

**The Long and Short of it**

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# ***Child and Youth Care***

**Jack Phelan**

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The CYC-Net Press

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# *Introduction*

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This book is about doing Child and Youth Care. It tries to explore the complexity and difficulty of doing it well and how often we miss the mark without realizing it. The youth and families we try to support are deserving of our best and the most sensitively designed programs, and we are often guilty of falling short. I have spent almost 50 years doing and thinking about Child and Youth Care practice, and collaborating with some spectacular colleagues. The articles here explore some of my questions and conclusions as well as the wisdom gained from both youth and families who have tried to guide me in the right direction when I clumsily tried to fit round pegs into square holes. I hope that readers will be able to stand on my shoulders and learn from my “not knowing what I didn’t know” stumbling around.

There is some theory described here, some practical approaches suggested, some stop being stupid admonishments and lots of pieces that will pique your curiosity (hopefully).

Enjoy the read and feel free to let me know your thoughts about any part of it at [phelanj@macewan.ca](mailto:phelanj@macewan.ca)

# *Experience Arranger*

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# *An attempt to be articulate about Child and Youth Care work*

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I believe that we suffer from a chaos of disconnected and often discordant ways of describing what we do – both to the rest of the world and among ourselves. At the risk of creating a debate and further discordant discourse, I will propose the following articulation of our profession.

Child and Youth Care work is done at a molecular level, it doesn't occur at arms length or in a sterilized environment. The worker has an intense and often intimate presence which removes any possibility of detachment and distance. Living alongside people and in the same space and time creates a shared connection, in spite of the natural tendency of both people in the helping equation to push away and keep a safe distance. The worker is there by choice, and his behavior is purposeful and responsive to the other person.

The ability to be personally safe and also empathic is really the first major skill set required of a developing Child and Youth Care professional. Training, good supervision and on the job experience will result in accomplishing this major professional step in about 6 months to a year.

Personal safety develops as physical fear subsides and daily conflict doesn't produce a fight or flight reaction, emotional reactivity changes into curiosity and growth by meeting the emotional challenges of the work, and spiritual safety develops as boundaries and behaviors are more clearly owned.

Empathy starts to develop after the worker is safely grounded in who they are. This ability to be in the other's shoes allows the worker to acquire the logic and perspective of another whose viewpoint has been frightening until this point. This is the place where real Child and Youth Care work begins, when you can safely enter the world of the youth or family, approximately one year after you begin to do the job.

Child and Youth Care work has a unifying theme in that all of our various theoretical frameworks share a common strategy. This strategy is based on an underlying belief about how people change, which can be stated quite simply — people change by experiencing themselves in life, living and sensing the world around them and responding to the experiences they have. The people that we work with have little ability to make changes in themselves through being convinced to change by persuasive arguments or therapeutic conversations. Reliving a painful past and recalling past traumas and failures don't create change for the vast majority of the people we serve. Conversations about what needs to happen also fail to produce concrete results.

Child and Youth Care work is a process of experiencing life alongside others and supporting them to use this experience to change. Our work involves arranging experiences that are helpful, or using the experiences that emerge as we go through the day in a strategic way. The everydayness of our efforts can appear too simple to be a really professional task, yet the skill required to manage these experiential lessons is quite complex.

To build hope and a belief in personal competence in another person, which is what we must do if we expect a positive change to occur, requires the worker to support the person to change the story of themselves that has been embedded over a whole lifetime.

There is a natural resistance in everyone to change our story, our internal working model of the world, and mere words are easily absorbed with no significant shift occurring. However, when I experience reality in ways that contradict my story, I get confused and upset, often resulting in me needing to either reaffirm my model or make some changes in it. This process of cognitive dissonance, caused by experience that contradicts my beliefs, can create the energy I need to make change.

Child and Youth work is experiential and communicates to people through sense data rather than dialogue. This felt sense communication can be labeled *analogue* communication and it enters into awareness through experience rather than cognitively, like *dialogue* communication.

There are many theories that use this process, the social pedagogy training in Europe, particularly in Denmark and some parts of Holland use recreational activity and the arts much more strategically to create openness to change. Mark Krueger describes Child and Youth Care work as a type of dance and matching physical rhythm, Henry Maier

prescribes activity to create connection. Relational Child and Youth Care practice as espoused in many Canadian contexts requires an experiential process. Adventure-based approaches used around the world have developed countless exercises to create this experiential communication.

Child and Youth Care work is a process of creating a safe relationship with another so they we can join together in a safe place to allow the experiential message which contradicts the hopeless story to actually be communicated and absorbed. My definition of the worker is that he is an experience arranger whose goal is to build a story of competence and hope in the other person.

# *The Experience Arranger*

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Child and Youth Care practice is not a verbal counselling activity. In fact we already know through recent brain research that most abused and neglected youths have neural brain patterns that block verbal input about trusting others or being too hopeful. We are most effective when we avoid trying to influence youths through their brains, and instead focus on communicating physically, through the heart or emotions. This is one reason why I do not use the label Child Care Counsellor, and prefer to see our professional task as being an experience arranger.

Mark Krueger has described the focus of our work as “creating moments of connection, discovery and empowerment” for youth, and I heartily agree with him. Many Child and Youth Care writers and thinkers of the past decade define the practice as relational and developmental, not behavioural. The life space work that we do is ideally suited to communicating physically, a process that I have called analogue, not dialogue communication. The goal is to create moments where a youth is staying close to you even though his brain is warning him to move away, because his body/heart is feeling safe and comfortable with the closeness.

The process of becoming a capable, strategic experience arranger is not simple. Inexperienced Stage 1 workers cannot be expected to do this. More mature practitioners, the Stage 2 workers who are able to fully focus on the youth and are not self-consciously preoccupied with doubts about safety or personal competence, can become better and better at using the multitude of daily events to create experiences that promote connection, discovery and empowerment.

The needs of the youth we work with are quite simple, the ability to provide the help they need is quite complex. Fritz Redl said this over 60 years ago, describing the mundane medicine which is needed, and the superhuman skill needed to get it out of the doctor's bag and into the youth's body. We can readily describe the experiences we hope to provide to our charges; a message of being cared for unconditionally, a hopeful attitude about the future, a desire to learn and become competent. In sum, Connection, Discovery and Empowerment.

An example may be helpful.

A Child and Youth Care practitioner (Level 2) is observing a youth who is supposed to do the dishes after lunch on a Friday. The youth is getting very agitated because he is going for a home visit in an hour, but he sees the van which will take him leaving the parking space and he believes that he will be left behind. Even though he is told that the van is only going to the gas station and will be back soon, he cannot control his anxiety. The other Child and Youth Care worker is a Level 1 practitioner and he begins to insist that the boy finish doing the dishes before he can leave. Unfortunately, the predictable result of this demand is that the boy will lose control, possibly break several dishes or worse, and probably not get through the afternoon smoothly. Level 1 workers are preoccupied with keeping things safe by insisting on the rules and routines. Instead, the Level 2 worker moves closer to the boy, puts his hand on his shoulder and says that he will finish the dishes and tells the boy to go and get ready. The Level 2 worker knows that the only problem with this interaction is explaining it to his colleague, who will be challenged to see the value here. If we believe that chaos will not result by having this boy abandon his chore so that he can manage his anxiety (a belief which is not so easy for a Level 1 worker), then the experience arranged by the Level 2 practitioner is that the boy will be relieved and empowered by being able to focus on his trip home, and puzzled by the caring gesture of taking over his chore. He may begin to connect more easily with the Level 2 worker, and will certainly have a better start to his home visit.

Once we have established a safe environment there is little need for insisting on behavioural expectations when they are counter-indicated by the situation. In fact, our treatment efforts should build experiences of connection, discovery, and empowerment, not adherence to a predetermined schedule. Level 1 workers are not free to think this way, and are more focussed on their own experience than the youths', which is a developmental journey that cannot be rushed. The Level 2 practitioner, the Treatment Planner and Change Agent, often has the difficult task of keeping the Level 1 worker safe while arranging this type of experience for the youth.

The physical experiences arranged by skilled workers look simple after-the-fact, but the level of thinking is quite complex. In fact, truly skilled practitioners know that they are continuously improving in this complex ability and never reach a final level of skill. The interesting parallel result of this interaction is that it also enhances the connection, discovery and empowerment experience for the practitioner.

# *Useful Child and Youth Care practice is sensible*

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Our work with people is different than working with the general public. The youth and families sent to us have not responded to the usual approaches and motivations that create results in the majority. In fact, many of our youth have successfully resisted even very severe attempts to motivate them to change. Based on life experiences, our youth are suspicious of people who try to be nice to them, and their dominant story about how the world works is full of fear, anger and disappointment.

Youth with this story about the world have a logical, clearly articulated belief system that controls how they evaluate new information. Any person, particularly an adult, who tries to get them to be vulnerable, trusting or honest is dangerous. These youths are in survival mode and they have trained their brains to block arguments that try to convince them to let down their guard. When possible, adults are to be controlled by manipulating their supposed kindness. Logic dictates that the only reason adults are being nice is because they are being paid to do this, or else they are gaining some other hidden reward.

This is not a negative view of these youth, but an accurate analysis of the situation they are in. They have much more compelling proof that life is cruel than we have that it isn't. Unfortunately, many of us still try to create convincing arguments, using words and logic based on our experience, that life is good. Most youths see us as not being in the same world as them, and therefore quite irrelevant. Our sermons, exhortations and other good advice falls on deaf ears. Our real task is to create physical experiences that challenge and expand the logic of survival already hard wired into their brains. I have described this Child and Youth Care task as being "experience arrangers" where we communicate physically and sensitively to override this filter which prevents our intentioned message from being accepted. We must stimulate the person through sense data, not words, to deliver the information we believe to be important.

So our goal is to create physical sensations, not verbal appeals. To communicate messages of hope, belief in the need for connection, trustworthiness, and social awareness, we need to use sensible techniques and approaches. This appeal to physical sensation is actually quite doable in Child and Youth Care work, since we share life space interactions and physical connection with our charges.

Some preliminary examples to illustrate – creating experiential moments with a suspicious and fearful youth like catching a fish, scoring a goal, enjoying a sunset, laughing out loud together, building a project, fixing a broken toy, or enjoying the feeling of physical effort, create a cognitive dissonance where things do not fit into the logic of survival. When these and other sensible moments are shared with a Child and Youth Care practitioner and skillfully highlighted to underscore the sensations created, the story about how the world works gets expanded.

## *Final Thoughts*

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# *What I think I know now*

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*Wish I didn't know now what I didn't know then*

– Bob Seegar

*We don't see things as they are, we see things as we are*

– Anais Nin

*You can't roller skate in a buffalo herd*

– Roy Ferguson, quoting Roger Miller

**M**y Child and Youth Care journey over many years is probably not unlike many others. Basically I need to ask forgiveness from all the youth, families and students that had to endure my clumsy efforts at helping them for the first ten years of my career.

Even though I did a lot of good work way back then, I would most likely do it differently today.

So what is different about how things seem to me, how am I different? Life space is an idea that has grown bigger and more complex. I am firmly convinced that you cannot do Child and Youth Care life space work in an office. You can try, but even a skilled Child and Youth Care practitioner will struggle mightily to create this. Talking is highly overrated, since most words create distance rather than connection with abused and neglected people, as the neurology experts are proving with their brain research. Empathy is under appreciated, poorly demonstrated and subjectively framed as “how would I feel if that happened to me” for too many of us. Relational work requires an inner locus of control, where you can forgive quickly and easily, and not take unpleasant events personally. Unfortunately, the majority of adults are both unable and unwilling to do this. Logic is much more idiosyncratic and personal than the Logical-Positivists would have us believe. Most of us think that our analysis of every situation is logical, but it is only logical to us, really.

So where does this cynical attitude about the helping process lead? Humility is one place. I have come to appreciate my limited ability to share meaning with others and to feel less obligated to share my

“truths”. I try more consciously to respect everyone else’s expertise about what they need, knowing that it is probably different from my guess about what they need. My beliefs about how the world works, my logic, is quite idiosyncratic and not really objective or true. I sometimes suspect that the post-modernists have won me over.

Doing effective Child and Youth Care practice involves living with other people in a useful way, not talking to them about what they need. Intruding into peoples’ lives is a messy business, especially when you are not particularly invited, and to do this well is a skill refined over many years of experience. I use the term *experience arranger* to describe the work, embedded in life space and relational practice. Sharing life experiences involves several steps. Both people must be safe enough that cooperative viewing/sensing is possible, neither person feels responsible for the other’s perceptions, and both are willing to be there together. The Child and Youth Care practitioner must not tell the other person what to believe or learn, but merely describe her experience and listen well. Preaching, advising, and arguing about right or wrong are not helpful. Comparing perceptions and beliefs will be very helpful, with no judgments, merely rationales. As I allow the experience and my perceptions to be shared with the other person, they have the opportunity to see more options than they might on their own. Experience is the key to new beliefs, the physical reality and my interpretation of my experiential self is more powerful than words. Child and Youth Care practice is a process of influencing the heart, not the mind, of the other. When we support people to act based on the heart connection we have created, rather than expecting their brain to allow our verbal messages to override the neural blocks developed by years of abuse and neglect, we are using the life space effectively. Child and Youth Care practice involves arranging experiences that challenge the ineffective beliefs that keep people stuck in threatening and depressing world views. Cognitive dissonance is the goal, not therapeutic, insightful “Ahas”.

The goal is to see a poorly attached youth approach ever closer, and while his brain is giving out danger signals, his heart is getting warmed by the closeness. The dissonance will require his brain to create new neural pathways, slowly, to fit this reality. The ability to create safe connections and then to strategically highlight experiences in the life space is a complex professional task. Mature Child and Youth Care practitioners can do this well, but this is built over several years of practice, with good supervision and sound theoretical models. The

“natural” Child and Youth Care worker will look effective for a year or so, but will not reach this level of practice without training and supervision.

Empathy is an obvious, yet underappreciated, ingredient. I now understand developmental information much more completely than I used to. Rather than comparing abused and neglected youth and family members to some norm, I am getting better at bridging the gap of thinking and feeling realities which separate us. The most useful result of improving my empathy ability is that my capacity to see the other person’s strengths has blossomed. We are all good at seeing the strengths of others which please us. Real empathy allows us to appreciate the strengths inherent in annoying behavior. Developmental theory exposes the counter-intuitive beliefs and realities which have eluded the common sense approaches used which repeatedly fail to help. Thinking like an abused teen who has been shuffled from pillar to post for years by helpers is much harder than you might believe. An empathic Child and Youth Care practitioner will not engage in some of the appalling practices common to many settings.

A quick list of a few obvious examples; calling people clients, using “logical” consequences, writing behaviorally obvious treatment plans, pathologizing low ability to trust adults, punishing morally correct self-protection by calling it lying, cultural and socio-economic insensitivity and creating compliance instead of strength.

The needs of abused and neglected youth and families are relatively simple, the reality is that most youth and parents need to increase their capacity for attachment and autonomy. The willingness to push yourself to try to improve your situation requires hope, skill, and confidence. All of this is embedded in autonomy, with a further step of self-control. The capacity to trust the world to be safe and the belief that others do care for you, are attachment issues. Henry Maier, over 35 years ago, declared that when you increase attachment, you increase autonomy, an interesting win-win (Maier, p.127). Unfortunately, the ability to deliver the supports necessary to increase these capacities, is a complex task. Child and Youth Care work is paradoxical in that the medicine is readily available, but the delivery system is quite byzantine. The people we want to help are needing our support, but they are not able to willingly accept our help. Much of this resistance is our own fault. Child and Youth Care practice is described eloquently in journals like this one, but the existing programs are brutish and ineffective.

Attachment is an ability, which we all possess. Psychiatry has defined it as a possible mental illness, reactive attachment disorder, which is very unfortunate and for our purposes, quite foolish. A person who grows up in a loving family and becomes suspicious of others and pessimistic about caring, may indeed be needing therapy. However, a person who has experienced serious abuse and neglect as a child, then disruption and dislocation perhaps many times, is reasonable and logical to believe that you should not trust others. To label them as mentally ill is pathetic and useless. Increasing a person's attachment ability is both possible and helpful. Speaking to the heart is highly indicated in this process, since their brain is hard-wired to reject words, no matter how therapeutically intended. When we meet a youth who believes that no one could care for her, and that the only time that someone is nice to her is when they want something, we have to see a complex task ahead. The inexperienced worker who rushes in with hugs and smiles will be met with aggression and rejection. Even well planned and sensitive caring will often result in anger or avoidance. The youth will let us know that the only reason we are with her is because we are getting paid, because caring always involves getting something back. We make the mistake of expecting a "thank you" for being nice, which is good manners, but enforces the belief that we are only caring when we get paid (the thank you). Child and Youth Care practice involves creating dozens of caring interactions every day for this girl, with the adult quickly disappearing without waiting for a response, so that the girl is left wondering why you did that, and the cognitive dissonance will gradually become a new belief. This new belief, that some people do care, can expand naturally because now there is a new possibility to consider.

Autonomy is personal power and control, which is hard to develop if your experience has been a series of unwanted disruptions, from abuse and neglect to faceless adults deciding about your life. The logical belief that you are not in control gradually seeps into all of your actions, so that eventually you believe that everything that occurs is random. The idea that you can plan ahead and build a better future is beyond your thinking capacity. The most probable future is more of the same. When we overly control youth who lack autonomy, it seems like a logical idea, because they do not make good choices. In fact, the most successful and rewarded youth in our care are the ones who are most compliant (well behaved?), which means they have little autonomy and have no need to acquire more. A skilled Child and Youth Care

practitioner knows that the only justification for external control is safety, which does not create learning or autonomy, but just safety itself. The mature practitioner also knows that unskilled workers require much more safety than the youth need.

The ability to develop self-control and personal power in our youth involves letting go, sharing control with the youth, which can be stressful. I have gradually realized that when I let youth decide for themselves, they rarely choose what I would have wanted them to do. It has taken me a long time to see the beauty in this, instead of being distressed. My goal is to increase autonomy, not have them be similar to me. I have yet to know a youth who chose to write a resume or do more homework as a first attempt to handle life.

Attachment increases autonomy and vice versa. What an interesting idea! Those two skills are the key, and they complement each other. Why do we have such problems supporting these issues? I have some thoughts that are percolating lately and make sense to me.

We recruit people to be Child and Youth Care students and employees who want to help others. They generally have fairly high attachment ability, securely attached people. They may be the worst people to put into a room with the poorly attached youth and families we serve. The comfort with closeness and openness to trusting others which new recruits often display gets them into hot water with our youth. When attempts to be nice or friendly are rejected, often hostilely, the securely attached person over-estimates the capability of the youth to accept closeness and sees the youth as ungrateful. Mature practitioners reflect on their scariness to the youth and try to be less intrusive. When they get a hostile reaction, they do not blame the youth. So they may back away, use less direct approaches, or find other ways to contain the youth's anxiety while gently challenging him to accept the connection. Supporting a youth to accept the belief that they are worthy of care from others is a slow, difficult task.

Mature Child and Youth Care practitioners use relationships, not external control, to create safe experiences of having power for youth. They also see failed experiences of being powerful as generally more useful learning moments than the successes. The shared experience creates opportunities for the worker to support autonomy by sharing his autonomy in the moment.

My description of the mature practitioner may seem too ideal, yet there is nothing magical about what attitude and skill set is needed. Yet many programs do not seem to be operating this way. Lately I have

been reading some work by Heather Modlin, a Newfoundland colleague, who has some useful ideas (Modlin, 2013). The skills and attitudes expected of a mature Child and Youth Care practitioner requires the person to have a clear inner locus of control and an ability to be self-reflective. Modlin references the work of Robert Kegan to describe adult thinking stages. He describes the differences between a Socialized Thinker, the majority of adults think this way, and a Self-Authoring thinker, about one third of adults. Mature Child and Youth Care practitioners are clearly Self-Authoring thinkers. Professionals in every profession must be self-authoring thinkers or else they are merely technicians, applying regular formulas to problem solve issues.

Socialized thinkers have some serious limitations, they assume that they are responsible for how others feel and vice versa. So they may blame the other person for ruining their day. For example, when a youth swears at them, they respond with "You can't talk to me like that" or blame the youth for disappointing them, "after all I've done for her". Unfortunately, they are also unable to reflect on this limitation. Socialized thinkers refer to authority figures or fixed beliefs to guide judgment and values, they are externally focused. Self-authoring thinkers are needed as supervisors and colleagues to support the other person to expand their thinking ability. Vygotsky would call them the *more knowledgeable other*. Mentoring workers to expand thinking is helpful and the supervisor is most useful because Socialized thinkers respect authority figures as guides. Training efforts that focus on Child and Youth Care content (the what), are less useful than focusing on thinking and reflecting (the how).

So what I know now is partly expanding what I have known for a while and partly exploring new ideas. Personally, Child and Youth Care practice is an ever expanding and complex profession which excites me every day. The most important thing I know now is that I chose a good field to invest my time and efforts into.

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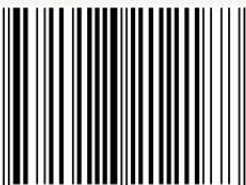
Jack spent the first 15 years of his career working in a variety of Child and Youth Care positions before arriving at Grant MacEwan University and teaching, thinking and writing about effective Child and Youth Care practice for the past 30 years. Travelling to many diverse places and meeting articulate Child and Youth Care people around the world has been a wonderful way to enrich his perspective as well as build some wonderful friendships.

Child and Youth Care practice is doing and thinking in real time. Working without a net, at the coal face, dancing in rhythm, hanging in, feeling the pain are all accurate descriptions, yet explaining the “why and how” to others can be difficult.

This book is a compilation of writings mostly done for *CYC-Online* over several years, which try to open a discussion about the why and how. Many pieces are deliberately short, to be easily digested and thought about later. All of them are written for practitioners with a simplicity aimed at the other side of complexity.

Hopefully, the range of direct Child and Youth Care practitioners from new to very skilled, as well as supervisors and program managers who read this book will find both validation and challenge to continue to dance well.

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