a former worker states that, 'You can't determine a kid's behaviour in a locked setting and say how he's going to function in the community. He needs to be integrated'. The second mitigator of information, pretense, is seen by workers as resulting from the child's conscious and unconscious dissembling of a character both for others and for himself. Depending upon the degree of perceived unreality of the character presented by the child, his interactions, while in the Centre, may be interpreted by workers under a condition of 'non-confidence' or 'confidence-within-limits'. Particularly during the first thirty days of his stay, a child's behaviour is seen as unreal. As described by the former worker quoted previously, new admittances are perceived as 'honeymooning'. During the first few weeks of a child's stay, many workers will often express, both formally and informally, that, 'We're only beginning to see the real child'.

For workers, a major step in being able to work with a child is discovering the latter's real self. One of the latent purposes of 'stripping' (Goffman, 1961:20)--the elimination of elements which maintain an inmate's identity--is to reduce the means of artifice by which a child might conceal his self. Personal items are not interpreted as props for one's real identity, but as masks behind which the child's real self hides. By restricting the amount of personalized clothing, make-up, sexual expression, and speech available to the child, workers believe that the real self will emerge.

While 'false' information is restricted, attempts at supplementing the form of the child-in-need with 'true' information are begun immediately upon the child's admittance to the Centre. Information particular to the



child, such as age, reason for detention, family background, and so forth, become part of the child's personal file. Psychological tests are administered and scored, becoming part of the child's character profile. The child's day by day behaviour is also appended to his dossier. However, it is obvious that the potential 'pool' of information concerning any individual is immanently large. For this reason, information about any child must go through a process of selection and interpretation.

For workers, this process presents no small, if often unconscious, problem. As one former worker relates, 'With more challenging kids, every day might be different and every report different'. As indicated in the previous quote of another former worker, 'This is where the trained person is needed to see the little things'. Workers see their task as one of sifting through the available information and selecting significant occurrences or patterns of occurrences from the child's behaviour. As a guide to which items will be selected, and as an end in itself, a worker must then be able to infer the meaning of these occurrences to the child. In this way, the child's real self is thought to be located.

The Centre's day to day operation is replete with examples of how the form of the child-in-need affects the interpretation of information about particular children.\* The attribute of manipulateness can fore-shadow future understandings, such as when a child apologizes for a recent behaviour. Depending upon the child, the apology may be interpreted by a worker as being merely an insincere attempt to negate

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\*These findings are congruent with those found by Rosenhan (1976) in his study of diagnosis and interpretation in psychiatric hospitals.

the consequences of his actions. Rather than bridging the gap in the relationship created by the incident for which the apology is given, the latter may instead become a negative appendage to the original act. The child's behaviour is interpreted in a way consistent with the form of which the child is a part.

A similar example can be seen in the case where a child's upset and subsequent refusal to eat lunch was interpreted by staff not merely as 'moodiness', but as 'testing the system' and 'attention seeking'. Perhaps, above all, it was seen as an unacceptable assertion of a part of the child's self which had no formal recognition by the workers. On another occasion, a child's nose bleed was interpreted by staff as being self-inflicted for the purpose of gaining attention. Acts, responses, and emotions which might be considered normal, or even ignored, in the outside world become highlighted within the Centre.

Another example of interpretation can be seen in those instances where a child might go into an area of the institution which is designated 'off-limits'. Because the action is forbidden, the behaviour is automatically considered abnormal. The child's act is seen as more than 'what it is'--a venturing into a restricted area. It must have 'meaning'. Thus, the act becomes a 'communication-beyond-itself', data indicative of the child's 'problem'.

Finally, the form can also be used to retrospectively provide a meaning to behaviours in the child's more distant past. Perhaps the most interesting example of this involves workers occasionally 'hypothesizing' that a child may have subconsciously gotten himself locked up in order to obtain help in dealing with his problem. Through this perception, the 'best interests of the child' are made congruent with the child's

own 'inner needs and desires'. The child is seen as having an intuitive sixth sense which has sought out a protector: the Centre.

### Types Within The Form

Within the form of children-in-need, workers also differentiate between sub-forms or types of clients. These types do not merely classify the characteristics of children; they also indicate worker preferences. The two major categories recognized by workers are 'delinquent children' and 'emotionally disturbed children'. In Mennerick's (1974) terms, the former are seen as 'better clients' than the latter. Child care workers appear to subconsciously evaluate children according to the five dimensions which Mennerick found other service workers to use in measuring their clients: facilitation of work, control, gain, danger, and moral acceptability.

For example, workers view delinquents as not interfering with the functioning of the Centre. They merely 'do their time'. On occasion they may even be helpful, for example, doing work around the Centre. Delinquents are seen as capable of cost/benefit calculations. Because they can evaluate the consequences of their actions, delinquents are viewed as relatively easy to control. They are not dangerous. Delinquents are also seen as being able to carry on 'real' conversations. Workers can develop a sense of rapport with them and may even receive personal gain from a sense of minimal trust or appreciation. Receipt of gain by staff does not require that they necessarily have a feeling of 'working' the child, although they clearly consider this a plus when it occurs. In many cases, however, it is merely sufficient for workers that they not feel 'hassled' by him. In a sense, delinquents may be termed 'normal' children-in-need. On the whole, workers do not have

negative reactions to the delinquent-as-person, although they reject his behaviour. Indeed, in many cases, workers identify with delinquents, comparing their behaviours with the 'pranks' which the worker himself engaged in when he was younger.

Emotionally disturbed children, on the other hand, present a problem for the workers. They require 'excess' attention. Unless supervised constantly, they are likely to interfere with the smooth running of the Centre. They negatively affect group dynamics, often creating conflicts among the rest of the children. Emotionally disturbed children do not know how to perform their role. Thus, they are likely to show a lack of deference for workers or create 'inappropriate' scenes. Workers are regularly required to exercise overt control over emotionally disturbed clients. Workers do not see them as capable of substantial change. Emotionally disturbed children are viewed as particularly 'unreal' and therefore insincere and untrustworthy. For these reasons, workers feel no sense of gain in interacting with them. As one worker said of children deemed psychotic, 'There's nothing you can do with them. They are totally draining and a waste of my time'. Emotionally disturbed children are seen as irrational, reactive, and unpredictable. These qualities make them dangerous in the eyes of workers. This perception is indicated by workers occasional informal references to emotionally disturbed children as 'whackos', 'psychos', and so forth. Finally, the deviant behaviours which emotionally disturbed children engage in are not easily separated, by workers, from their intrinsic character. While workers may be able to identify with delinquent pranks, the behaviours of emotionally disturbed children, for example, glue sniffing or bed wetting, are not as easily understood and, hence, accepted by workers.

These 'types' are open to some qualification, of course. For example, delinquents who are seen as 'hard core' or 'cold' may also be judged as a waste of the worker's time. Any time that workers feel they are merely 'housing' a child, they lack a sense of gain. It is at these moments that workers are most likely to see their role as custodians or, as is commonly stated, 'baby sitters'. On the other hand, mildly emotionally disturbed children may be seen as capable of a warm and appreciative response to the worker's interactions with them. Hence, the worker feels rewarded. Workers also appear to differentiate between male and female inmates. The former are often viewed, particularly by male workers, as testing their authority. Girls, on the other hand, are often seen by female workers as being more manipulative than boys. On the whole, workers appear to prefer working with children of the opposite sex from themselves.

Finally, Native children appear to be another 'type' recognized by workers. Many workers have an idealized image of Native children as being warmer, friendlier, and more capable of closeness than their White counterparts. Native children are seen as responding to simpler rewards and being more appreciative of the worker's efforts than White children. Many workers thus sense greater gain in working with the former. This is countered somewhat, however, by a simultaneous perception that Native children are more often 'disturbed' than White children; hence, increased danger and problems of control for the worker. Finally, workers also view Native children as having a greater potential for becoming institutionalized. They believe that Native children who come to the Centre often become 'too attached' to an environment which the workers view as artificial.

The effects of these typologies may be twofold: 1) The time spent by workers with 'good clients' may be quantitatively and qualitatively greater than that spent with 'bad clients'; and 2) There may be greater pressure exerted by workers upon social workers and management to move the bad clients to other facilities.

### The Structure of Interaction

In discussing the supplementing of the form by information about the particular individual, it is necessary to also discuss the structures either limiting or conducive to the emergence of the same information. These structures may be said to control the output of information and may be further classified as either 'obtrusive' or 'unobtrusive' in nature.

#### Obtrusive Controls

Obtrusive controls are of two types: those with a preventive function and those with a restitutive function. By far the greater number of controls at the Centre are those which are preventive. They are based on the identification of potential problems of control before they occur. Their purpose is to direct the 'appropriate' actions of children before they can act in a disruptive fashion. Restitutive controls, on the other hand, are those meant to restore the Centre's operation to the way it was before the disruptive behaviour occurred.

#### Preventive Controls

Among preventive controls, the first to be considered must be the ostensive 'rules and regulations' of the Centre. The consequences of failing to adhere to these and their counterpart, the rewards and privileges for adherence, may be considered a part of this form of control. A child's adherence to the rules and regulations is indicated by his 'level'. This grading system involves daily evaluations of the child's

behaviour. Evaluations are conducted at every shift change. Because it is the means by which certain ends are attained--rewards and privileges--children regularly ask workers throughout the day whether or not they will 'get their level'. This ongoing concern by children as to their status offers, in itself, a degree of control for workers. Furthermore, benefits may not be contingent upon a child's ascribed level. For example, children are ostensibly allotted six cigarettes during each day. However, some or all of these may be taken away as a consequence of 'inappropriate' behaviour. A great deal of conversation between workers concerns the use of benefits as 'levers' to control the children.

Hand in hand with the rules and regulations of the Centre is the control offered through 'routine'. Routine is organized to facilitate control. For example, children are awakened in the morning with activities which will prevent idleness and encourage discipline. Children-in-need are seen as having problems in handling spare time and freedom. 'Idleness begets trouble'. Thus, even the free time allotted to the children during parts of the day means only, as one worker stated, 'that they are free to do one of a couple of things'. A sub-component of routine may be termed 'programming'. Much of programming involves athletic activities. Periods of exercise are interspersed throughout the day in order to wear off youthful energy. Evening programming, on the other hand, is arranged so that children will begin to 'cool down' prior to bedtime. These programs often involve what might loosely be called 'life skills'. Given the variation in ages at the Centre, it is perhaps inevitable that these activities rarely serve to interest all children. Indeed, many of them treat programming as an ordeal. The skill level

required in the activities is usually minimal. Workers, themselves, often treat them as silly or boring. Nonetheless, whatever the activity, children are expected and encouraged to 'put out'. The expectation is that, within the activity, children should 'lose themselves'--the selves which must otherwise be more manifestly controlled by the workers.

Another method of control is 'searching'. While the previous methods of control involve the construction of order, one may consider searching as an attempt to locate disorder. The scarcity of materials achieved through stripping limits the ability of children to hide forbidden objects for which searches are ostensibly conducted. Workers are particularly alert for such things as solvents, weapons, escape plans, or suicide notes. While searches are manifestly conducted for reasons of safety and security, they may also be considered a further effort at discovering the child's real self. Furthermore, the mere fact that workers may, at any time, search a child's private effects provides an element of control.

On the other hand, searches rarely turn up anything unusual. Workers tend to look upon security checks as mere routine. They believe they can intuitively sense when a child is 'up to something' and that searches are of otherwise little value. Some workers also dislike searches because they see them as a violation of the child's privacy. This is particularly the case when a child's notes or diary are read. Workers sense a breach of the trust which they are attempting to create with the child.

A fourth method of preventive control is that of 'physiological and/or psychological modification'. This may be accomplished through diet or the administering of medications, usually depressants. The



former usually involves an attempt to control the sugar intake of children deemed to be hyperactive. Medications of a psychological nature are rarely used. When they are, it is with the concurrence of a physician. Some workers express ambivalence as to the use of psychological medications. On the one hand, they dislike the use of chemical means to alter a child's personality. At the same time, they are glad of the increased control which their use affords them.

Preventive control may also involve enforced 'introspection'. By constantly stressing to the child that he must look at his own behaviour, workers attempt to instill a degree of self-control. For example, if a child is physically hit by another child, a worker may ask the assaulted individual to examine what he had done to 'provoke' the attack. Children are not allowed, for very long at least, to forget their present situation or their role in it. For example, if children begin to complain, their predicament may be reinforced to them by a worker's comments that, 'We didn't invite you here' or 'You have a home. Why aren't you there now?'.

The function of introspection may be compared to that which self-confession holds in many religions. In order to be treated ('saved') the child must first come to recognize his problem. Perhaps the most interesting example of workers attempts to instill introspection occurs during group meetings of the children. Goffman (1961:96-7) has described group therapy sessions in total institutions as a form of 'role release'. It must be recognized, however, that an institution's major intent in conducting these meetings is to instill inmate self-control. Any release which occurs is kept within bounds by the staff. At the same time, it also appears that adult inmates are able to more skillfully play their role

in these 'scenes' than are children. Because they are likely to stray from their lines, children in groups present, in some ways, a greater problem of control for custodians than do adults. Children may press too obstinately for an actual release from their role. There is, hence, a greater risk that staff members will lose face. Workers also fear that such meetings may breakdown into mere 'bitch sessions' or attempts by the children to 'scapegoat' each other. For these reasons, child care workers instigate few of these meetings. When they do occur, group meetings are structured more around 'role maintenance' than release. Two-way communication between workers and children does not occur. The complaints and/or perspectives of the children are not validated. For the most part, attempts by children, at any time, to normalize their conditions are frowned upon by workers. This is indicated by the informal comment of one worker that, 'They are locked up and they shouldn't expect special [i.e., normal] privileges'.

A sixth method of preventive control is 'grouping'. Children are often separated into small groups during activities. Grouping particularly occurs when certain children are seen as able to 'get others going'. The potentially 'instigating' child may be given one-to-one contact separate from the others. By isolating groups or certain individuals, workers hope to contain more easily any problems which might occur. The possibility of 'contagion'--the spreading of inappropriate behaviour among the children--is a constant concern of workers. When a child does 'act out', his subsequent isolation from the others may be more purposefully termed 'situational elimination' (Klein, 1975:179). In any case, the intent of preventing similar behaviour among the others remains constant.

Closely related to this method is 'surveillance'. Merely having workers, particularly male staff, in the vicinity of problematic children is seen as a means of dissuading breaches of control.

A final method of control, desired by workers but largely unobtainable, is that of 'co-optation'. Workers will sometimes express a wish that the Centre had a 'nice, big kid' who would emerge as a leader and control the others. However, workers have little control over the selection by children of their informal leadership. In any case, peer pressure usually prevents any leader among the children from simultaneously becoming 'too close' to the workers.

#### Restitutive Controls

The first method of restitutive control is that of 'cooling out'. Generally, when there is a problem, workers attempt to de-escalate the situation by talking to the child. By getting the child to talk about the situation it is felt that physical confrontation will be avoided. Workers may ask the child why he is handling the situation in a particular way. They may indicate the behavioural options available to the child. Often, they simply tell the child to go to his room and 'cool down' for awhile. This is termed 'timing out'. A child may also be reminded of the consequences for his actions if he continues to act in an unacceptable fashion. Alternatively, privileges may actually be taken away from the child. However, the child may also be left with the impression that prompt adherence to the worker's demands may mitigate enforcement of this privilege-loss. While workers may occasionally use discretion in enforcing a decision, they are wary of making idle 'threats'. Ultimately, a privilege taken away must be enforced unless the child is able to properly display contrition.

The second method of restitutive control involves 'physical restraint'. In theory, physical restraint occurs as an outcome of the failure of the previous techniques to control the child. Furthermore, it is supposed to occur only when the safety of the child or others is in danger. However, the point at which other methods may be said to have failed appears to be discretionary. On some occasions, workers appear to provoke children to the point of needing to be restrained. Workers will occasionally rationalize this by saying the child needed to 'blow up'.\* Often, the child is said to not like the feeling of being out of control, and therefore needed to be held in order to feel secure. Some workers also rationalize physical restraint by saying that to do otherwise would be to give the child an unnatural or unreal response to his behaviour. All of these retrospective explanations may be seen to infer an element of intentionality on the part of the worker.

On the other hand, it often appears that workers provoke incidents without any sense of outcome. The blow ups which occur do not always appear to be therapeutically intended. Often they occur at the end of a long work shift, and perhaps after a series of stressful interactions which the worker has had with the children as a whole. It must therefore be considered that workers may become involved in some physical restraints as a result of their own personal stress and fatigue. In short, it may be the worker's own need to blow up which is satisfied through physical restraint.

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\*A variation of this is when staff allow children to 'go at it' with each other. In doing this, however, staff gauge the relative strengths of the two combatants in order to assess the potential for 'real' harm. In short, the workers want it to be an 'even' and a 'fair' fight.

At the same time, it must not be construed that restraints are either usual or enjoyable to staff. Most workers go out of their way to avoid physical confrontations. When they occur, workers are conscientious about the child's and their own safety. Physical restraints often leave workers shaking, upset, and keyed-up afterwards, and are a major cause of their need for emotional support from their teammates.

The third method of restitutive control involves the isolation of the 'acting out' child to the 'quiet room'. There are two such rooms at the Centre. They are rarely used. When they are, it is for brief periods of time with constant supervision of the isolated child being provided. Isolation to the quiet room may be seen as the restitutive side of situational elimination previously mentioned.

#### Unobtrusive Controls

The primary example of unobtrusive control within the Centre is that of 'role modelling'. This consists of children learning how to perform the adult 'role' through observation and imitation of the adult care-givers. There is some evidence that workers, particularly in the early stages of the job, consciously compose the character whom they will portray. However, in time, most staff become the role, at least during the hours of work. An example of this can be found in the remark of one worker that, 'At first I was more apprehensive about breaking the "norm", but now that I have been here longer I am more likely to do what I think is right in a situation'. For workers, portrayal of their work-character becomes 'second nature'. This character may be said to be composed, consciously and unconsciously, through four methods of presentation management.

The first method may be termed 'addition'. This involves the worker taking on parts of his character which may not be natural to his 'real' self. For example, workers must regularly appear confident in their actions even if they are not. They must also support the actions of their fellow workers or the rules of the Centre even if they disagree with them. Addition does not occur to any large degree, however, probably because workers recognize the difficulty in keeping up a 'front'. It appears to be more common that parts, fundamentally alien to the worker's character, are soon discarded.

The second method is far more common: 'subtraction'. In this case, workers limit the parts of their character which are revealed. Thus, a worker may subtract speech (i.e., swearing or obscene jokes), behaviour, personal history, or emotions from his performance.

While addition and subtraction describe the extremes of presentation management used by workers, there is also a middle territory occupied by what might be termed 'backgrounding' and 'foregrounding'. Backgrounding involves the receding of parts of the worker's character, but not to the point of their elimination from sight. For example, a worker may reduce the emotional level of his response to a child's behaviour while still indicating to the child, in other ways, his feelings of displeasure. A second example might be found where a worker hints through his language and behaviour that his knowledge of the illegal drug scene is not merely 'textbook'. The child may acquire the sense of sharing in an aspect of the worker's 'secret identity' while not possessing of it. In this way, the curious youth is enticed to come closer to the character being presented. Backgrounding may thus be viewed as a fundamental

method by which the problem of distance in the worker-child relationship is bridged.

Foregrounding, on the other hand, may require emphasizing real parts of one's character. This may be said to occur when a worker begins to explicitly reveal more of himself to a child. It may also involve enhancement of the worker's emotional responses to a situation, for example, appearing to be more angry than one actually is.

The difficulty which workers feel in composing their character is made obvious by the following quote from a former worker at the Centre:

A normal kid can handle me being a person and knowing that I have a temper. I don't have to stand there very calm, with a monotonous voice, talking about his feelings while he is screaming at me. . . . There are times when it is appropriate to use the child care fundamentals, but they aren't appropriate all the time, and kids need to know where you are coming from. If you are a reasonable human being, then there is no reason in the world why the kid shouldn't know how he's made you feel, and what kind of reaction he can expect from people when he acts that way.

However composed, it must not be thought that workers view their role cynically. In Goffman's terms, they are 'taken in by their own act' (1959:17). The parts of the character which workers present is fundamentally 'real'. It is, however, not 'whole'. Furthermore, a worker may also begin to take his character for granted. The mode of presentation of any role, unconsciously enacted over a period of time, is subject to routinization. Thus, as one former worker at the Centre has related:

How many times can you counsel kids for the same problem? In a year you might have ten or twelve kids with the same problem. I found myself using the same lines after awhile. You are giving them a 'pitch'.

At this point, the worker stands outside of his performance. He may watch it with curiosity, but he is no longer 'there'. Another former worker states that, 'When you use a script, it isn't real. You both [the child and the worker] know it's phony and you can't wait for it to end'. Nonetheless, even in this, the worker remains real. He simply does not attend his own performance. Instead, it is the relationship and the object of the relationship--the child--who have become unreal at that moment. The same former worker who described the 'pitch' went on to say, 'It is hard to keep the kid 'individual' after awhile. This kid has problem #37, give him this speech. You see that a lot'.

#### The Language of Interaction

In common with other superordinate-subordinate relationships, the verbal interactions which occur between workers and children are guided by particular rules. Some of these have already been alluded to but can now be explicitly stated.

For children, the first rule is that their speech must be 'all-revealing'. In practical terms, this means children must not speak in codes unfamiliar to the workers. Slang terms, allusions, or jokes may thus be forbidden. Workers tell children it is 'rude' to speak in front of people in a way which they cannot understand. It is rude, of course, because codes allow those 'in the know' to maintain their secret from those who are 'outsiders', in this case, the workers. Because knowledge is power, codes are an open display by a child of his opposition to the workers' authority.

The second rule requires that the children be 'role cognizant'. Children are expected to dramatize, through speech as well as action, a recognition of the workers' authority. Interactions with workers need



not be overly formalized. Indeed, children are frequently able to 'fool around' with workers. However, there is an almost visible barrier which children must not cross during these interactions. Crossing this border calls into question the authority of the worker. As the child ventures too close to it, a worker may signal the child, through tone of voice, facial expressions, or verbal commands, to 'cool it'. The child who is role cognizant understands these signals and does not press the worker any farther.

Recognition of the limits of interaction reveals the degree to which a child is able to play his part. To some extent, it is not deemed necessary by workers that the child accept his role. Indeed, too easy an acceptance may be seen as an attempt to manipulate the worker. However, in playing his part well, a child receives credit for possession of the requisite social skills. On the other hand, a child who either cannot or will not act his part displays a personality in need of extensive treatment.

Workers also have rules which govern their verbal interactions with children. In contrast to the rule that children must be all-revealing, the first rule for workers is that they must be 'selectively revealing'. This is particularly the case regarding information about themselves, of course. However, workers must also select which information concerning the child will be revealed to him. For example, workers may withhold information from a child about plans for his placement on the grounds that 'nothing is formalized yet' or 'the child needs to be prepared to accept the plan'. Because the possession of knowledge and the subsequent ability to selectively reveal parts of it are the bases of manipulation, workers can be seen as actively attempting to shape the premises

underlying children's decisions. However, the following typical scene, described by a former worker at the Centre, indicates the problems which sometimes plague these attempts:

'Appropriate' placements and 'realistic' placements might not be the same thing. Resources might not be available. This is frustrating, but the possibilities are crossed-off, until a choice, perhaps third best, is agreed to. Everyone convinces themselves of its correctness, because that is all there is. Even where you are planning with the child, he might sit in on the first conference, and the social worker is telling him that 'Plan A is it, no problem'. But a week later Plan A is obsolete, so you have to convince the child that Plan A wasn't so great. Some children can understand that there wasn't a bed available, but others can't, so you have to play a game of 'It wasn't such a good place and we have to find a better place'.

The second rule for workers is that their language must be 'therapeutic'. This means that statements must be designed with intentionality and accurately reflect what the worker means. Words must be neither value-laden nor emotionally sensitive. Thus, children are not described as behaving 'badly', but, rather, 'inappropriately'. The use of such euphemisms is meant to reduce the effects of labelling while also de-escalating potential confrontations with the children. At the same time, there are occasions when euphemisms are clearly not directed towards either the child or his behaviour. For example, when children are placed in isolation, the expression regularly used is that they are 'assisted' to the quiet room. In these situations, euphemisms appear to be directed towards outsiders and the worker's own self rather than the child.

### The Emergence of Close Relationships

Despite the initial limitations of the 'form' of the child and the structures which further limit the emergence of information about the

individual child, it is nonetheless true that some workers and some children do form close relationships with each other. The key variable in developing a close relationship appears to be 'time'.

The longer a child is in the Centre, the more his 'membership' within the form is likely to be supplemented by information unique to himself. A member whose personal information burgeons becomes increasingly singular. The child's character no longer falls along the same points defined by the other members of the form. He becomes an individual.

The element of time also creates a difference between workers' relationships with 'in-town' and 'out-of-town' children. Out-of-town children are often temporary inmates. Moreover, their contact with the Centre usually ceases once they have left. In-town children, on the other hand, remain at the Centre longer, often taking advantage of the facility's treatment function. They are also more likely to return to the Centre for other periods of detention. Finally, in the course of living in the community, workers often come into contact with the children after they have been released. Thus, workers continue to supplement their knowledge concerning in-town children.

As the form recedes and the individual child emerges, changes occur in the interactions between them and the workers. These changes are commensurate with the needs of the new relationship for the involved parties to treat each other as individuals. For example, while they like the general framework provided by rules and regulations, workers may dislike their 'inflexibility' when dealing with the individual child. Within the new relationship, it is also more common that workers allow both themselves and the children a 'role release' (Goffman, 1961:94). Workers

may express more about their personal selves, including aspects which may not fit within the idealized form of the 'role model'. The children, in turn, may be allowed to 'kid' the workers, even on a personal level. An understanding develops between the worker and a child that, within limits, the latter may expand his role. These limits are that the child must not 'step out of role' in front of the other children or otherwise act in a way which would question the worker's ultimate authority. Thus, for example, a child may have greater leeway in swearing in private with the worker, but must revert to form when in the company of others.

#### The Limits of Closeness

It would be wrong to think that all workers want to form close relationships with all children. Some workers become close to some children. Perhaps a few other workers would like to form closer relationships with certain children. Many workers, however, are quite satisfied with the limited degree of intimacy which can be achieved.

For example, the Centre's short-term detainment of children is considered a 'plus' by some workers. The fact that many children simply come to the institution for assessment and then go elsewhere is seen by these workers as relieving some of the stress of child care. Short-term care precludes many of the problems entailed by closer involvement. Secondly, as stated by one worker, 'I shudder to think that I might be stuck with some asshole for a year'. Short-term treatment is thus seen as a desirable feature allowing for the rapid turnover of problematic children.

Many workers also lack a desire to greatly alter the basic form of their relationship with the children. They do not want to become too close to the children or the children to become too close to them. They

would prefer to keep the relationship 'businesslike'. Some workers justify not becoming too close as a favor to the children. Because the Centre's environment is seen as artificial, they do not want the children to become too attached to it.

Finally, workers who attempt to form close relationships with the children often become frustrated and jaded by the experience. They begin to protect themselves, often through attempts at 'distancing'. This may be seen as an aspect of the 'involvement cycle' described by Goffman (1961:82). A worker at the Centre remarked that, 'Workers vacillate in their relationships with children from "trying to avoid" to "over-identification"'. They intentionally seek distance because of feelings of being too personally involved or 'weighed down' by the children's problems. The 'failure' of a child to perform to the worker's expectations may leave the latter feeling hurt, angry, and/or frustrated. At other times, a worker may feel manipulated by the children. The sense of being used and not appreciated by the children was expressed one day, in exasperation, by one worker who said, 'They [the children] think we're their slaves or something'. For workers who have gone into child care with high expectations of receiving emotional feedback from the children, the reality of the job may be particularly disheartening. In time, even those who would like to give their 'all' to the job often come to the point expressed by one former worker that, 'I had to guard against showing a part of myself that could be used against me'.

Distancing, whether a temporary action or an ongoing feature of the worker's behaviour, may thus be seen as a response to negative gains perceived as accruing from interactions with the children. Child care workers experiencing a desire for distance must often 'psych themselves

up' before going to work. On the job, there are various behaviours which may be indicative of distancing. Perhaps the most common involves a worker's self-isolation to the main office. Behind the office windows a worker can drink coffee and converse with peers while ostensibly maintaining a vigil over the children. There are other more subtle methods of distancing, however.

For example, a worker may become a little more reluctant to enforce rules. When he does enforce them, this may be done 'by the book'. In either case, the amount of interaction with the children is restricted. On the whole, the interactions of distancing workers with children when they occur, are more often a matter of course than enthusiastic participation.

Workers may also use distancing in a conscientious attempt to avoid interactions which they feel might be negative to a child. For example, some workers will 'time themselves out' before dealing with a child's misbehaviour. This use of distancing allows the worker to calm down and to later approach the child in a therapeutic manner.

Finally, there comes a time when a child, whom the worker may have become close to, leaves the Centre. Contact between workers and children after the latter's departure is restricted by order of the Centre's management. Of this, a worker remarks, 'There is a directive that we are not supposed to keep in touch, or should notify the Director or Assistant Director if we are going to. But some staff have unofficially let kids crash at their place'. Thus, some contact is maintained afterwards, usually by telephone. However, there may also be problems with maintaining contact, as related by one former worker:

I got very close to the kids while working at YAC, and still keep in contact with one of them. At first I allowed kids to get close, even to come over to the house. But this became awkward as they'd bring their friends over at inopportune times, so I had to discourage this contact.

After a time, the majority of contacts come to an end. The workers interact with new children. The former children often become only memories whose primary characteristics comprise the basis of a continuing form.

### Summary

In Chapter Two, the interactions between workers and children were described as based upon an authority relationship. In this chapter, workers' knowledge of individual children was shown, in the first instance, to be subsumed beneath a 'form'. These two structures--the authority relationship and the form--determine the amount and type of information which workers possess about a child. Furthermore, the emergence of individually distinguishing information is limited, shaped, prevented or allowed by the structural controls of the Centre. In time, the uniqueness of an individual child may emerge. In these instances, some workers and some children do form relationships of a close nature. However, this closeness is often limited to the period of time during which the child is confined to the Centre.

## CHAPTER SIX

### WORKERS AND MANAGEMENT

This chapter will describe the relationship which child care workers have with the internal management of the Centre. Internal management will be defined as the Director and Assistant Director of the facility. Where specifically mentioned, team supervisors will also be included in this definition. External management, when mentioned, will refer to Departmental authorities outside of the Centre.

#### The Structure of Interaction

It must be stated at the outset that two conflicting situations condition the interactions which occur between internal management and the workers. On the one hand, workers are contractually bound within a relationship of superordinate and subordinate status. Workers understand the differentials of power which underscore this relationship. At the same time, many of the factors mentioned in Chapter Four as facilitating a sense of closeness among workers also affect their relationship with management. For this reason, the various Directors and Assistant Directors who have held positions at the Centre have been primarily viewed by workers as understanding and personable. A degree of off-hours socializing has occurred between the two groups in the past. This presents a substantial problem for workers whose professional and personal needs may be at variance with those of the employer.\*

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\*This study does not take as its aim the understanding of management perceptions. At the same time, it may be considered that management is, at times, also caught in the dilemma of dealing with workers who are personally known.



The role of management is perceived by workers as being concerned with two functions: performance and budget. The former involves the meeting of children's needs; the latter involves meeting these needs within budgetary guidelines. The day-to-day interactions of workers with management centre primarily on performance issues. However, budgetary matters affect many of the serious problems which workers have with both internal and external management.

Management tries to get 'the most' out of workers. 'The most' includes efficiency, adherence to the rules, and dedication to the aims of the institution. Anything which negatively affects the worker's performance, including aspects of his personal life, may be questioned by management. Workers are variously instructed, encouraged, and reprimanded for the purpose of getting the most out of their performance.

The area in which performance issues are generally brought forth by management is either the staff meeting or the shift change. On these occasions, new rules and policies are presented. Those prescribed by external management are primarily informative and beyond discussion, although clarification may be requested. Internal policies are more open to change. Problems of a general nature are discussed during these meetings.

Individual problems concerning either performance or contractual issues are generally dealt with in one-to-one meetings between each worker and management.

#### The Underside of Interaction

As stated, workers recognize the power of management to command the most from their performance. At the same time, workers perceive that 'giving their all' does not result in any substantial reward. The

sense that one's efforts are not recognized, let alone rewarded, was stated by one worker in the following way:

The only time anyone from above talks to you is if there is a problem. No one sits down in the middle of a hard day at work and says, 'You did a good job with so and so'. The only time you get feedback is on the EPAS\*, and that's not the same.

Furthermore, workers perceive the interests of management (both internal and external) as often being at odds with their own interests. To control or deflect the power of management, or to otherwise ameliorate potentially unpleasant situations, workers have devised a number of informal adjustments to the job.

The first of these has already been described in Chapter Four: 'covering up'. For the reasons stated, this occurs more often within teams than between teams. Its potential for occurrence exists, however, anytime that two individuals or groups recognize the reciprocal benefits to be gained through the mutual retention of the other's secrets.

A second method of keeping managerial authority at a distance is 'make work'. This form of behaviour, found in various work places (Goffman, 1959:109), involves workers in 'looking busy' whenever management comes around. Idle chatter decreases, replaced instead by the arrangement of files, the writing of reports, or the active involvement of workers with the children. Even when the children are engaged in a programmed activity, such as school, 'free' workers are reluctant to do anything which is too obviously 'doing nothing'. For example, they will not play ping-pong with each other while management is present. The

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\*Employee Performance Appraisal Schedule

problem for workers, of course, is that the Centre's size and regimen limit the number of available functions. In this regard, part of the task of workers is often to create tasks for themselves.\*

A third method of adjustment used by workers may be termed 'distancing'. This consists in meeting the functional requirements of the job while withholding emotional involvement. Usually, this method is an unconscious adjustment to the emotional demands of the job. While distancing may represent only a temporary stage in the involvement cycle, in some cases it appears to be a relatively constant feature of the worker's performance. At the same time, the difference between 'putting out' and 'withdrawing' is not readily measurable by management. Thus, a worker may fulfill the functional requirements of the job while retaining some distance from its demands.

A fourth method by which workers may control their relationship with management is through 'repression'. When workers disagree with some aspect of their job, they must decide if they want their disagreement to be known. If their disagreement becomes known, they must determine if it is likely to affect any change. Where the answer to

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\*It is interesting to note that internal management does not display much concern when a worker is caught being idle. The fact that the majority of the workers are conscientious enough to 'make work' when management is present no doubt serves to make manifest the power which management possesses. No more obvious display is necessary, even in those cases of occasional deviation. In this regard, it may also be stated that many of these adjustments herein described as used by workers are known but not recognized by management. To merely know something is to have the option of ignoring it. Recognition, on the other hand, requires a conscious response. To the extent that this may lead to unwanted confrontation, management appears to prefer allowing minor infractions to remain unnoticed.

these questions is 'no', the worker is likely to remain silent. One worker has suggested that employees often have specific disagreements but 'clam up' at staff meetings. The same worker adds, 'It's really frustrating because you know that some people agree with you but they'd rather let it go by the boards than argue, in order to save their own asses'. Another former worker remarks that, 'The administration is not intimidating, but workers perceive themselves as being under threat'. This suggests that, despite the personal relationship which they often have with internal management, the structural basis of power is both recognized and acted upon by workers in their formal interactions with them.

Finally, it should be stated that workers may also 'invoke' the Union\* as a formal method of dealing with the management's authority. However, because the grievance procedure is so long in achieving results, which may also be unproductive, this tactic is only used as a last resort. Furthermore, as a method of confronting management, it is too obvious. It brings the worker into open conflict with management. Even if their grievance is found to be valid, workers believe that such actions place them in a position of future jeopardy with management. Thus, although some workers will privately 'gripe' about such things as holidays, sick leave, or their employment status, these complaints rarely result in union action. As a former worker has stated, 'It's as if they fear some kind of repercussions from somebody. . . . They don't want to take any chances'.

As stated previously, workers often perceive the interests of management as being contrary to their own interests. This perception is

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\*Alberta Union of Provincial Employees

particularly evident in workers' concerns involving safety and security and performance ratings.

### Safety and Security

Workers feel that they are often requested to implement policies and procedures which are unworkable. While they do not dispute the authority of management to place any type of child in the facility, workers feel that management does not properly consider the capacity of the workers to handle particularly difficult children. A few workers believed, at the time when this study was conducted, that particularly difficult children were intentionally brought into the Centre in order to increase its prestige. One worker remarked that, 'We've had social workers call and say, "We've heard that your Centre does really good work with tough kids so we're going to send him up there"'. Another worker stated that, 'We had two kids at the same time that we were told no other institution in the province would take because they were known', but the Centre's management wanted 'to boast that they could handle any type of kid'.

When, at meetings, workers attempt to express concerns for their own safety and security, the response from management is often to trivialize or minimize the issues. The concerns of workers are deemed to be 'unwarranted' and 'hypothetical'. Their behaviour is said to be 'emotional', rather than 'professional'.

At the same time, workers also feel that management jeopardizes them for financial reasons. Teams often work short-handed because some workers have quit or are on holidays. Supervisors who leave are not immediately replaced with permanent staff. Even the upper management positions in the Centre were filled by 'acting' officials during the

last few years prior to the conduct of this study. Workers perceive these occurrences as systematic attempts by internal and external management to save money. During the period when workers are not yet hired, and those persons who indefinitely fill management positions are paid a lesser salary than permanent staff, the Centre and the Department are seen as building a surplus of unspent cash. Workers view attempts to save money in this fashion as a risk to their security and safety. One worker commented that, 'If they [management] want first-rate security, they have to pay for it'. The frustration of workers in this regard is summed-up by another worker who remarked that, 'Everything [at the Centre] is determined by dollar signs'.

Finally, having placed them in a situation of potential jeopardy, workers feel that management will not support them if they are harmed. For example, while workers have been told by management that they may lay assault charges against a youth if they feel that circumstances warrant it, they have also been told that they are 'on their own' in doing so. It has further been suggested that, if such a charge were to go to court, the child would likely have a lawyer and that the worker might come out of it 'looking very bad'.

In short, workers often feel that they are not emotionally or legally supported in their concerns regarding safety and security. They also believe that the monetary and prestige concerns of management occasionally place them at risk.

#### Performance Ratings

Within Alberta government departments, the Employee Performance Appraisal Schedule is a formal measure of employee performance. It is

updated annually by the employee and his supervisor. The basic criteria against which the employee is rated is contained in his job description. By asking him to state the areas of his performance which he wishes to improve, the supervisor gets the employee to indicate his own ineffectiveness in meeting some of these criteria. Both the supervisor and the employee must agree on the contents of the Appraisal before it is submitted to higher administration in any given year. The following year, the worker's performance in meeting the requirements and the goals stated in the previous EPAS are re-assessed. A failing grade on an EPAS means that the employee fails to receive a salary increment. On the other hand, an exceptionally good passing grade may win a double increment for the worker.

The EPAS for child care workers emphasizes three areas of performance. The first of these is her ability to write an assessment of a child. 'Ability' refers to the insight which the worker displays in doing an assessment, and her writing skills in conveying this information. The second area of emphasis is on the worker's performance on the floor: her ability to follow rules, handle situations, and generally be part of the team. Finally, the worker's efforts during the preceding year to improve her knowledge and skills are duly noted.

Workers do not see the EPAS as either a positive or even a neutral document. Rather, it is perceived as an attempt by management (both internal and external) to locate the worker's performance 'problems'. One former worker at the Centre relates that, in the early days of the facility, an official from central office in Edmonton came to talk to the workers because there was 'so much flak about the EPAS'. Despite the official telling them that it isn't a grading system, workers still see it as

one which compares them with each other. Furthermore, it is perceived as a grading system in which it is virtually impossible to get a high 'mark'. The only hope for workers is to receive an average grade which will allow them to obtain the standard incremental raise.

Workers' dislike of the EPAS system extends beyond the purpose of the procedure to the criteria against which they are rated. Perhaps foremost, workers feel that the emphasis upon report writing is over-rated. They believe that style is more esteemed by management than is substance. The value of reports is itself questioned by many workers who see them as 'artificial'. While management is seen as primarily rating workers on their 'theoretical' abilities, workers tend to place more weight on the practical on-the-floor performance of their co-workers. More general qualities of character are also rated highly by workers, as reflected in the characteristics listed by them as necessary for a 'good child care worker'. While some workers admit the need for training in the human sciences, particularly child development and group dynamics, many workers describe a good child care worker in terms of flexibility, self-confidence, assertiveness, compassion, understanding, naturalness, calmness, instinctiveness, empathy, consistency, and/or a sense of humour. In short, workers perceive their major attributes as characterological, largely unteachable, and unmeasurable by objective standards. Workers do not perceive the EPAS as either a positive or an accurate document but rather as a formal method for justifying salary increments. The EPAS system is seen as a game at which they cannot win and at which they may lose. The best they can hope for is a tie.

In this regard, it is interesting to note the role of team supervisors in this 'game'. In doing the evaluations, supervisors probably know



their worker's capabilities better than anyone else. They also know a good team is a 'harmonious team'. There is an incentive for supervisors to make sure that their team members are happy. This suggests some pressure to avoid a 'poor' evaluation for any individual worker. At the same time, a very good evaluation for an individual worker might cause dissension among the remaining workers. The supervisor must also justify a very good rating to internal management. It must be noted that a worker at the Centre, while being a member of a team, has limited opportunities to display 'exceptional' performance. For these reasons, EPAS ratings are regularly of the same grade with a concomitantly equal incremental raise for each worker.

#### Summary

In part, the conflicts which workers have with management can be traced to two different perspectives concerning the meaning of child care to the worker's life. While management believes that the role of child care workers is an end in itself, for which they are also paid, workers, in the main, see child care as only a means to an end. Management tries to demand 'the most' out of workers. Workers, on the other hand, see such demands as tending to be excessive. This 'excess' demanded by management may involve either direct outputs from the worker, restrictions on his work benefits, or intrusions into his personal life. Workers in turn, attempt to maximize their benefits while limiting their output to 1) the functional requirements of the job; and 2) that extra portion which, as individuals, they freely choose to give. Because of the differentials of power between them and management, and the lack of perceived mechanisms by which to redress their grievances, workers have made various informal adjustments to the job.

## CHAPTER SEVEN

### WORKERS AND 'OUTSIDERS'

This chapter will describe the relationship which child care workers have with persons who are regular visitors to the Centre and with whom workers have a sense of 'knowing'. I have termed these visitors 'outsiders' because of both their physical relationship to the Centre and their degree of closeness to the workers therein.

#### The 'Face' of the Centre

Institutions, like people, have a face which is projected to the outside world. The face of the Centre is protected by the rules, procedures, and policies created and enforced by the Department of Social Services and the management of the facility. Child care workers assist in maintaining the identity of the Centre in several ways.

For example, in order to be employed by the government, workers are compelled to sign Oaths of Confidentiality. While this Oath protects the confidentiality of information concerning children held within the institution, it also restricts public knowledge of the inner workings of the Centre. Another way in which the Centre's 'frontstage' identity (Goffman, 1959) is maintained is through management's screening of internally-produced documents. This particularly occurs when the document is meant for, or may acquire, external circulation. Thus, workers quickly learn to compose assessments in a way which will convey the Centre's 'professional' image to the outside world. Even privately-written letters of reference for former employees are forbidden. Workers have been told by management that reference letters must come from the Centre. While protecting the Centre from association with statements

with which management may not agree, this action also serves to maintain a unified presentation of the Centre's appearance.\*

While some outsiders know of the Centre from a distance, others enter directly into the institution. Of these, the majority may be classified as parents or relatives of the children; and professionals.

Worker contact with parents (or relatives) is not extensive. Unless the child is held at the Centre for a long period of time, and a lot of visits occur, the impression which workers form of parents is primarily derived from written records, the comments of social workers, and the child. Perhaps for this reason, workers do not seem to have a mental image of parents 'as a group'. Instead, if they remember parents at all, workers do so in terms of unique individuals.

Professionals, on the other hand, are a group with whom workers have extensive and regular contact. Moreover, this contact is often continual with certain professionals. Of the professionals with whom workers interact, the primary of these are social workers and psychologists.

#### Social Workers: The Near-Outsiders

Of all the outsiders who interact with the Centre, the most numerous and regular are social workers. Despite being told by management that social workers have greater authority, child care workers believe that they and the social workers are 'on the same level'. For these reasons, I have termed social workers 'the near-outsiders'.

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\*The belief of some workers, expressed in Chapter Six, that management intentionally acquires difficult children, if true, would also suggest a way in which a particular image of the Centre is cultivated.

Every child in the Centre has a designated social worker. The social worker's task is to direct the assessment process and to coordinate the placement of the child back into the community upon release. Shortly after entering the Centre, the child is also assigned to a child care worker who is his 'case worker'. Her task is to assess the child's emotional, psychological, and physical state, and to make recommendations for current and future planning. Even when a child is being only temporarily detained at the Centre, a minimal assessment is completed. The task of assessment often requires referrals to other professionals, such as doctors or psychologists.

Within this context, the relationship of child care workers with social workers can be described, in the main, as one of 'acquaintanceship'. Acquaintanceship requires no more than each actor taking notice of the other's existence (Simmel, 1964:320). Child care workers and social workers do not often possess a deep personal knowledge of each other. On the other hand, acquaintance may be said to be preliminary to deeper knowledge. Moreover, there are degrees of each. This difference may be noted in the comparison which child care workers make between in-town or out-of-town social workers. 'In-town' refers to social workers from the Fort McMurray District Office. 'Out-of-town' workers are those from anywhere else. One child care worker, in describing this difference, stated, 'The social workers in town have a face. The others are just a voice on an intercom'. Functionally, being able to deal personally with a social worker makes it easier for the child care worker to describe the child's behaviour, or to obtain additional information about, or for, the child. The sense of knowing the social worker appears to increase the child care worker's comfort with, and

confidence in, him. Finally, increased personal knowledge also appears to result in the child care worker more readily deferring decision-making authority to the social worker.

In any case, child care workers may still disagree with social workers as to the best plan for dealing with a child's problem. Most child care workers see disagreements as arising from the different perspectives from which each looks at the child.\* While social workers have a general view of the child's life as it is lived in the community, child care workers deal with a compressed segment of the child's life. In comparing these alternative perspectives, child care workers tend to believe that their interactions with a child afford them more valuable information than that possessed by social workers. A current worker stated that, 'We've probably spent more time with the kid and it's more relevant time because it's more recent'. Similarly, a former worker at the Centre related that, 'Social workers have a different perspective, maybe because they don't spend as much time with the kids as we do, and they just read reports and get a quick update on what's happening'.

While viewed as generally knowledgeable, social workers are often perceived by child care workers as having limited knowledge about particular children. On occasion, this belief is also tinged with scepticism as to the social worker's motives in sending children to the

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\*A less obvious reason for this difference in perspective may lie in the social and personal characteristics of the two occupations. For example, social workers are more likely to respect formal education, while child care workers tend to place a greater emphasis upon knowledge gained in 'the school of hard knocks'. A number of child care workers have had difficult childhoods. Many place a great deal of pride in being, or appearing to be, 'street wise'. Perhaps because its acquisition is so tenuous, child care workers also appear to be less aspiring of a 'professional' title than are social workers.

Centre. Some child care workers believe that social workers place children in the institution either as punishment or as a means of effectively placing them on a 'back-burner' while getting on with another case. In many cases, workers believe that social workers already have 'set plans' for the child when he enters the Centre and that the assessment produced by the child care worker is meaningless. Child care workers believe that their assessments are often ignored or treated 'lightly'.

Curiously, however, it must be considered that child care workers often do not see their own reports as being overly valuable or accurate. They state that their assessments are often 'artificial' and limited in their applicability. Workers admit that their observations are restricted and that many children 'honeymoon' during their period at the Centre. Noting this apparent discrepancy, one is forced to ask why child care workers resent social workers disregarding their recommendations. The answer does not seem to lie in individual workers holding their own reports in high esteem while disparaging those of their fellow staff.

Rather, the answer appears to lie in the meaning of the case conference where the recommendations are formally stated and decisions made. Case conferences bring together the internal assessment of the child care worker and the external knowledge of the social worker. The child care worker's supervisor is usually present at the meeting. The views of other professionals may also be heard at this time. Parents are sometimes present, but more often a separate meeting is held with them. The child is brought into the case conference. However, this usually occurs only at the end and serves the purpose of telling him of the decisions which have been made. In the main, therefore, the major participants in the case conference are the social worker and the child

care worker. It is also the primary arena in which they formally interact and where their roles intertwine.

Within this context, the case conference may have positive and/or negative meanings for child care workers. In a positive sense, the case conference may allow the worker to express himself as an individual. As discussed in previous chapters, such opportunities in child care are limited. Within the case conference, however, a worker is able to display his critical faculties or personality distinct from other members of his team. Secondly, although child care workers have been told by management that the social worker 'has the final say' in making plans for a child, the conference may allow him to enforce a basic equality which he believes should exist. For a time, his analysis of a child's situation may be the privileged centre of discussion by officially designated 'superiors'.

On the other hand, the case conference also has negative potential. Since his report is the focal point of the meeting, and in some sense 'represents' him, the worker may suffer the stress of having his performance criticized. Alternatively, his role may be reduced to that of a mere functionary. The information which he provides may be accepted, but the actual decision-making left to others. Thus, a former worker relates that:

We'd hand in our report and say a few lines, and that was it. The rest was between the other upper-status people. It seemed like the supervisor and the social worker would do most of the talking and come up with an agreement. We never really got a say in it.

While workers may dislike these occurrences, the assessment process may be even more negative when their suggestions are ignored.

When the worker's assessment is criticized or his role in the process is reduced, he is nonetheless recognized. However, when a social worker completely ignores the assessment recommendations, he eliminates the child care worker's purpose and primary means of self-validation. While an assessment may, on one level, be artificial and restricted, it is still an expression of a truth about the child and the worker who sees him. Moreover, even while acknowledging his limitations, the child care worker believes that his knowledge of the child often exceeds that of the social worker.\*

Thus, while the case conference may be a positive experience, offering the worker an opportunity to express his knowledge, individuality, and a high status, it may also lead him to subjectively experience his 'second-class' position within the bureaucratic hierarchy. This may result in the worker suffering increased feelings of frustration and anger.

When faced with disagreeing on a treatment recommendation, a child care worker may choose to alter her report to fit that of the social worker. This happens rarely, and reluctantly, however. In most cases, a worker will not alter her assessment or recommendations. Indeed, management have told workers that the Centre's opposition to the plan of a social worker should be clearly 'on record'. (In this regard, a former worker relates that, 'Once, when there was a disagreement and the social worker went with his own plan and it failed, the Centre was quite pleased with itself'.)

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\*Strauss (1975:212) notes a similar belief held by psychiatric nurses that they know the patients better than the psychiatrists know them.



On the other hand, the child care worker may actively attempt to change the social worker's mind about the decision. The child care worker may employ one of several methods to accomplish this change. For example, if the child is in favour of his plan, the child care worker may encourage him to assert his preference to the social worker. Alternatively, the child care worker may research the implementation of the plan, including contacting the schools, group homes, or other resources necessary to it. By presenting a ready-made scheme the worker hopes that the social worker will more readily accept it. Finally, the child care worker may also attempt to persuade someone of an equal or higher status to his cause. In many cases, this means that he attempts to engage the support of another outsider, a psychologist.

#### Psychologists: The Far-Outsiders

The interactions of psychologists with the Centre are less frequent and more formalized than those of social workers. While child care workers see themselves as vying with social workers for an equal status, no such rivalry exists with psychologists. For these reasons, I have termed psychologists the 'far-outsiders'.

A psychologist arrives on specific appointment days to see specific children for specific reasons. The interactions which most workers have with the psychologist on these occasions are formally structured and time limited. Thus, workers do not see psychologists enough to have more than a sense of acquaintance with them. Neither do they understand the role of the psychologist well enough to evaluate his performance. While workers often do not understand the substance of the psychologists performance, they may nonetheless be entranced by the apparent 'magic' of his skills. Workers also recognize that psychologists, as part of

the Mental Health Division of Social Services, have a higher status than social workers.

These factors tend to legitimate, in the eyes of child care workers, a higher status for psychologists than for themselves. While they see themselves and social workers as possessing 'common sense' knowledge, child care workers view psychologists as privy to more profound, scientific insights. This belief is suggested by the remark of a former worker who stated, 'Child care workers see more than a psychologist, but he understands what they see'.

Although workers concede a higher status to psychologists, they often simultaneously express a disrespect which is rarely evidenced towards social workers. This disrespect appears to result from the same lack of understanding of the psychologist's role previously mentioned. The psychologist's 'magic act' is just as likely to be viewed by child care workers as mere 'sleight of hand'. His elaborate analysis of a child's problem may, alternatively, be heard by workers as little more than empty speech. This is related to workers frequently-voiced complaint that psychologists are 'too theoretical'. As mentioned previously in this thesis, child care workers tend to be concrete and practical in their outlook. They often see the treatment suggestions offered by psychologists as unworkable. Moreover, workers occasionally feel that they are asked to test psychologists' theories, a situation which workers believe places them in jeopardy. After a meeting in which a worker disputed the treatment method suggested by the psychologist, the worker remarked, 'He [the psychologist] doesn't have to take any risks on the floor. I said to him that he has the power and the authority. We have none'.

Many of the problems which workers have with either social workers or psychologists are resolved informally 'over coffee'. However, some workers find these informal conversations to be a further source of difficulty in their interactions with psychologists. This was expressed by a former worker who stated:

They'd say things in discussion but then wouldn't put it down in writing. For example, 'This kid is a psychopath, but I'm not going to write it into a report'. Or they might say, 'This kid is really dangerous. I think he could try to kill himself in the next thirty days', but on paper it would come out as, 'Shows some tendencies towards depression, may need close supervision for the next couple of months'.

In the final analysis, the manner in which child care workers both perceive and interact with psychologists reflects a great deal of ambivalence. On the one hand, workers may consider the psychologist to be somewhat similar to a high priest. His status, hence his power, is real. He can perform the 'ritual' of the Jesness Inventory\*. He can distill the essence of a child's personality, thus rescuing order from apparent chaos. Alternatively, the psychologist can prescribe the legal incantation that a child is 'a danger to himself or others', and force the child to be held in protective custody.

At the same time, the worker is uncertain if the basis for the psychologist's power is legitimate or false. Faced with the problem of dealing with a powerful but largely unknown role, child care workers learn to structure their interactions with psychologists within three conditions of involvement.

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\*A test which provides a personality profile.

The first condition is 'routine'. A psychological report is a standard part of nearly every assessment. One ex-worker stated the purpose of the psychologist's report in the following way: 'It's part of the paper push. It's required. The government likes a health report, educational report, psychological report, a social assessment report, and it looks real good'.

The second condition under which workers structure their interactions with psychologists may be termed 'evidentiary'. As mentioned previously, workers will try to get psychologists on their side in a dispute with social workers. A psychologist's statement is also required to obtain a Compulsory Care Certificate with which to extend a child's detention in the Centre. The psychologist is valued, therefore, when he verifies or supports what the child care worker already knows. One former worker stated, 'They're useful when they agree with you'.

The third condition under which child care workers interact with psychologists is that of 'uncertainty'. When a child represents a particularly difficult case which the workers, and their superiors, are unable to 'get a handle on', a psychologist may be brought in to do an intensive evaluation. In this regard, the psychologist's ability to lend apparent understanding and, hence, control over an area of uncertainty suggests once more that workers see his role as somewhat similar to a high priest.

### Summary

The relationship which most child care workers carry on with outsiders is amiable. Assessments are written, decisions are made, the players in each scene interact with a fair degree of goodwill. In some cases, relationships of a closer nature are formed. This chapter has

attempted to describe, however, the perspective of child care workers towards these interactions. Moreover, it has described some ways in which child care workers, an occupational group with less formal power, attempt to adapt and alter the basic power arrangements with other professional occupations.

## CHAPTER EIGHT

### CONCLUSIONS

#### Review of Theoretical Rationale

This study was conducted in order to examine a little studied area of occupational life: child care work. Traditional literature in the field (for example, Mayer, 1958; Beker et al., 1972; Klein, 1975; and Adler, 1976) has tended to describe the occupation from a theoretical or ideal perspective. Moreover, this literature has often focused on the scientific management of workers rather than understanding the job from their perspective. Somewhat better in this regard are Berry (1975) and Bartollas et al. (1976). Studies of corrections officers (Bartollas et al., 1978; Ellis, 1979; and Poole et al., 1981) have examined an occupation with possible points of congruence with child care work. Nonetheless, no systematic study of child care work from the perspective of the workers had been previously conducted. This study was made in an effort to fill this gap.

#### Review of Chapters

Chapter One provided a brief history of the development of children's institutions and child care work in North America during the 19th century. This was followed by an equally brief synopsis of the development of institutional child care work in Alberta during this century. The emergence of the occupation of child care worker was shown to result from the recognition of certain types of children-in-need, i.e., those defined as 'mildly disturbed' or 'socially maladjusted'. The emergence of child care from a primarily custodial background and its concomitant conflict with other established professions in the child-caring

field was explicated. Finally, problems currently facing child care workers in Alberta were examined.

Chapter Two dealt with five dominant themes which structure the role of the child care worker: treatment, teamwork, generalism, relationship, and professionalism. Each theme was shown to make ambiguous demands upon workers.

Chapter Three presented a brief outline of the City of Fort McMurray and the Youth Assessment Centre where the study was conducted. The theoretical, methodological, and ethical considerations of the study were discussed.

Chapter Four examined the relationships and interactions of child care workers with each other. The importance of information to a sense of 'team' was discussed. Three types of information were described: peripheral, professional, and personal. The latter was shown to be particularly important in creating a sense of 'closeness' among workers. Several other factors involved in creating closeness were examined. The importance of off-hours interactions between workers in enhancing job functions was detailed. The bases and limitations of conflict between teams were also examined. Finally, the limits of the team were discussed, particularly the attempts of workers to be 'good team players' while remaining individuals.

Chapter Five applied Simmel's (1964) concept of 'form' to an examination of children-in-need. The manner in which children's behaviours are interpreted by staff was discussed and can be seen as congruent with Rosehan's (1976) study of psychiatric wards. Workers preferences of children were also examined. Mennerick's (1974) five dimensions by which other types of service workers rate clients were

found applicable in the case of child care workers. The potential consequences of worker preferences were discussed and shown to be twofold: 1) That time spent by workers with 'good clients' may be quantitatively and qualitatively greater than that spent with 'bad clients'; and 2) There may be greater pressure exerted by workers upon social workers and management to move bad clients to other facilities. Chapter Five also discussed the types of controls within the Centre which structure interactions between child care workers and children. The possibility of a relationship between physical restraints of children and worker fatigue was examined. The rules of language interactions between workers and children were also explicated. Finally, the development of, and limitations on, close relationships between workers and children were examined.

Chapter Six discussed the interactions and relationships of child care workers with management. The structural conflicts between the two groups were examined. A description was given of the methods used by workers to protect themselves and otherwise mitigate potentially unpleasant work situations. Workers' concerns for safety and security, and performance evaluations were also considered.

Finally, Chapter Seven discussed workers' perceptions of their interactions with 'outsiders'. In particular, the potential for conflict with social workers and psychologists was examined. While child care workers were shown to have a sense of rivalry with social workers, their feelings towards psychologists were shown to be somewhat ambivalent. The importance of the assessment process and case conferences to the workers' sense of self was examined in detail.



### Significance of the Study

This study has been shown to have both theoretical and practical significance. It has examined child care from the point of view of the workers. This perspective has been largely ignored by previous literature in the field. In particular, this study has examined the process of interactions and relationship-building among groups of individuals whose structural situations engender the possibility of conflict. If there is a central theme to this study it is the consideration of 'distance' in relationships. In every chapter, it has been shown that workers must arrange their interactions in such a way as to maintain a 'proper distance'; that this proper distance must be regularly re-evaluated; and that workers must often utilize methods of obtaining from a relationship things which the others are not structurally predisposed to give, while simultaneously holding distance constant.

For students of occupations, this study provides additional information concerning a low-status service occupation. It has further elucidated the methods by which a relatively powerless occupational group may attempt to adjust the conditions of the job in order to 'make the best of it'.

Readers familiar with the literature concerning industrial labour will also note structural similarities between child care work and factory work. For example, the informal sanctions by which child care workers keep each other from over-performing are reminiscent of factory workers' efforts to prevent ratebusting. The 'assembly-line' analogy which comes so easily to the minds of many workers when they describe their job is particularly synonymous with the factory. Finally, even the child care workers' phrase 'on the floor' suggests a resemblance to factory work.

The study tends to lend some support to Herzberg's suggestion that the factors causing worker satisfactions and dissatisfactions are independent of each other (Perrow, 1979:105). For example, it is clear that salary, holidays, a lack of a career ladder, and relative powerlessness are sources of dissatisfaction for many workers. On the other hand, worker satisfaction appears to be strongly connected to their relationships with others on the job. Above all, workers want to be part of their environment, not alienated from it. They want to live on the job, not after it, as is so tragically adumbrated by the phrase, 'Thank God It's Friday'. It is clear that, when the Centre opened in 1979, many of the staff felt a sense of being a real part of its environment, but this has lessened since. Being a part of the environment means that a person is able to alter it by their presence. This does not seem to be the sense held by many workers currently. For many, routine and powerlessness place serious limitations on the degree of 'self' invested in the job. Moreover, these conditions are not addressed by theoreticians and administrators in the field who press for increased credentialling and education in isolation from other considerations. Indeed, the hope that increased education and 'professionalism' will lead to reduced turnover (Berube, 1984), if not incremented simultaneously with real power and meaningful benefits, may have opposite results.

This study has also provided additional information concerning 'burnout'. The conditions of depersonalization and withdrawal suggested as occurring among some workers at the Centre have been previously identified by Maslach (1982:1) as aspects of burnout. The evidence of this study suggests that, while some workers may recognize the initial symptoms of their condition and decide to 'take a break' from the

occupation, others may stay until they are too burned out to leave.

This coincides with a comment made by Berry:

The workers' length of service is not only of great importance to long-stay children but to the workers themselves: if they survive the first few months or years, then time passes until it may become difficult for them to visualize returning to the outside world. At one extreme care-givers may be gradually drained by overwork; at the opposite pole they may settle into a rut which is not easily vacated--paradoxically, residential life for the staff is tougher than many outsiders could endure and yet it also protects people from some of the 'normal' pressures of the outside world (1975:61-2).

The Centre in Fort McMurray is relatively new, and yet the preliminary stages of some aspects of burnout among some workers have been identified. If this finding is extrapolated to other, older institutions, it may be suggested that a major percentage of their long-term staff may be similarly work-disabled. In some sense, it may be that institutions with low turnover rates of staff are not only housing patients or inmates, but also workers. If this is correct, the implications for care and treatment of the former may be substantial.

In this regard, students of methods of treatment will also find value in the preferences of workers towards certain types of children. The effect of these preferences upon treatment have not been fully examined and may present a basis for future study. For example, what are the exact differences, qualitatively and quantitatively, between the types of care given 'bad' or 'good' child-clients?

This study raises further questions in regards to the role of relationships in treatment. The literature in child care states that a worker's relationship with a child is strategic in bringing about changes in the latter's behaviour and attitude. Some workers at the Centre do

form close and meaningful relationships with children during the period of their time in the facility. However, these often end when the child leaves the institution. This occurs, in part, because of the Centre's procedural restrictions on continued contact by the worker. The major reason for the worker-child relationship coming to an end, however, appears to be that the former's job functions, power, and purpose cease beyond the parameters of the Centre. This situation raises a serious question: If close and meaningful relationships between workers and children are considered desirable, and if such relationships do form at the Centre, are not such sudden 'breaks' potentially damaging to both parties involved? When one considers that children who come into care often have past histories of unstable and transient relationships with others, does this break not reinforce an unhealthy pattern of interaction? For the affected worker, such a break no doubt decreases job satisfaction, and may lead to subsequent reluctance to become emotionally involved with children.

One solution to this problem would appear to be expansion of the workers' role into the community, thus enhancing a continuity of environments and relationships between institutionalized and non-institutionalized care. This would require a change in workers' job descriptions, of course, with the likelihood of increases in benefits as well. It is also apparent that such a change in functions would bring workers into direct conflict with other helping-professionals who might perceive child care workers as trespassing on their 'turf'. Such conflicts are neither unusual nor necessarily dysfunctional, however, and should not be viewed as an obstacle to change.

It was suggested as part of the theoretical rationale for this study that similarities and differences might exist between the occupations of child care worker and corrections officer. This proved to be correct. The study indicates some congruence with Ellis' (1979) suggestion that the prison guard-inmate relationship may be fruitfully examined from the point of view of class structure. He has termed the former the 'crime control proletariat' and the latter the 'crime proletariat' (Ellis, 1979:44). Similarly, this study has suggested that child care workers at the Centre possess some of the characterological symbols of the working or lower class. From my knowledge of the child-inmates housed in the facility, their class situation would be similarly situated.

There also appear to be significant differences between child care workers and corrections officers, however. Poole et al. (1981) found a high degree of alienation among guards. They also suggest that the role of prison guard is highly individualized and that a guard 'cannot depend on the help or cooperation of colleagues' (1981:258). Although child care workers reveal some aspects of a sense of alienation, particularly powerlessness, the overall degree of this appears minimal. Furthermore, this study has suggested that the concept of 'team' is fairly high among child care workers. Bartollas et al. (1978:172) identified a number of informal norms or 'codes' among corrections officers which govern their behaviour. While this study is replete with examples of similar codes used by child care workers, these do not appear to be as obdurate as those existing among prison guards. Since most codes are a means of self-protection, this difference may result from child care workers perceiving less 'threat' in their job than do prison guards. The structural insistence of child care that workers form close relationships with the

children is also opposite that of prisons where the structural demand is for strict separation of guards and inmates.

Finally, Bartollas et al. (1976:198) suggest that work relationships among youth workers often have dysfunctional effects upon job performance. This study suggests otherwise. Close relationships, both on and off the job, with fellow staff have been indicated as leading to an increased sense of knowing the other. For child care workers, as members of a team, this result is important to fulfilling the functions of the job.

#### Limitations of the Study

This study was conducted as exploratory research with the purpose of hypothesis generation, not hypothesis testing. It was conducted upon a limited population--the staff of one children's institution--thereby reducing the generalizability of results to other settings. Furthermore, the community in which the study occurred--For McMurray--may represent an environment where the interactions and relationships between workers and others may have been unique. At the same time, it is hoped that such hypotheses and insights as have been generated may be found to hold in studies conducted by other researchers on other samples.

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Appendix 'A'

LIST OF SELECTED CHILD WELFARE RESIDENTIAL  
RESOURCES FOR THE 1980/81 FISCAL YEAR

Acadia Home	Balzac Group Home
Atonement Home, Our Lady of	Beaverlodge Ranch
Big Valley Boys' Ranch	Bowness Group Home
Calgary Children's Services Centre	Branch-a-Way Farm
Residential	Briar Hill Group Home
Detention	Central Peace Group Home
Chimo Youth Retreat Centre	Cyre Adolescent Boys' Home
Edmonton Children's and Detention	and Receiving Home
Centre	Dalhousie Group Home
Enviros Wilderness School	Forest Heights Group Home
Frontier Lodge	Foster Group Home
Mapleridge Residential Treatment	Glavin Group Home
Centre	Huntington Hills Group Home
Marydale Residential Treatment	Integro Group Home
Centre	Keeganow Group Home
Oakhill Boys' Ranch	Lamoreaux Group Home
Salvation Army Children's Village	McMan Group Home
Salvation Army Park Wood House	Mountview House
Sifton Children's Centre	Red Deer Family Services
Residential	Bureau Group Home
Detention	Richardson's Villa
Stampede Boys' Ranch	St. Aidian's Group Home
Westfield Residential Treatment	Smith Group Home
Centre	Southern Homes Society
William Roper Hull Home	#1
Wood Christian Homes	#2
Woodside Home	Stedel's
Youth Assessment Centre	Thickwood Residence
- Fort McMurray	Whispering Hope
Youth Assessment Centre	Youth Assessment Centre
- Medicine Hat	- Grande Prairie
Youth Assessment Centre	Youth Assessment Centre
- Red Deer	- Lac La Biche
Youth Assessment Centre	
- High Prairie	

(Source: Department of Social Services and Community Health, 1981:57)



Appendix 'B'DEFINITION: CHILD CARE WORKERS

Care for and counsel emotionally disturbed or mentally handicapped children and youths in residential treatment facility, in special school or social intervention program. Supervise daily activities and attend to needs of children and youth under care. Arrange and direct recreational activities. Counsel children and youths to help them deal with personal or behavioural problems. Enforce residential rules and take measures to control unruly behaviour. Assess and report problems and progress of children and youths. Confer with other staff members and refer difficult cases to health care professionals or social workers. Help to mediate between child and parents, if required. Provide individual guidance for youths in social intervention programs within community or assist in supervision of special school classes for emotionally disturbed children, if required. Prepare meals, clean and perform related housekeeping duties, if required.

(Source: Canadian Classification and Dictionary of Occupations, quoted in The Report of the Alberta Health and Social Services Disciplines Committee, 1985:23)

APPENDIX 'C'JOB CLASSIFICATIONS WITHIN THE CENTRECHILD CARE COUNSELLOR IKind and Level of Work

Employees in this class perform residential child care work, in the care, re-education, assessment, therapy and counselling, individually or in groups with children and youth having behavioural or emotional problems.

These employees, under close supervision, are responsible for ensuring that effective and appropriate treatment is obtained through assistance from clinical and program specialists as required, for the children and youth entrusted to their care.

Typical Duties

Become familiar with and correlate through observation, discussion and reading of files, all pertinent information in providing a detailed assessment of the child.

Make all necessary arrangements for smooth operation of individual treatment programs such as appointments, materials, transportation and schedules; and plan group activity such as equipment, schedules, manpower and material.

Participates in or conducts as appropriate, individual or group counselling, working jointly with other clinical professionals.

Assess appropriateness of the treatment plan through personal observation and discussion with clinical or program specialists and recommend changes to the supervisor.

Plan with other staff, individual and group activities of a recreational, educational and therapeutic nature. As appropriate, conduct individual and group program activities independently, i.e. life skills, camping.

Supervise and organize daily living activities and uses them for opportunities for educational and therapeutic interaction.

Observe, assess and record on an on-going basis, group interaction and individual child behaviour, mood and progress.

Prepare periodic written and oral progress reports on child; makes written and oral recommendations to court, Social Worker, concerning the release, extension or change of care and after care plans for the child.

May assist shift supervisor and unit head in making community liaison arrangement for groups or unit utilizing community resources.

Initiate and coordinate conferences concerning children and their care.

Conducts individual and group program activities independently, i.e. life skills, camping. Works jointly with other program specialists, i.e. recreation, remedial reading, in providing program services.

Assist in caring for sick children and domestic chores of the unit; fill in for support staff on weekends, cooking simple meals, assisting in maintenance and cleaning of unit.

Ensure security requirements of unit are met as necessary.

Perform related work as required.

#### Education and Experience

A two-year community college diploma in one of the helping professions is normally the minimum qualification for this class. Some previous experience working with children or youth is desirable.

## CHILD CARE COUNSELLOR II

The Child Care Counsellor II position is filled by line child care staff who have completed the Alberta Child Care Certification Program.

The Child Care Counsellor II maintains the duties of a Child Care Counsellor I, combined with the added responsibilities which are noted in the following list.

It is presently desirable, in Alberta, for a Child Care Counsellor to reach the II level prior to his/her becoming a CCC III.

### Responsibilities

1. In most cases the Child Care Counsellor II will act in place of his/her supervisor in the supervisors absence from a specific shift (or act in absence of III or back-up).
2. It will be the responsibility of the CCC II to ensure that the Activity Programming is pre-planned and posted prior to their set of shifts. This does not necessarily mean that the Child Care Counsellor II needs to do the planning of activities.
3. The CCC II will be responsible for the completion of the Orientation Checklist with any new counsellors assigned to his/her team.
4. The CCC II may be required to assist their co-workers in specific skill areas in which they have demonstrated a particular strength.
5. The CCC II will be considered for Advanced Skills Workshops and Supervisory oriented training sessions, at the discretion of the Director.
6. The CCC II may have the option of joining Task Assigned Management meetings, at the discretion of his/her supervisor.

CHILD CARE COUNSELLOR III

1. Coordinate and monitor all activities of child care counsellors on shift.
2. Provide orientation for new staff members as well as on-the-job training.
3. Responsible for the direct supervision of Child Care Counsellor I's and II's; formal evaluations; recommends promotions; the follow through on individual certification programs.
4. Ensure that security requirements are met.
5. Oversee assessment and remedial care plans and ensure their proper delivery; proofread all reports submitted by CCC I's and CCC II's.
6. Evaluate all aspects of the Centre's operation, including policy and routines, making any recommendations for necessary changes.  
  
Ensure that all routines and Centre policies are carried out.
7. Ensure a two-way communication flow between line staff and administration.
8. Assignment of case managers and co-managers as youths are admitted to the Centre.
9. Coordination of schedule changes and the planning of night shift rotations.
10. Control of overtime worked and the return of such overtime.  
  
Ensure the completion of weekly time sheets and any pay cheque discrepancies.
11. Formal supervision session with individual child care counsellors at least once every three weeks during the school year.
12. The Child Care Counsellor III working the 3-11 shift will be on call for the 11-7 shift in the event of any unusual circumstances.
13. Cooperate closely with other Child Care Counsellor III's and Child Care Counsellor IV's in order to maintain consistency and communication between teams.
14. Responsible for effective chairing of team meetings, conferences and shift changes.
15. Works closely with the teaching staff in order to create an effective link with the Centre's program.

CHILD CARE COUNSELLOR IV - (ASSISTANT DIRECTOR)

1. Is responsible to and receives supervision from the Director.
2. Acts as required to fulfill the duties of the Director in her absence.
3. Responsible for the maintenance and operation of the physical plant.
4. Ensure that vehicles are in good running order and routine maintenance schedules and administration of gas vouchers properly completed.
5. Maintenance and security of key control.
6. Responsible for the compilation of statistics and the completion of statistical and month-end reports.
7. Act as a resource person to child care supervisors to help them fulfill their function.
8. Work to ensure that the shifts and support service are functioning cooperatively. Aids in the prevention and resolution of conflict.
9. Maintain and develop administrative procedures that involve the overall program.
10. Responsible for the time scheduling for all staff, and supervises the completion of time reports for wage and auxiliary staff.
11. Plans the overall camping program.
12. Actively participates on a regular basis with child care staff and youth in the on-going program.
13. Overall supervision of night and wage child care counsellor I's.

SENIOR OFFICER - DIRECTOR

1. Responsible for planning, supervision, coordination and administration for the total Youth Assessment Centre program.
2. Directly supervises the Child Care Counsellor IV.
3. Direct involvement in selection and promotion of all child care counsellor I's, II's and IV. Major responsibility in selection and promotion of all support staff.
4. Works directly with the school board representatives and Youth Assessment Centre teaching staff to ensure viable academic program is provided.
5. Coordinates program with all outside agencies and ensures there is a sound relationship between program and general community.
6. All responsibilities of expenditure officer.
7. Responsible for the development of the program, including the written program manual.
8. Chair full staff meetings. Work to ensure sound relationships between all parts of program.
9. Responsible for arranging staff development programs for all child care counsellors, including the recommending for supervisors and the chief child care worker.
10. Supervises the clerical, kitchen and cleaning staff. Participates in the selection and promotion of these staff and recommends promotion and disciplinary action. Monitors time sheets and investigates any payroll discrepancies.
11. Administers the cooking, cleaning and clerical workload, and is responsible for quality and quantity control. This includes a responsibility for the day-to-day correspondence, ordering and receipt of materials and supplies and record management.
12. Administers and assigning of housing units.
13. Is directly responsible to the area manager, northeast regional office. Receives program supervision from Child Welfare Program supervisor, northeast regional office.

(Fort McMurray Youth Assessment Centre, Job Classifications. Unpublished.)