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ENOUGH HOPE TO SPARE:  
THE TRANSFORMATIVE EXPERIENCE OF BIRTH PARENTS AS LEADERS IN  
CHILD WELFARE

NICOLE R. BOSSARD

A DISSERTATION

Submitted to the Ph.D. in Leadership & Change Program  
of Antioch University  
in partial fulfillment  
of the requirements for the degree of  
Doctor of Philosophy

December, 2010

This is to certify that the dissertation entitled:

ENOUGH HOPE TO SPARE:  
THE TRANSFORMATIVE EXPERIENCE OF BIRTH PARENTS AS LEADERS IN  
CHILD WELFARE

prepared by

Nicole R. Bossard, MA

is approved in partial fulfillment of the requirements for the degree of Doctor of  
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## Dedication

To all the leaders on the journey, you continue to astound and inspire me with your dedication. You are bright stars shining brightly. This is a gift for you.

## THE JOURNEY

One day you finally knew  
what you had to do, and began,  
Though the voices around you  
    kept shouting  
    their bad advice –  
though the whole house  
    began to tremble  
and you felt the old tug  
    at the ankles.  
    “Mend my life!”  
    each voice cried.  
But you didn’t stop.  
You knew what you had to do,  
    though the wind pried  
with its stiff fingers at the very foundations –  
    though their melancholy was terrible.  
It was already late  
enough, and a wild night,  
And the road full of fallen  
    branches and stones.  
But little by little,  
as you left their voices behind,

the stars began to burn  
through the sheets of clouds,  
And there was a new voice,  
which you slowly  
recognized as your own,  
that kept you company  
as you strode deeper and deeper  
into the world,  
determined to do  
the only thing you could do –  
determined to save  
the only life you could save.

(Oliver, 1986, pp. 38-39)

## **Acknowledgements**

I must first give honor, respect, and thanks to Olodumare, Olofi, Olorun, gbogbo Egun mi n'belese Olodumare iba ye orun, gbogbo Orisa, and all the citizens of heaven that have helped me stay the course. Modupe!

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To the birth parent leaders who trusted me with their stories, it is your life story that makes this project alive. I am so grateful to you. Thank you for sharing a bit of your life in these pages and granting me the great honor of partnership in inquiry. I love you

and know that your work will continue to create new possibilities for children, families, and communities. As a result of your example, I have a greater compassion for members of my own family that have walked similarly winding and dark roads. Because of you, I finally know that change is possible. And to my sister, I hope you can forgive me for taking so long to get here.

Along the way, I have been blessed to find mentors, dissertation coaches, and benefactors that made sure I kept plodding along even when I wanted to do anything (and everything) but write my way to the finish line. Dr. Yvette Lamb (dissertation coach of the year and friend), Iya Sojourner McAuley (thanks for helping me stay on track and for sending prayers to Yemoja on my behalf), Dr. Raymond Crowel and Ms. Pam Johnson (blessed assurance, blessed assurance), and the entire Catalyst for Kids team in Seattle, Washington, and the staff at Contra Costa Department of Child and Family Services. However, there is one other without whom I could not have made it over. I must thank Dr. Faith Ngunjiri whose doctoral research on Kenyan women as spirited leaders greatly informed the approach I used in my own research. Dr. Cherri D. Waters, you have my gratitude forever. You are an extraordinary writing coach and great example of maintaining the integrity of the village; even if your dining room is co-opted for a couple of days! You are a marvel, indeed.

My appreciation goes out to the Improving Child Welfare Outcomes Through Systems of Care learning community, grantees, national technical assistance and evaluation team, and federal partners. As I told you all the last time we were together, I love you. Your work has been a true inspiration for me personally and professionally. In serving you, a deeper sense of my own purpose and passion has been ignited. Though I



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I could spend at least a hundred more pages thanking others that have blessed me throughout this journey (and some of you know that would be the abridged version). However, these things do have page limits. If I missed your name above, it is not a lack of appreciation but simply space. Your encouragement, prayers, and love are acknowledged and appreciated.

## **Abstract**

This study explores the transformative experience from client and service recipient to collaborative leader and partner in child welfare. Rather than expanding on existing literature that examines the nature and quality of the client experience from a service or customer satisfaction perspective, this study reflects the lived experiences of "real, bonafide" birth parent leaders in child welfare systems in the State of Kansas, several counties in Washington state, and Contra Costa County, California. The goal of the study is to illuminate the journey from clienthood to leadership as experienced by the nine birth parent leaders in the study through research portraits (Lawrence-Lightfoot Hoffmann Davis, 1997). Findings from the study highlight the dynamic interplay between individual and contextual dimensions that support the initiation of and on-going leadership of birth parents within child welfare systems as active and equal participants. The findings illuminate for us the relational web in which the study's birth parent leader participants have emerged and thrive as collaborative partners and leaders within their local child welfare context. In so doing, the study provides a relational interpretation of resilience and transformation, leadership and change that extends beyond traditional notions of client engagement and consumer involvement in child welfare. The electronic version of this dissertation is at OhioLink ETD Center, [www.ohiolink.edu/etd](http://www.ohiolink.edu/etd).

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## **Chapter I: Introduction**

I have never lost sight of the hopelessness I felt as a parent and the stigma and difficulty I had in regaining a level of respect and dignity in the community.

I have learned so much from my life experiences as a social worker, a parent who lost my child due to drug addiction, and now a healthy mother in recovery.... I have seen tremendous opportunity for changes... and very much want to spread the message that change is possible.

The quote above was shared by Sherry Tomlinson, a birth mother whose child was placed in foster care because of her addiction to methamphetamine. Sherry has since reunified with her child and is now an advocate, mentor, coach, and consultant, who works with birth parents of children in foster care and the child welfare agencies serving them. After hearing Sherry's story and others like it, I was inspired and intrigued by how birth parents' experiences of hopelessness became experiences of hope, possibility, and change. What I have found most compelling, however, has been their emergence as indispensable collaborative partners, system and community advocates, and passionate leaders within the child welfare system.

These leadership voices have become the centerpiece of a portraiture dissertation study that has examined the transformative journey of nine birth parents from clients to leaders in child welfare systems change. Using portraiture methodology, the study has explored birth parent leaders' experiences and the context in which their journeys unfolded.

In so doing, my goal has been to fill a gap in the literature. Although scholars and practitioners now recognize the value of meaningful family involvement throughout human services (Horwath & Morrison, 2007; U.S. Department of Health and Human



Services, 2010), few studies have examined the role of former service recipients as leaders and partners. I believe that this study's focus on the lived experiences of birth parent leaders in child welfare will make a substantial contribution to child welfare policy and practice, and to future research, by welcoming the experiences of those who have walked in both worlds, clienthood and leadership, into the dialogue that is now reshaping the child welfare system.

In this introductory chapter, I present the context and background for the study; its conceptual framework; its purpose, scope, and limitations; the criteria by which it should be judged; and a summary of the remainder of the dissertation.

### **Situating the Researcher**

I have had the privilege of serving as a consultant and technical assistance team lead for the National Technical Assistance and Evaluation Center for Systems of Care (the Center). The Center provided intensive, long-term technical assistance for the eighteen communities comprising the nine awardees of the grant program. In addition, to the technical assistance the Center also conducted the national, cross-site evaluation of the grant program. The grant program focused on infrastructure development and systemic change as the primary means of improving child welfare outcomes with public child welfare agencies. My role at the Center provided an opportunity for me to work directly with multiple county and state public child welfare systems as each developed a comprehensive, systemic approach to improving child welfare outcomes through the implementation of the Systems of Care philosophy as a guiding framework. The Systems of Care approach integrates the following guiding principles within its framework for change: interagency collaboration, child, youth, and family involvement, community-

based resources, individualized, strengths-based practice, and cultural and linguistic competence (DeCarolus, Southern, & Blake, 2007). As a result of my involvement in this grant program, I came to understand the imperatives, impediments, and opportunities for change in a child welfare context as related to birth parent engagement.

During the five-year Improving Child Welfare Outcomes Through Systems of Care demonstration grant program eighteen participating grant communities developed innovative strategies to foster the meaningful engagement of birth parents in their local and/or state child welfare agencies. These innovations included strategies to improve strengths-based practice models between social workers/child welfare professionals and birth parents with open case plans (case level); peer support models that paired parents that had successfully navigated the child welfare system with birth parents currently in the system (peer level); and including birth parent voice on decision making committees at the agency, county/city, and/or state public child welfare system (systems level) (National Technical Assistance and Evaluation Center for Systems of Care, 2007).

The involvement of birth parents beyond their individual case plan is an emerging practice in public child welfare that is gaining increasing attention (Anthony, Duerr Berrick, Cohen, & Wilder, 2009; Cohen & Canan, 2006). The involvement of birth parents in the Improving Child Welfare Outcomes through Systems of Care grant program was considered to be a galvanizing force that was transformative for birth parents, child welfare agencies and other systems partners. As one local stakeholder acknowledged, “the transformation of public child welfare as we know it will turn on the meaningful involvement of birth parents” (S. Black, personal communication, May 2005). My interest in birth parents as collaborative partners and leaders in child welfare

emerged as a direct result of my in-depth and long-term consulting work with public child welfare agencies within the context of the Improving Child Welfare Outcomes Through Systems of Care grant program<sup>1</sup>.

In my role as a consultant and technical assistance provider, I have seen how meaningful parent involvement in systems change is transforming the face, form, and function of child welfare systems in exciting and unexpected ways for parents leaders and agency professionals. In the process, I have also seen parents emerge as indispensable collaborative partners, system and community advocates, and passionate leaders. These leadership experiences are the centerpiece of the current research. Before proceeding, it is important to note that there are several distinct groups that within under the client categorization in child welfare including, birth parents, foster parents, adoptive parents, youth, children in care, kin caregivers. However, for the purposes of this study the experiences birth parents that have had children placed into the foster care system will be the focus of the study. Though each of the service recipient categorizations mentioned above have equally important experiences in the child welfare system, it has been the case that birth parents have been considered “secondary clients” (Trotter, 2008) in child welfare and child protection while also experiencing a level of stigma in the larger society to which other service users are not subjected (Mizrahi, Lopez Humphreys, & Torres, 2009).

The goal of the current research was to explore the transformative journey of birth parents involved in child welfare from a leadership perspective, and in so doing contribute to a growing body of knowledge on birth parent leadership in child welfare.

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<sup>1</sup> For more information about the Improving Child Welfare Outcomes Through Systems of Care demonstration grant program, refer to <http://www.childwelfare.gov/management/reform/soc/communicate/initiative/>

Rather than focus on the emerging birth parent programs and practice models, I was interested in understanding the journey how these birth parent leaders arrived at this destination, specifically what facilitated their trajectory to leadership, where did they experience barriers. The presence of birth parent leaders in child welfare is such a new phenomenon, that an in-depth exploration of the journey from client to leadership in child welfare will highlight the nuances and complexities of an emergent birth parent leader consciousness as well as provide insight into how birth parent leaders view the child welfare context and the need for birth parent leadership, and their vision and hope for the future of birth parent involvement. By and large, the leadership contributions of birth parents are absent or overlooked in the empirical literature. The portraiture methodology was chosen to make visible the lived experience of parent leaders in child welfare.

Portraiture integrates the phenomenological value of in-depth exploration of the essence of experience with ethnography informed methodology that incorporates detailed description of context and collaborative interpretation of action, voice, and meaning between the participants and the research portraitist (Lawrence–Lightfoot & Hoffman Davis, 1997). The process of research and inquiry in portraiture are inherently affirming and collaborative; looking for what is right and good within the communities and lives in which the research takes place.

### **Context and Background**

To understand the relevance of the study and its implications, it is essential to understand the context of child welfare because it is this context that the leadership of birth parents is taking place. I am using context to refer to the legislative policy, institutional knowledge, organizational norms, values, historical specificity, professional

ethics and ideology (Bentz & Shapiro, 1998; Lawrence-Lightfoot & Hoffman Davis, 1997;).

**The child welfare system.** Simply put, modern child welfare is a complex system with multi-disciplinary professional providers and categorical funding streams that constitute a panoply of services. Its goals are to promote, improve, or maintain child well-being by focusing on child safety, achieving permanency, and strengthening families to care for their children at home (McCarthy & Miller, 2009; Reich, 2005). The system's functions range from prevention, intensive intervention, and out-of-home placement to adoption after termination of parental rights (Shireman, 2003). Although states have primary managerial responsibility for child welfare systems, a federal government agency—namely, the Children's Bureau in the Administration on Children, Youth, and Families (ACYF) of the Department of Health and Human Services (HHS)—provides funding and sets parameters for the work of states and localities (Goldman, Salus, Wolcott, & Kennedy, 2003).

Data from the Adoption and Foster Care Analysis and Reporting Systems (AFCARS) indicates that during FY2009, 423, 773 children were placed in foster care. Of these, the average length of stay for child placed was 26.7 months. Though 49% (202,065) had reunification with their birth parent or with a principal caretaker as identified case goals, 51% actually reunified with parents or primary caretakers. Seventeen percent (69,947) of children in care had their parental rights terminated within FY2009. Not only is the child welfare system incredibly complex in its functioning, responsibilities, and intricate reporting requirements and divergent accountability structures, the numbers of children, youth, and families are tremendous.

**Birth parents in child welfare policy.** To understand the modern child welfare system one must include knowledge of its legal foundations. Buttredding the system are literally volumes of legislation regarding child well-being.<sup>2</sup> For this study, four pieces of legislation—each intended to remedy perceived system failings in its care for children—are most relevant:

1. Enacted amidst growing public concern that children were languishing in foster care, the *Adoption Assistance and Child Welfare Act of 1980 (PL 96-272)* introduced the concept of permanency planning and established the first federal procedural rules governing child welfare case management and foster care placement review. It required states to make "reasonable efforts" to keep families together, but also created an adoption assistance program and mandated regular judicial review of child welfare cases. PL96-272 made these new responsibilities requirements for Federal funding (Murray & Gesiriech, 2005).

2. After the Adoption Assistance and Child Welfare Act of 1980 (PL 96-272), the *Family Preservation and Support Services Program (FPSSP) of 1993* was passed. FPSSP provided funding for preventative family support and community-based services as a way to reduce the number of children entering care and to provide child welfare services to vulnerable children and families in their homes (LaRaviere, 2002).

3. Greatly reducing the emphasis on family preservation found in PL 96-272 and FPSSP of 1993, the *Adoption and Safe Families Act of 1997 (ASFA)* made child safety, permanency, and child and family well-being the paramount concerns in child welfare decision-making (McGowan, 2005). It required states to expedite permanency decisions for children in foster care; mandated performance standards and state

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<sup>2</sup> For a comprehensive review of the historical evolution of child welfare legislation, see McGowan, 2005.

accountability systems; and established financial penalties for failure to demonstrate improvements in child outcomes (Murray & Gesiriech, 2005). ASFA granted financial incentives for meeting adoption targets, but provided none for birth family reunification. Reducing the timelines available to agencies and parents, ASFA required the filing of termination of parental rights petitions, with certain exceptions, in cases in which a child has been in care for 15 of the most recent 22 months (LaRaviere, 2002).

4. To shift the emphasis from procedural compliance to meaningful outcomes for children and families, Congress mandated *Federal Child and Family Service Reviews (CFSR)* for "programs administered under Titles IV-B and IV-E of the Social Security Act" in 1994 (Milner, 2003; Milner, Mitchell, & Hornsby, 2005, p. 707).<sup>3</sup> Managed by ACYF, the CFSR review process assesses the practice and systems level functioning of public child welfare systems (Milner et al., 2005). Following an intensive review process, each state child welfare system must create a statewide program improvement plan to address issues raised during the review.

The impact of these and other legislative changes is profound for the child welfare systems governed by them. This is, of course, even more the case for the children, youth, and families that are the intended targets of legislative changes. The clearest example of this is ASFA, which for the first time articulates a time limit by which birth parents have to "get it together" (McCarthy & Miller, 2009, p. 36). As noted above, states are required under ASFA to intervene when they believe that a family's child rearing practices do not

---

<sup>3</sup> The CSFR assesses progress toward attaining seven outcomes: (1) children are, first and foremost, protected from abuse and neglect; (2) children are safely maintained in their homes whenever possible and appropriate; (3) children have permanency and stability in their living situations; (4) continuity of family relationships and connections is preserved for children; (5) families have enhanced capacity to provide for their children's needs; (6) children receive appropriate services to meet their educational needs; and (7) children receive adequate services to meet their physical and mental health needs.

meet minimum to file for termination of parental rights if a child has been in out-of-home placement 15 out of the last 22 months. The goal of permanency for children as the central focus is clearly important. However, one of the criticisms of the law is that within an entire system beset by so many challenges that impact timeliness, i.e., the availability of substance abuse treatment, high caseworker turnover, etc., the greatest sanction is targeted towards the birth parent which may have the greatest challenge to maintain parental rights (McCarthy & Miller, 2009).

**Power and the client experience.** The presence of power dynamics and hierarchical relationships are central to the child welfare system. It could be argued that child welfare system is based on power. The power of the state to intervene in the private sphere of child rearing practices of parents in the face of allegations of maltreatment is also a use of power is central to the functioning and purpose of the child welfare systems. The use of power is also evident in the requirement of services intervention to get parents to comply with agreed upon community standards for healthy child rearing. (Wilson Spigner, electronic communication, December 26, 2009). The power of the child protective services, exists to "enhance the ability of families to care for their children by preventing, remedying, or ameliorating maltreatment" (Shireman, 2003, p. 3).<sup>4</sup> Particularly in the cases of involuntary services, child welfare social workers can be seen as agents of the state "social workers serve as agents of the state" (Gibelman, 2004, p. 96) with standards for care.

Within a power-laden system like child welfare, the implications for "clienthood" for birth parent leadership are profound. The underlying assumption is that the client

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<sup>4</sup> Maltreatment refers to "the physical and emotional mistreatment, sexual abuse, neglect and negligent treatment of children, as well as to their commercial or other exploitation" (Butchart, Phinney, Mian, & Fűrmiss, 2006 p. 7).



categorization within the network of structures, practices, beliefs, and values in child welfare, whether explicit or implicit, is identity defining and reinforced throughout the system. One of the study's foundational assumptions was that "client" is a socially constructed category (Juhila, 2003, 2004; Slembrouck & Hall, 2003; Urek, 2005). Juhila, Pösö, Hall, and Parton (2003) argue that "the process or event of becoming a client is determined in social, cultural and economic terms...[therefore] *attention must primarily be paid to the mechanisms and processes which create clienthoods* [emphasis added]" (p. 12). Thus, according to Juhila et al. the "good" client:

- takes on the client identity and accepts the help offered by the social workers;
- shows good motivation to be helped;
- accepts the social workers' suggestion as competent; and
- does *not* criticize the policy and conduct of the agency or the worker (2003, p. 228).

The danger with constructed identities within social systems is that these labels become fixed and concretized identities that systems reinforce in day-to-day practices and procedures. Consequently, professional categorizations of birth parents as clients have their own reinforcing power once officially sanctioned and recorded in the system structure, such as a case file, criminal record, or court report (Cowger, 1998; Webb, 2000). Indeed, they can become "identity prisons" that birth parents cannot easily escape even after their case closes and they are no longer involved with child welfare or are simply no longer "clients."

Here is the essential problem: because of the stickiness of identity categorizations once in place and reinforced when birth parents begin to occupy other roles and perform

other valued functions within the child welfare context there is the risk that though ‘at the table’ they are seen as belonging there. For example, there is now growing agreement that “consumer involvement” is of great benefit on interagency, planning and improvement collaboratives. However, even when services users are seated at the table, they often are not treated as collaborative partners (Horwath & Morrison, 2007).

Typically, there is greater emphasis on the needs of agencies as defined by professionals, policymakers, researchers, or other agency stakeholders; and service users' primary function is to provide feedback to the service system about the effectiveness, quality, and accessibility of services. This restricted role for service recipients is certainly valuable if the goal is providing client feedback to decision makers, but it is not a substitute for truly collaborative engagement. Again, the uses of power, though nuanced are present throughout the functioning and day-to-day operations of the child welfare system. The realities of deeply embedded power imbalances and hierarchical relationships within context begs the question what does birth parent leadership look like within the child welfare context, and how do birth parents come to define themselves beyond clienthood?

### **Conceptual Framework**

This is ultimately a study about human experience. As such, I needed a lens through which to see the dynamic and generative nature of a transformative experience in the context of child welfare. Consistent with the protocols of the portraiture methodology, I identified relevant dimensions and enabling prejudgments to provide the theoretical foundation upon which to initiate the inquiry (Lawrence-Lightfoot & Hoffmann Davis, 1997).

**A working definition of leadership.** For this study, I have adopted Senge's definition of leadership:

the capacity of a human community-people living and working together-to bring forth new realities. Another way to say this is that leadership energizes. Leadership breathes life into an enterprise, without which nothing truly new can emerge. The word *inspire*, long associated with leadership, derives from the Latin *inspirare*, literally 'to breathe life into'...Leadership is about tapping the energy to create-especially something that matters deeply. Where this energy exists, we are more engaged, fulfilled, and productive. We are more alive. (1999, pp. 78-79)

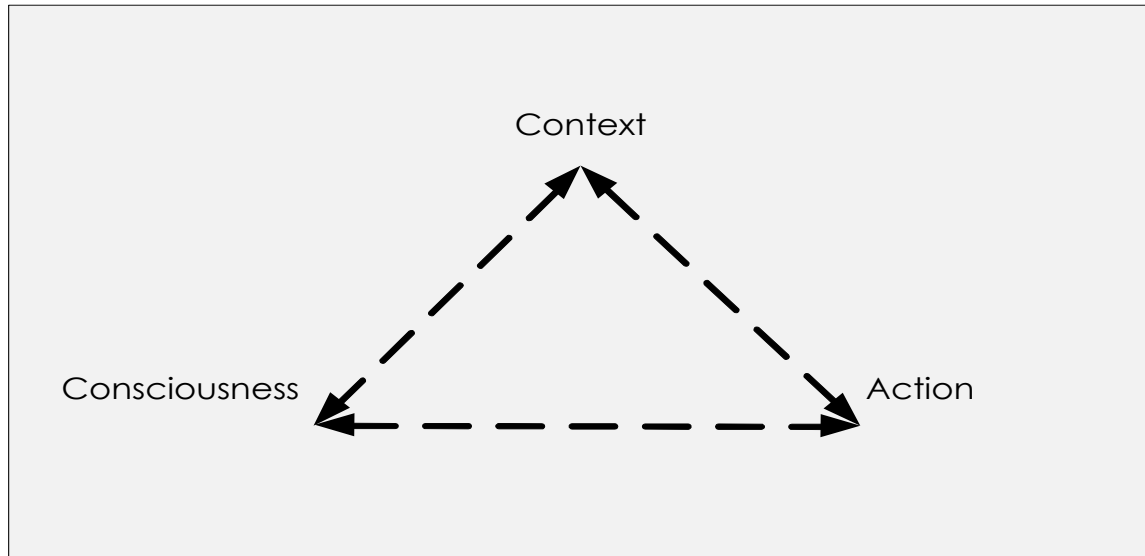
Birth parent leadership implies more than having successfully navigated the child welfare system for oneself. It means that birth parents have prepared themselves, have entered the organizational context with the intent to promote change, and have begun the work of systemic change in partnership with others. In essence, birth parent leadership requires, and is exhibited through, a dynamic and generative interplay of factors.

Drawing on my practitioner knowledge and shared wisdom from birth parent leaders, I identified three such relevant dimensions and have used them in the conceptual framework for the study: (1) consciousness, (2) context, and (3) action. My understanding of each concept is as follows:

1. Consciousness: Birth parents mentioned that it was important for them to have "healed" before participating in collaborative partnership. In short, they had done enough of their own healing so that they could participate in work to improve the system overall rather than attempt to resolve issues with their own past case. Broader than not having an axe to grind, "healing" encompasses an awareness of the delicate balance between "it ain't about me" (Debbie Conway, personal communication, March 16, 2010) and being able to use one's experience, one's story, as a vehicle for leading and inspiring change.

2. Action: At the core of any discussion of leadership is the issue of action. Something happens, gets accomplished, changes, emerges, or results from the activity of leadership. Hence, in my conceptual framework, there is, indeed, something that birth parent leaders *do*: they engage in activities that impact, to varying degrees, the work of child welfare agencies.

3. Context: In addition to the work of the individual birth parent leader, change requires some degree of organizational partnership. Just as there is work for birth parents on this transformative journey that only they can do, there is also work that the child welfare agency must do. The degree or depth of organizational space within the system for birth parents to function as leader-partners may vary. For example, agencies may engage birth parents in self-assessments in preparation for the Child and Family Service Reviews or may invite them to share their stories at conferences or interagency meetings. Recently, some child welfare agencies have retained or hired birth parents as full- or part-time employees for the specific purpose of helping other birth parents successfully navigate the child welfare system. There are tangible efforts on the part of child welfare agencies to create vehicles for birth parent leader development and partnership.



**Figure 1.1 Conceptual Framework for Understanding Birth Parent Leader Consciousness**

In sum, my view, as depicted in Figure 1.1, is that context (child welfare), consciousness (of the parent leader), and action (shared, collaborative leadership) are inextricably linked. By this, I mean the following: the context in which birth parents participate in leadership impacts their consciousness of self as well as the agency and community context in which they participate. Consciousness guides behavior (action) in ways that transform the awareness of the leader self and the larger context simultaneously. It is important to note that the relevant dimensions functioned only as theoretical starting points and expanded as I incorporated additional ideas from the literature, and expanded further still based on the lived experiences of the birth parent leaders.

### **Purpose of the Study**

The changing role of birth parents, from service recipients and clients to collaborative leader-partners in child welfare, has become a point of interest in child

welfare practice and policy (Anthony et al., 2009). Still, little research exists on former child welfare-involved birth parents in these new roles. Research on the emerging leadership role of birth parents as partners in child welfare can make a substantial contribution in child welfare practice, policy, and future research by bringing the experiences of those who have walked in both worlds, clienthood and leadership, into the dialogue that is now reshaping the child welfare system.

Thus, the purpose of this portraiture study is an in-depth exploration of the process of becoming a leader-partner through an examination of the transformative journey birth parent leaders have taken from clienthood to leadership within the child welfare system. Its defining feature is the focus on birth parents as leaders in a system that has largely viewed them through the narrow frame of "client." The study has sought to widen that frame to allow for an inclusive and affirming acknowledgement of birth parents as leaders and partners not just former recipients of services.

### **Research Questions**

Essentially, I wanted to understand—from the perspective of the birth parent leader:

- What is the nature of the transformative journey?
- What does it mean to and for each birth parent leader?
- How has her or his leadership been expressed in the child welfare systems in which she or he is now a leader-partner?

Consequently, my research has explored the social and relational dimensions of birth parent leadership in context rather than attempting to pull apart, or separate out, the lived experience of the transformative journey.

Two research questions guided the study:

1. What does the transformative journey from clienthood to leadership look like as expressed in the life experiences of birth parent leaders in child welfare?
2. What does birth parent leadership in child welfare require on the part of the birth parent leader and the child welfare organization and system?

### **Scope and Limitations of the Study**

The scope of my dissertation study is defined by observations I have made as a consultant working with child welfare agencies across the United States. It is limited to the nine participants with whom I have had multiple conversations and interactions throughout the course of the study. This is appropriate given the exploratory nature of the research and the limited knowledge about birth parents as leaders within a child welfare context. The small number of participants is also fitting given portraiture methodology and the collaborative stance I took in the implementation of the study.

Limiting the study to a sample identified almost exclusively through my professional observations, however, increases the risk that the analysis has been impacted significantly by the perspectives, biases, and intentions that I brought to the project. Consequently, I have been vigilant in maintaining the delicate balance between collaboratively driven inquiry (Bray, Lee, Smith, & Yorks, 2000) and my role and responsibilities as the research lead, or research facilitator, in this project.

One might argue that this research represented a crisis of representation (Hill Collins, 1986). Though my experience as a consultant helping child welfare systems manage the processes of change provides a valuable perspective on the subject of the emergence of a birth parents as leaders in child welfare, I am neither a former client of

nor a service provider within the child welfare system. And yet, this etic, or outsider, position on the margins of the child welfare system has allowed me to see patterns and make connections that insiders might overlook. Being the “outsider-within,” also invites a degree of humility, a conscious awareness of one’s place in context, while fully and respectfully engaging the dialogic process in which inquiry and meaning-making emerge (Hill Collins, 1986, p. 175).

Moreover, I brought a "sister perspective" to the study, exemplified in an authentic respect for the wisdom of lived experience, an honest acknowledgement of my outside locale to the phenomenon of the birth parent transformative experience, and a humility that was curious rather than expert. This sister perspective enabled me to seek and build bridges of mutual respect and understanding that fostered a truly shared experience of inquiry, reflection, and learning. A mindful awareness of these complementary outsider and sister identities within the inquiry reinforced an active watchfulness on how I use the privileges that accompanied my role as the research facilitator as well as the humility to actively engage the process of inquiry and exploration with another.

That is, I chose to embrace the intimacy of being in the inquiry rather than distant. These ideas and identities informed the criteria by which I hope this dissertation, and ultimately I, will be judged.

### **Criteria by Which I Hope To Be Judged**

The craft of research begins with a desire to search for truth, illuminate knowledge and improve the quality of life on Earth. To be initiated into the community of scholars is to accept *ethical* [emphasis added] responsibilities for these three tasks (Kenny, Faires, Fiske, & Voyageur, 2004, p. 3)



I recently completed a learners' review of literature on critical and Indigenous research methodologies. Rather than a comprehensive survey or critique of the existing literature on a topic, I designed the learners' review to be introspective and transformative. As a result of this review I came away with a new vocabulary, language, and operative principles that would guide this my dissertation project as well as future research. It is on this new foundation that I have identified the criteria upon which I hope this work, and ultimately I, will be judged.

**Sustained integrity.** Any search for truth must begin with a deep examination of one's own beliefs and values. Research, as with all else, is an outer expression of one's integrity. Therefore, the first criteria upon which I would hope this work is judged could be best described as alignment and integrity. That is, did I maintain alignment with my values throughout the research and inquiry? Did I embody a love ethic? Did I do the necessary work to maintain awareness of and manage my position of privilege throughout the project? Did I tell the truth, even the difficult ones, to myself and others? Did I share the work? Did I consciously make space for the spirit of this work to emerge? Did I bring my best self to the dissertation and others drawn to it over and over, day in and out? Did I honor those who entrusted me with their life stories? These are questions that I must attend to actively throughout the research process as a way to maintain alignment and integrity with my own ideals and sense of the world.

**Technical competence.** Every researcher must meet technical standards for her work. This is, of course, a central point of the dissertation exercise within academia. Did I conduct the research according to established norms among the community of critical, activist scholars and Indigenous researchers to which I hope to be initiated? Did I operate

within the paradigmatic bounds of social constructivism and qualitative methodology? Have my conclusions “fit” the epistemic and methodological guidelines of the social constructivist paradigm and portraiture methodology? Or, where I have colored outside of the lines, have I properly acknowledged it and kept the reader informed of my decisions along the way? Have I maintained transparency throughout the quest to know, learn, and share findings? Have I placed myself under a critical constructivist lens that reveals for individual and collective reflection the status, privilege, and motives that surface during the research process?

**Relational accountability.** When research is proposed with an individual or community, whether a geographic community or neighborhood, a group of people, an organization or team, whatever the number or location of human beings, my belief is that a covenant is set in motion. It is not enough to be true to myself and my personal values or scholarly training. As a researcher I am accountable for and to the relationships with others on this research journey also; those that I invited to the research/inquiry process. In the case of the dissertation, was I transparent about the research goals, processes, intended outcomes, and uses of the findings? Did I make transcripts and interpretations available and easily accessible to all co-researchers? Did I take space or make space for the voice and leadership of co-researchers throughout the research process? Did I share the process and the products of the research or “take the data and run”? Perhaps, most importantly, did I engage in a power/voice with rather than power over dynamic throughout the research process? In essence, did I learn and grow *with* participants rather than research *on* them? Did I make sure that the interpretations and conclusions were not only accurate but helpful as defined by the co-researchers and collaborative inquirers in

the study? Is the study of use and will it be shared in ways that can affect change for the better?

### **Chapter Summary**

The portraiture study is about leadership and change at its core. It is an in-depth exploration of learning, leadership, and self- and organizational renewal from the perspective of voices that are not routinely associated with leadership in child welfare: former child welfare involved birth parents. In this introductory chapter, I have presented the purpose for the study as well as its timeliness. The study will explore the emergence of former child welfare involved birth parents as leaders in child welfare systems change. As such, the study stands to push the bounds on traditional perspectives about what leadership is, who is qualified to lead, and the process(es) of participating in the various processes leadership. The current study focuses on the transformative processes of becoming a leader within the social context of child welfare. A brief summary of the chapters that follow is below.

Chapter II presents a comprehensive discussion of the relevant literature, and describes the operative framework that conceptually bounds the study. The review of the literature establishes the existing conceptual frame through which the exploration of parent leadership will be initiated.

Chapter III describes the methodological parameters for the study as well as methods that will be employed to gather and interpret the narratives of the co-research parent leaders participating in the study.

Chapter IV sets forth the findings from the interviews and observations in the form of "portraits." Narratives that have been gathered through multiple interviews and

review of any other biographical materials provided by the parent leaders, i.e., books, articles, news articles or interviews. These texts were used to create a portrait for each birth parent leader. Each birth parent leader has reviewed their individual portrait for accuracy.

Chapter V presents a thorough interpretation of the findings in light of my research questions. I have incorporated the metaphorical use of the transformative journey to frame the interpretation. I conclude with a critical analysis of key concepts from the literature presented in Chapter II.

Chapter VI presents a discussion of the implications, presentation of limitations, and concludes with recommendations for future research to continue contributing to the development of knowledge in this emerging and exciting area of inquiry.

The epilogue is a self-hermeneutic of the impact of the study on the researcher, my own transformative journey.

## **Chapter II: A Review of the Literature**

This dissertation is about leadership and the journey birth parents take in becoming leaders within the context of the child welfare system. Thus, I began my research with an in-depth review of the policy and practice literature relevant to birth parents in child welfare. As part establishing a grasp on the context, the child welfare practice literature shed light on how birth parents are largely conceived within the professional practice literature in the field. Likewise, I continued my in-depth review of the leadership literature. Because it is such a vast and changing topic of study, I focused on three subsets that I believed to be most relevant for my research:

- Self leadership,
- Relational cultural theory, and
- Relational leadership.

This chapter presents an analysis of the core issues and arguments for each and assesses the implications for my research.

Parents have emerged as a powerful constituency for change in public education (Corbett & Wilson, 2000; Henderson, Jacob, Kerman-Schloss, & Raimondo, 2004; Weiss & Stephen, 2009); children's mental health (Osher, 2005; Osher, deFur, Nava, Spencer, & Toth-Dennis, 1999), and now child welfare and child abuse prevention (Child Welfare Organizing Project, 2006; Friends National Resource Center for CBCAP, 2007; Jennings, 2002; Jeppson et al., 1997; Parents Anonymous, 2005; Polinsky & Pion-Berlin, 2001).

Despite the growing consensus that child and family service systems need the meaningful involvement of families to know how to serve families and communities optimally (Horwath & Morrison, 2007), birth parents as leaders in child welfare is a

relatively unexplored and under-examined topic in the published research literature. For example, library database searches in SocINDEX for materials published in peer-reviewed journals between 1999 and 2009 on parent leadership or parent leaders in child welfare returned only one source that identified birth parents as leaders in a child welfare context (McGlade & Ackerman, 2006). Many more sources were identified in other social science databases, but without exception, the resulting articles did not focus on birth parent leadership in child welfare systems. The preponderance of the theoretical and empirical literature from these searches on birth parents in the child welfare system is largely written to social workers and service providers and focuses on strategies to improve practice with clients for the improvement of outcomes.

The experiences of birth parents as service recipients in the child welfare system represents an expansive body of literature in child welfare research (Alpert, 2005; Cortis, 2007; Smith, 2008; Trotter, 2008). A recent review of the literature in peer reviewed and professional journals about parental perspectives and attitudes on the service experience in child welfare returned results in several areas. Among them: parent perspectives on the service experience (Akin & Gregoire, 1997; Ashford, 2006; Baker, 2007; Baistow & Hetherington, 1998; Bolen, McWey, & Schlee, 2008; Coleman & Collins, 1997; Cooper Altman, 2003, 2008; Dolan & Holt, 2002; Dumbrill, 2006; Haight et al., 2002; Kauffman, 2007; Pharis & Levin, 1991; Russell, Gockel, & Harris, 2007; Tuttle, Knudson-Martin, Levin, Taylor, & Andrews, 2007); client satisfaction and feedback (Huebner, Jones, Miller, Custer, & Critchfield, 2006; Kapp & Propp, 2002; Kapp & Vela, 2004; Littell & Tajima, 2000; Taban & Lutzker, 2001; Trotter, 2008; Winefield & Barlow, 1995); client participation (Littell, Alexander, & Reynolds, 2001; Littell & Schuerman, 2002), client

engagement (Dawson & Berry, 2002; Steib, 2004; Stevens, Ammerman, Putnam, Gannon, & Van Ginkel, 2005; Yatchmenoff, 2005); improving the client-worker relationship (de Boer & Coady, 2007; Drake, 1996; Gockel, Russell, & Harris, 2008; Saint-Jacques, Drapeau, Lessard, & Beaudoin, 2006; Smith, 2006); case plan compliance (Smith, 2008); and parent perceptions of worker's power and authority (Dale, 2004; Diorio, 1992; Webb, 2000). The preponderance of the literature on child welfare involved parents maintains a focus on various aspects of the client experience and/or strategies for improved client engagement.

Much of the literature on birth parents as leaders in child welfare has been crafted by parent leader practitioners, i.e., parent leadership organizations, parent support groups or programs, or parent-professional collaborative partnerships (FRIENDS National Resource Center for CBCAP, 2010), but birth parent leadership has not yet emerged as a consistent subject of inquiry within mainstream journals that serve as far-reaching dissemination routes for new knowledge in child welfare. With the exception of a few empirical explorations into the effectiveness of parent peer support models in improving child welfare outcomes, i.e., improved reunification outcomes through peer support interventions (Anthony et al., 2009; Cohen & Canan, 2006; Frame, Conley, & Duerr Berrick, 2006; National Council on Crime and Delinquency, 2007, 2008), the discourse appears to be dominated by system professionals interested in practice improvement with parents, i.e., client engagement, better case plan compliance, etc., as a way to improve outcomes for children and families receiving services.

I do not mean to imply that evidence on practice and program improvement is problematic. This type of data is crucial for continuous quality improvement of services

in the child welfare system. Rather, at issue is the almost exclusive presence of birth parents in the professional literature from within a narrowed lens of clienthood. Though the literature on birth parents in child welfare is growing, Kapp and Propp have noted a “studied indifference” (2002, p. 228) related to birth parents once children have been placed in substitute care. Consequently, the voice, authority, and legitimacy of professionals writing, teaching, and researching about parents has been the long established norm as opposed to birth parents speaking for themselves in widely disseminated sources. I would suggest that this pattern of overlooking also gets applied to birth parent’s leadership in child welfare. As a result, the professional voice of social workers, researchers, and other professionally legitimized groups, is privileged over and continues to speak about the birth parent in the discourse. For example, a recent research article on the communication skills of social workers in child protection in the United Kingdom was conducted with the use of a “simulated client,” actors playing a parent with children in care (Forrester, Kershaw, Moss, & Hughes, 2008). In this study the presence of birth parents with real experience is removed altogether yet the purpose of improving birth parent engagement skill remains.

### **A Scholar-Practitioner’s Approach to the Literature**

The impetus for the exploration of birth parents as leaders in child welfare did not come as a result of noting a deficiency in the existing literature. The idea for the study came from working directly with communities engaged in systems change processes guided by the system-of-care concept. Consequently, my earliest conceptualizations for a study of parents as leaders in child welfare systems change were not framed by what was present or missing from the literature but the excitement I had observed and felt in my



consulting work with child welfare agencies and communities across the country. The curiosities and convictions that emerged from this practice experience informed the research questions for the study, but also provided a foundation for identifying bodies of literature that can contribute to a critical and comprehensive discussion of the emergence of parents as leaders in child welfare.

I have approached the review of the literature from a scholar-practitioner (Bentz & Shapiro, 1998) perspective. I have brought my experiential and tacit knowledge, from working with agencies and communities, to the literature as a way to bring texture and depth to the conceptual ideas found therein. Rather than theorizing in a vacuum, I have tried to keep my exploration and analysis of the literature open to the light of my own experiential knowledge and that of parent leaders and their system partner allies. Maintaining a social constructivist's stance, I have approached the literature review as an on-going roundtable dialogue on parents as leaders in child welfare systems change. The metaphor of a roundtable dialogue integrates several assumptions about what the literature represents, expression of ideas with intent to expand one's own thinking and that of others, as well as the way one engages in a dialogic conversation versus other modes of learning-centered communication.

When entering a roundtable dialogue, the first task is to listen well, identify major concepts and ideas as well as embedded assumptions that are packed within them, assess the direction and flow of the conversation (as well as factors influencing or pushing the dialogue in a direction), construct an analysis of what's been said, and contribute one's own insight, critique, or direction for the continuing dialogue. This review of the literature then is the first movement from observation to exploration through a review and

analysis of the relevant scholarship and practice literature that may serve to illuminate the journey from clienthood to leadership in a child welfare systems context.

### **Organization of the Literature Review**

Constructing a theoretical surface on which the portraits of change study could be created was an exercise in weaving together multiple conceptual ideas from the leadership literature into a single, coherent canvas. The emergence of parents as leaders within the current child welfare context is a theoretically dense topic of inquiry. In identifying a theoretical home for the study there are three primary leadership theories that are most relevant for this inquiry into parents as leaders in child welfare systems change: self-leadership (Manz, 1986; Neck & Manz, 2007); shared leadership (Pearce & Conger, 2003); and relational leadership (Cunliffe & Eriksen, 2009). The literature frames of reference to begin the study are listed below.

1. A discussion of the literature on self leadership theory and practice to explore the emergence of a leader consciousness that ultimately promotes leadership action and participation; the inner processes that promote outward action;
2. An exploration of the literature on relational-cultural theory as a way to illuminate the role of relational resilience in the emergence of a leader consciousness for parent leaders. Essentially, the RCT literature presents a theoretical bridge towards a new understanding of the role of growth fostering connections in parent leadership development and expression; and
3. A discussion of the relevant relational concepts within the leadership literature as a means of exploring contexts in which leadership, as a shared process, can thrive.

Broadly described as relational leadership these concepts are epistemically consistent with the broader social constructivist focus of the study.

### **Key Assumptions**

There are three key assumptions that have guided me in the identification and analysis of the literature thus far.

**A broader definition of leadership.** The literature within leadership studies offers multiple definitions of the concept. Numerous scholars have noted the problem of defining leadership (Bennis & Nanus, 1985; Burns, 1978; Rost, 1993). One central problem with traditional definitions of leadership is the narrow cultural lens through which the concept has been defined, theorized, and studied. These traditional leadership theories focus on the leader-follower dyad within a hierarchical context in which the leader leads and followers follow. The unilateral flow of power and influence in these definitions is clear. However, parent leaders in child welfare, particularly former birth parent service recipients, challenge traditional notions of power and leadership because they do not possess authority, power, and legitimized status within child welfare systems. I have incorporated the following definition to give structure and meaning to the leadership concept within this exploratory analysis. Senge (1999), in his work on organizations as living systems, defines leadership as

the capacity of a human community-people living and working together-to bring forth new realities. Another way to say this is that leadership energizes. Leadership breathes life into an enterprise, without which nothing truly new can emerge. (p. 78)

Embedded in Senge's (1999) definition is the foundational cornerstone of all leadership theory: leadership is fundamentally about real, intended change. Senge's definition highlights leadership as a capacity that is shared within a community. The

emphasis on community capacity to make change reflects an understanding of leadership as a process to which all actors within the social system have access. One of the important contributions of leadership theories framed within concepts of living systems is that new science (Wheatley, 1992) concepts bring attention to the dispersed, self-organizing capacity of social systems that challenge traditional, industrial era notions of leadership that are mechanistic, hierarchical, and person-/personality-focused (Pearce & Conger, 2003; Senge, 1990). Specifically, living systems leadership concepts extend our understanding of leadership beyond a bifurcated focus on the leader (i.e., traits, attributes, behaviors, and competencies) and homogenous definitions and descriptors of followers. Rather, living systems theories inspire a curiosity to view the social ecology, the system itself, in which leadership emerges from various sources.

**Leadership as a shared process.** Much of the traditional leadership research and theory has focused on leadership from the perspective of the individual, and how the leader organizes the task of achieving a goal or vision (Yukl, 2002). This traditional view of leadership is giving way to emerging theory, practice, and research in leadership studies that distinguish the leader from distributed leadership processes, tasks, and functions (Cunliffe, 2008; Drath, 2001; Wheatley, 2007). These concepts have expanded the basis for understanding leadership beyond explorations of those ‘at the top’ by seeing leadership as a shared participatory process. Conceptualizations of leadership as dispersed through a social system provide an opening for a discussion of the leaderly contributions of parents within child welfare systems change as outside partners and informal leaders in the organizational context of child welfare. Within traditional leader paradigms, the leadership functions of parents, as marginalized or unrecognized leader

partners in child welfare, often get disappeared or minimized as leadership work. My hunch is that without a commitment to building cultures of collaboration within child welfare agencies there is limited space for the leadership of parents as leader-partners in child welfare systems change.

**The need for a holistic view.** The emergence of parents as leaders in child welfare must be examined critically to understand the nuances and relevance of parents as leaders and collaborative partners in child welfare systems. A compelling feature of this study is that the examination of the professional ideology, organizational structure, and historical and cultural context of child welfare reveal deeply embedded systemic structures that have created a secondary status for parents, particularly birth parents, on multiple levels in the day-to-day functioning of the child welfare system. Therefore, the examination of the literature on parents as leaders in child welfare is broad and comprehensive to present a systemic view of the organizational context in which former child welfare service recipients are emerging as leaders and leader-partners. It is from this holistic view that the relevance of the study becomes evident. For example, as Adams et al. (1998) convincingly argue that

the very term *family involvement* is problematic. By introducing “systems thinking” ... a more relevant and effective framework can be established. This framework suggests that families are already critical participants in the ecosystem that raises and serves children. The task is not to bring families into an area that they’ve not previously belonged to. The task is to fully recognize and honor the membership they already have – a membership that is absolutely central to the life of the child. (p. 3)

I would suggest that parent leadership is not only central to the life of the child, but the system itself. As Hasenfeld (1992) has noted, human service systems are constructed on the premise that there is someone, many in fact, to receive services.

McKnight (1996) agrees noting that that clients and consumers are the object of human service systems. A critical analysis of the dissonance between professional social work ethics that reflect principles of empowerment and social justice values and patterns of exclusion within service agency policies and practice suggests a reason for the absence of literature on parents as leaders is that present-but-unseen practices of professional privilege, socially constructed notions of client, consumer, and service recipient that marginalize parent voice and agency which contributes to a ‘disappearing’ (Fletcher, 2001) of parent leadership functions within an organizational context.

### **Self Leadership**

“The concept of self leadership allows one to redesign “both our physical world and the world we carry around in our thoughts.” (Manz as cited in Cooley, 2008, p. 33)

The experiences of parents as leaders in child welfare systems reform, particularly the arc from service recipient to collaborative leader-partner, tell a leadership story that is under-explored in the leadership literature; the recognition of the emergence of one’s leader self. Manz describes self leadership as a “...comprehensive self-influence perspective that concerns leading oneself toward performance of naturally motivating tasks as well as managing oneself to do work that must be done but is not naturally motivating” (1986, p. 589). This concept of self leadership, namely the focus on managing non-motivating tasks, is compelling in light of the myriad demands placed on service recipients, especially those receiving court-ordered services. This is consistent with my observations of parent leaders in child welfare. My curiosity was heightened after seeing dynamic, passionate parent leaders time and again, and I often wondered how did these parents take their first steps. That is, how did they lead themselves? In

considering self leadership theory as described by Manz (1986) several questions arise; how does one lead oneself in the presence of dire circumstances; what does it look like in practice; and, most importantly what might it contribute to our understanding of the journey of parent leaders in child welfare systems change.

Self leadership first emerged in the management and leadership literature in the mid-1980's expanding on previous self-management and self control concepts (Manz, 1986), and has gained considerable attention in the leadership and management literature over the last two decades (Manz & Sims, 2001; Neck & Houghton, 2006; Neck & Manz, 2007). In a recent review of self leadership theory and research, Neck and Houghton (2006) identified several outcomes thought to be associated with self leadership based on the continued application of self leadership strategies in business and management settings since the concept emerged in the mid-1980's. These outcomes include commitment, independence, creativity/innovation, trust, potency, positive effect, job satisfaction, psychological empowerment, and self-efficacy. Though self leadership theory has gained considerable attention in the literature, it has continued to be applied and explored mainly within the context of private business with few excursions beyond the context of organizational management and leadership in the corporate sector (Neck, Ashcraft, & VanSandt, 1998; Prussia, Anderson, & Manz, 1998).

Neck and Houghton (2006) provide a working definition of self leadership as “a process through which individuals control their own behavior, influencing and leading themselves through the use of specific sets of behavioral and cognitive strategies” (p. 270). As such, self leadership is a self-influence process through which people achieve the direction and motivation necessary to perform in desirable ways (Prussia et

al., 1998). Self leadership strategies are often grouped into three broad categories (Figure 2.1): (1) behavior-focused strategies; (2) natural reward strategies; and (3) constructive thought pattern strategies, and are designed to positively influence personal effectiveness (Houghton, Neck, & Manz, 2003; Manz & Sims, 2001; Neck & Manz, 2007).

**Theoretical building blocks of self leadership.** Self leadership strategies integrates key theoretical concepts from two primary sources: (1) self-regulation theories, including social cognitive theory and self management and self control theories, and intrinsic motivation theory (Neck & Houghton, 2006). These theoretical sources form the basis on which self leadership strategies (Figure 2.1) were created (Manz, 1986).

### Figure 2.1 Self Leadership Strategies

***Behavior-Focused Strategies*** – employed to heighten an individual’s self awareness in order to facilitate behavioral management, especially the management of behaviors related to necessary but unpleasant tasks. Behavior-focused strategies include self-observation, self-goal-setting, self-reward, self-correction, and self-cueing.

***Natural Reward Strategies*** – used to create situations in which a person is motivated or rewarded by inherently enjoyable aspects of the task or activity as a means of creating feelings of competence and self-determination. Natural reward strategies include building more pleasant and enjoyable features into an activity making naturally rewarding and (re-)shaping perceptions by focusing attention away from the unpleasant of a task and refocusing it on the task’s inherently rewarding aspects.

***Constructive Thought Pattern Strategies*** – designed to facilitate the formation of constructive thought patterns and habitual ways of thinking that can positively impact performance. Constructive though pattern strategies include identifying and replacing dysfunctional beliefs and assumptions, mental imagery, and positive self-talk

**Self-regulation theory.** Self regulation theories are concerned with explaining what motivates behavior, i.e., goal attainment, and by what psychological processes these



behaviors are enacted, i.e., closing the gap between the current state and the desired goal (Higgins, 2000). As such, a primary focus of self-regulation theory seeks to explain the means by which human beings reduce the discrepancy between the current state and a desired goal, value, or vision, what triggers one's awareness of the presence of the discrepancy, and assessment of one's capability to reduce (or enlarge) the discrepancy once identified. Carver (1979) identified this process as similar to that of feedback loop processes in the literature on cybernetics as a of accounting for how goals are attained by action (Carver & Scheier, 2002). Carver and Scheier (2002) assert that "...the [feedback] mechanism behind this view presumes the existence of a capacity to represent a goal, a channel of informational input, and pathways to exert influence on present conditions" (p. 305). Neck and Houghton (2006) have identified several concepts from behavioral self regulation theory that have informed self leadership theory and strategies.

Self regulation theory suggests a hierarchical organization of the self regulation system in the form of superordinate (e.g., high level aspirations) and subordinate (e.g., externally set goals or standards) feedback loops or goals that encompass overarching principles of what a person wants to be and specific programs of behaviors that inform activities that are consistent with higher level principles as well as specific sequences of behavior that facilitate goal attainment.

Self regulation theory assumes goals at hierarchical levels function together to shape behavior assuming that as a person becomes more confident with new behaviors that there's a drift towards higher goal abstraction utilizing new found competencies acquired in achieving the goal or idealized state. Likewise, difficulty in maintaining or achieving the new state results in the formation of concrete goals.

Self regulation suggests that when faced with problems and discrepancies in goal attainment those with positive expectancies (i.e., hopeful or optimistic) tend to persist while those with negative expectancies (i.e., pessimistic) tend to search for availability of alternative goals or disengage altogether.

Lastly, self regulation theory distinguishes between a promotion and prevention self regulatory focus. A promotion focus operates on a basis of accomplishments, hopes, and aspirations thereby regulating the presence and absence of positive outcomes. A promotion focus is associated with notions of an ideal-self that represents the attributes a person would ideally like to possess. However, a prevention focus operates on the basis of safety, responsibility, and obligation thereby regulating the presence and absence of negative outcomes. The prevention focus is associated with an ought-self guide that represents the attributes a person believes they should or ought to possess.

Neck and Houghton (2006) argue that

[w]hile self-regulation theory specifies the existence and likelihood of dysfunctions in self-regulation, it prescribes few strategies for increasing self-regulatory effectiveness. In contrast, self-leadership, operating within self-regulation's broad theoretical framework for understanding behavior, prescribes specific behavioral and cognitive strategies designed to enhance individual self-regulatory effectiveness. (p. 277)

Each of the behavioral strategies outlined in self leadership has a direct correlation to the theoretical guideposts within self regulation theory as outlined above. Behavior focused strategies that encourage increased observation of one's behavior can help to identify specific behaviors that can be changed, altered, improved, or removed altogether to assist in the achievement of an intended goal. For example, one parent leader recounted how as a part of her recovery she became acutely aware of what events and circumstances might trigger a relapse into former drug use habits. She then alerted

people in her life about what her ‘using behavior’ looked like and what they should do and who they should call if they observed her engaging in these behaviors, including her family (S. Tomlinson, personal communication, August 21, 2009). Self leadership would assert that this detailed awareness of her behavior empowered this parent leader to create and utilize her social support networks to maintain a new ideal state, namely sobriety. This same parent leader shared what a milestone it was when her pastor asked that she take on the responsibility for managing the church finances. She, with joy, recounted “You know you’ve really come a long way when the pastor asks you, a former addict, to handle the church’s money” (S. Tomlinson, personal communication, August 21, 2009).

Natural reward strategies may help persons complete particularly unappealing tasks by identifying satisfying aspects implicit in the work or activity itself. For example, one parent leader noted how she was able to utilize court-ordered therapy as a means of completing previously unfinished healing work in preparation for reunification with her youngest child. This was after having her parental rights terminated for her previous nine children. Though feelings of extreme frustration and hurt in being separated from her youngest child was present, this parent was able to identify a natural reward for herself that enabled an empowered participation in her healing process on terms that she had defined even within the constraints of an externally mandated treatment plan.

Constructive thought strategies may improve self regulatory effectiveness by becoming aware of, evaluating, and challenging self-defeating beliefs and assumptions that impede improved performance or fulfilling one’s goals or dreams. “By confronting the beliefs and assumptions that lead to distortion and replacing them with more realistic... one’s [self] feedback may become less distorted and self-regulation more

effective” (Neck & Houghton, 2006, p. 278). Constructive thought strategies are used to create new thought patterns or habits of thinking that support more positive and optimistic oriented patterns of thinking. For example, one parent leader noted that while her children were in care that she simply refused to allow herself to think that she would not be reunified with her children once she began to engage her recovery process, and she maintained this positive belief throughout the duration of her case and her children were returned (B. Lopez, personal communication, October 21, 2009).

In summary, self leadership functions within the broader theoretical context of self regulation theory, but extends beyond an explanation of the what, why, and how of human behavior to provide specific strategies intended to improve self regulatory processes using behavior focused, natural reward, and constructive thought pattern strategies (Houghton & Neck, 2006). In addition to self regulation theory, self leadership also incorporates complimentary elements from social cognitive theory, especially from the work of Albert Bandura.

**Social cognitive theory.** Bandura’s (2000) work on social cognitive theory suggests that human behavior is explained by a triadic reciprocal causation; a transactional relationship between “internal personal factors in the form of cognitive, affective, and biological events, behavior, and environmental events... [which] operate as interacting determinants that influence one another bidirectionally” (Bandura, 2000, p. 329). Within social cognitive theory Bandura (2000) explains human behavior through several human capability characteristics: symbolizing capability, vicarious capability, forethought capability, self-regulatory capability and self-reflective capability.

Bandura (2000) suggests that humans have the capacity to place into symbolic form events and their related associations which serve as a powerful tool for making sense of one's environment and managing the conditions that impact every aspect of daily life. Symbols provide cognitive models of transient experiences that guide thought and action. These cognitive models, constituted from cognitive factors and processes "partly determine which environmental events are observed, what meaning is conferred on them, what emotional impact and motivating power they have, and how the information they convey is organized and preserved for future use" (Bandura, 2000, p. 329). Vicarious capability or social modeling allows for observational learning as a means of rapidly expanding knowledge and competencies through information conveyed through a numerous models. Much more than a process of mere repetition, social modeling can be a basis for creativity and innovation through improvisation on a general social rule in ways that generate new behaviors. In addition to the generative qualities of social modeling, it can also serve as a means of reinforcement demonstrating reward or punishment consequences for modeled behavior. Forethought capability "enables people to transcend the dictates of their immediate environment (Bandura, 2000, p. 330). By considering the future, persons motivate themselves to act in accordance with anticipated outcomes in the future associated with current actions. These motivational guides provide direction, coherence, and meaning.

Self regulatory capability asserts that persons are not motivated by outcomes expectations associated with compliance with or disregard for externally imposed standards, but that they have the capacity for self direction. Further, that the development of self direction cultivates a sense of one's own self-demands and self-sanctions which

replace external standards as one's guide, motivators, and deterrents. Within social cognitive theory, Bandura (2000) argues that most self-regulation theories focus on negative feedback systems which emphasis discrepancy reduction, but represents only half of the story.

People are proactive, aspiring organisms. They motivate and guide their actions by creating discrepancies for themselves, by forming challenging goals and then mobilizing their resources, skills, and efforts to fulfill them. In personal development and achievement strivings, internal standards become higher as knowledge and competencies are mastered. (p. 330)

Self-regulatory capability suggests that motivation does not stem from external standards or sanctions, but rather in the context of self direction, one's own evaluative reactions to internally defined standards. Lastly, self-reflective capability suggests that people are not mere agents of action but are examiners of their functioning. This requires establishing reliable ways of distinguishing accurate and faulty thinking and action. Bandura (1991) argues that the most important and pervasive of self-referent thoughts are people's beliefs in their capabilities to exercise control over events that affect their lives. It is this sense of self-efficacy that fundamentally influences how one thinks, feels, acts and motivates oneself in the midst of daily life, but especially during challenging circumstances.

Self efficacy is a central concept within self leadership theory and strategies. Self leadership strategies, especially natural reward and constructive thought pattern strategies, are intended to influence one's sense of self-efficacy prior to improved performance or the fulfillment of intended goals (Neck & Manz, 2007). As Bandura (2000) states,

Beliefs of personal efficacy are the foundation of human agency. Unless people believe they can produce desired results by their actions, they have little incentive

to act. It affects how they think, feel, act, and motivate themselves. Specifically, such beliefs regulate what people choose to do, how much effort they invest in what they undertake, how long they persevere in the face of obstacles and failure experiences, whether their thought patterns are self-hindering or self-enhancing, how much stress and despondency they experience in coping with taxing situations, and their resilience to adversity. A high sense of personal efficacy pays off in performance accomplishments and emotional well-being. (p. 331)

Consequently, self leadership theory suggests that strategies that positively impact self efficacy may improve one's performance in the face of externally defined standards as well as achieving one's own vision, hopes, and dreams. I would also underscore the importance that an increased sense of self efficacy would also support the confidence needed for self direction, particularly in social environments with high compliance to externally imposed standards, like child welfare.

**Self management and self control theories.** The remaining major theoretical pieces under the self regulation theory umbrella incorporated into self leadership theory and strategies include elements from the self management and self control literature. Self management is a process through which an individual chooses a less attractive but ultimately more desirable behavior based on an intended outcome over more immediate alternatives . In other words, "...choosing an undesirable short-term behavior is energized by a focus on desirable long-term consequences" (Neck & Houghton, 2006, p. 280). Self management was adapted from concepts in clinical psychology, and was adapted to organizational settings and relabeled self management (Neck & Houghton, 2006).

Self management theory was applied within the context of organizational management, and attempted to explain what motivates employee performance and improvement in relation to external standards. Specifically, "[t]his work generally

reflects the view that behaviors are not performed for their intrinsic value but because of their necessity or because of what the performer will receive for his/her performance” (Manz, 1986, p. 588). Self management then consists of a set of strategies designed to help a person manage behavior with respect to reducing discrepancies, i.e., deviation from organizational performance standards, from the immediate externally set standards (Manz, 1986). Self management emerged in part from a “substitutes for leadership” (Kerr & Jermier as cited in Neck & Houghton, 2006, p. 280) within organizations.

Self management strategies intended to improve performance include: self-observation, self-goal-setting, self-cueing strategies, self-reinforcement, self-connecting, and rehearsal or imagining. Self leadership merges behavioral strategies suggested by self management and self control with cognitive strategies based on concepts of intrinsic motivation and constructive thinking. That is, self leadership theory integrates a focus on reduction of discrepancy from performance standards as well as assessing the purpose and overall appropriateness of the standards themselves. The central point of departure from self management that self leadership asserts is that self influence systems are the most important systems of control (Manz, 1986), and that this internal control system must be attended to in addition to externally imposed goals and standards for maximum benefits and performance can be realized.

Self leadership, with its focus on helping individuals improve performance based on internal, self influence and a focus on the desired long term consequences of immediate actions may hold special relevance for a discussion of what makes the journey from clienthood to leadership possible. Like the business organizational context from which self management emerged, child welfare systems context has exponentially more



externally imposed standards that are activated once a family enters the system, particularly for the birth parent. Within standards-driven environments the contribution of self leadership is that it reminds us that these are human beings here that have their own internal mechanisms for fulfilling their own hopes and dreams, even inside of a larger contextual world that may impose complex and at time conflicting standards for performance.

For example, without exception every parent leader that I've encountered that is actively engaged in child welfare systems improvement as a collaborative leader-partner spoke about their encounters with the child welfare systems in ways that acknowledge the overwhelming and at times unjust ways in which the system handled them and their family while in care. I have also been struck by the depth and perspective of parent leader reflections on these interactions with child welfare.

In the midst of all the externally imposed compliance standards, some spoken, many unspoken (Smith, 2008), federally mandated timelines to demonstrate progress (McCarthy & Miller, 2009; Reich, 2005), and other life challenges, e.g., inadequate housing, no access to needed substance abuse treatment within federally mandated timelines, inadequate treatment for persistent mental illness, lack of transportation to get to available services, a jail sentence, etc. the parent leaders I've spoken with were able to take the opportunities available to them and consistently with each successfully completed step in the treatment plan remain faithfully committed that each step was getting them closer to goals they'd identified for themselves and their children. It is important to note that at some point the aforementioned goals were identified by the parents themselves not just those outlined by the agency case worker in the treatment or

case plan. In essence, they were able to utilize self management behaviors to guide daily actions based on the long term vision of being reunified with their children. In my study, I intend to portray similar stories of parent leadership, guided by a formal approach to best research practices.

Self leadership would suggest that this is, indeed, an exemplification of leading oneself to “the higher level standards that provide the reasons for the self managed behaviors” (Manz, 1986). Rather than simply going through the motions, i.e., complying with the case plan, these parent leaders were able to keep their eye on higher motives that involved improving their own life, being reunified with their children, and improving the system so that other parents wouldn’t have to go through what they did in child welfare.

As one parent leader recounted:

When I first became involved with the child welfare system, I did not understand a lot of what was happening, except that I needed to do what the social worker said in order to get my children back. I did not have a voice or a choice when it came to designing my case plan. I felt that decisions were made about me without me. I did not feel empowered. I never imagined advocating for myself and was never encouraged to do so. Despite all this, I successfully negotiated the child welfare system... Today, I not only work for but also am learning about a very complex child welfare system. I am now a part of the solution. I sit on various committees where my voice is of value, where there are administrators and directors that really want to know what it is that’s going to help change the face of child welfare. I attend many unit meetings with supervisors and social workers who want to hear about how one parent’s experience can help speak to another parent’s experience (S. Sandoval, electronic communication, August 13, 2006).

**Intrinsic motivation theory.** In addition to theories of self regulation, self leadership incorporates concepts from intrinsic motivation theory (deCharms, 1968; White, 1959), particularly cognitive evaluation theory (Deci & Ryan, 1985). Intrinsic motivation has been described as “...the inherent tendency to seek out novelty and challenges, to extend and exercise one’s capacities, to explore, and to learn” (Deci &

Ryan, 2000). That is, to pursue these human tendencies for learning, mastery, and autonomy for reasons deemed important or valuable by the individual. Said another way, what motivates behavior is the implicit reward that is present in doing a given task versus what one may receive after the task is completed. Intrinsic motivation theory suggests that one's motives for action are self-authored or endorsed internally rather than externally sanctioned.

Self leadership also draws on cognitive evaluation theory. Cognitive evaluation theory was developed to explain variability in intrinsic motivation by identifying the social and environmental factors that facilitate versus diminish intrinsic motivation (Deci & Ryan, 2000). Cognitive evaluation theory also focuses on fundamental needs for competence and autonomy. "The theory argues, first, that social-contextual events (e.g., feedback, communications, rewards) that conduce toward feelings of competence during action can enhance intrinsic motivation for that action. Accordingly, optimal challenges, effectance-promoting feedback, and freedom from demeaning evaluations were all found to facilitate intrinsic motivation" (Deci & Ryan, 2000, p. 70).

Self leadership's natural reward strategies have been based largely on intrinsic motivation literature, specifically "to the extent that tasks can be chosen, structured, or perceived in ways that lead to increased feeling of competence and self determination task performance will be enhanced" (Neck & Houghton, 2006, p. 281). Self leadership's concept of natural reward strategies incorporate the theoretical assumptions implicit in intrinsic motivation theory, i.e., building pleasant features into a given task so that the task itself becomes more rewarding, or turning attention from the unpleasant aspects of a tasks and refocusing on the inherently rewarding aspects. These strategies are intended to

increase feelings of competence but also self-authorship, or self-determining motives for goal attainment even if the goal itself has been externally defined and imposed.

An important contribution of self leadership theory to the leadership literature, especially emerging leadership concepts in living systems and organizations content, is the idea that the self is not only the source of leadership actions but the intended target of the self leadership strategic intervention as well. In much of the leadership literature, leadership and leading is described as a unidirectional flow of influence from the leader to the follower (Pearce & Conger, 2003). However, merging self leadership and living systems conceptualizations of leadership opens new opportunities for considerations of leadership within the individual and how it is shared within a group.

#### **Self leadership and parent leader journeys from clienthood to leadership.**

Manz concept of self leadership as the “process of influencing oneself” (Neck & Manz, 2007, p. 5) and the subsequent strategies, e.g., behavior focused, natural reward, and constructive thinking patterns, are quite compelling in lieu of my research question(s). The identification of influential processes that allow the fulfillment of one’s hopes and aspirations is a crucial aspect of the leadership journey of parent leaders in child welfare systems reform. Though the early pre-cursors of self management literature were focused on employees in organizational contexts is a far cry from the realities of clienthood in child welfare systems. It does offer some interesting parallels, namely the considerable and omnipresence of externally determined standards for “performance”. This is consistent with discussions I have had with parent leaders about their experience as service recipients in child welfare.

The self leadership literature does provide some insight into how parent leaders, while still service recipients, may have taken their first steps. And, in fact, led themselves. The self leadership literature, which includes work on Super Leadership, teaching others to lead themselves, (Manz & Sims, 2001) also provides an important bridge to some of the current work that parent leaders are doing now; helping other parents successfully navigate the child welfare system.

In this section I have presented the essential building blocks of self leadership, and in so doing have begun to look for places of connection and overlap between the theoretical and practice assertions of self leadership and the journey of parent leaders from clienthood to leadership. However, self leadership does not fully convey theoretically this journey as expressed by parent leaders. For example, all of the parent leaders I have spoken with have mentioned at least one person that they identify as having walked with them on the early part of their journey, and in some cases held the vision for them until they could hold it for themselves. The centrality of relationships to the leadership emergence of these parent leaders in child welfare begs to be explored.

### **Relational Cultural Theory**

“It’s all about those relationships” (B. Lopez, personal communication, October 21, 2009)

Listening people into voice, into authenticity, into mutuality involves respect, deep understanding, and an appreciation of the forces that create isolation. This is at the heart of the healing connection. (Jordan, 2001, p. 102)

I have included relational cultural theory as another essential element in my exploration of the journey from clienthood to leadership. As B. Lopez suggests relationships are in some central way a nurturing soil from which her leadership emerged, leading herself first and now many others. Jordan’s (2001) description of the healing

connection provides a brief unpacking of what those relationships may consist of.

Relational cultural theory, like self leadership, may be an integral component of what or how a leader consciousness/being emerges and gets expressed among parent leaders, namely relationally or in connection with others.

During the women's movement, feminist writers began to challenge openly traditional psychological theories that misunderstood, misrepresented (i.e., pathologized) or neglected altogether the experiences of women (Baker Miller & Stiver, 1997). Traditional theory and models of practice within psychology emphasized healthy psychological functioning and development as movement towards increasing autonomy, independence and separation, and self-sufficiency "characterized by the capacity for logical, abstract thought, autonomous thinking, and separation of thought from emotion" (Jordan, 2001, p. 92). Deeply embedded cultural biases, e.g., Eurocentrism and scientism as well as gendered, racialized, and class based concepts, had largely gone unnoticed and unexamined within traditional theories in psychology (Walker, 2004b). Jean Baker Miller (1976) addressed these neglected areas within psychology in her groundbreaking work, *Towards a New Psychology for Women*, which centralized the experiences of women, as Gilligan (1982) had noted, not in comparison to male development as the normative standard, but rather seeking to understand the depth and possibility of humanity through women's experiences. Removing the male normative-female deficiency/deviance dichotomy, Baker Miller asserts:

Humanity has been held to a limited and distorted view of itself – from its interpretation of the most intimate of personal emotions to its grandest vision of human possibilities – precisely by virtue of its subordination of women. Until recently, "mankind's" understandings have been the only understandings generally available to us. As other perceptions arise – precisely those perceptions that men, because of their dominant position, could *not* perceive – the total vision

of human possibilities enlarges and is transformed... Women have played a specific role in a male-led society... They have been entwined with men in intimate and intense relationships, creating the milieu – the family – in which the human kind as we know it has been formed. Thus women's situation is a crucial key to understanding the psychological order. (Baker Miller, 1976, p. 1)

In challenging the hegemony of male psychology as the normative standard for human development, the Stone Center for relational-cultural theory (Baker Miller, 1976; Baker Miller & Stiver, 1997) emerged to address the misrepresentations of women's experiences within traditional psychology. Namely that, "women's sense of self and of worth is grounded in the ability to make and maintain relationships" rather than a movement towards separation and autonomy (Baker Miller, 2008, p. 369). It bears noting that relational-cultural theory (RCT) seeks not only to authentically understand and represent women's experience and development but men's as well (Jordan & Hartling, n.d.; Baker Miller, 2008).

**Core tenets of relational cultural theory.** Since its inception over thirty years ago, the term and organizing concepts have evolved from self-in-relation theory (Surrey, 1991), to relational theory (Baker Miller & Stiver, 1997), and most recently relational-cultural theory (Jordan & Walker, 2004; Walker, 2004a; Jordan & Hartling, n.d.). With its roots in psychotherapy, relational-cultural theory was developed to help understand women's tendency toward connection as a life-giving, organizing principle (Baker Miller, 1991). As a therapeutic intervention, relational-cultural models address barriers that keep women, and men, from engaging in relationships in a life-giving, growth-fostering manner, i.e., what creates and maintains disconnection and may lead to fundamental violations in one's ability to engage in mutually growth-fostering relationships and connections.

Comstock et al. (2008) have identified the following as core tenets of relational-cultural theory:

- People grow through and toward relationship throughout the life span.
- Movement toward mutuality rather than separation characterizes mature functioning.
- The ability to participate in increasingly complex and diversified relational networks characterizes psychological growth.
- Mutual empathy and mutual empowerment are at the core of growth-fostering relationships.
- Authenticity is necessary for real engagement in growth-fostering relationships.
- When people contribute to the development of growth-fostering relationships, they grow as a result of their participation in such relationships.

The goal of development is the realization of increased relational competence over the life span. As the term implies, relational-cultural theory takes seriously two primary elements in its explanation of women's development: (1) the primacy of connection, or relational growth (Jordan, Kaplan, Baker Miller, Stiver, & Surrey, 1991), and (2) the ever present, pervasive, but often unnoticed impact of culture on human connections and relationships (Baker Miller & Stiver, 1997). At base, RCT suggests that people develop through and toward relationships which occur within or is profoundly influenced by a nexus of cultural beliefs, values, and expectations that are often stratified according to dominant group norms (Walker & Baker Miller, 2004).



**Theoretical building blocks of Relational-Cultural Theory.** Relational-cultural theory as a therapeutic model suggests that “the primary source of suffering for most people is the experience of isolation and that healing occurs in growth-fostering connection. This model is built on an understanding of people that emphasizes a primary movement toward and yearning for connection in people’s lives” (Jordan, 2001, p. 95).

Embedded within the core assumptions of RCT is the notion that all relationships occur within a web of cultural and contextual realities that have profound impact on relationality and relational connections, disconnections, and violations individually and in the society overall (Jordan & Walker, 2004). Relational-cultural theory, in the very terminology, alerts us to an awareness of cultural influence on relationship with one’s self, with others, and to the larger contextual space in which one (all) exists. The keen focus of RCT is to notice and question cultural processes, i.e., power over models rather than empathic modes of relating, and structures, i.e., social power stratifications that privilege some while marginalizing others, in which relational connections occur and can become growth-fostering. RCT also examines individual and social barriers to the formation or maintenance of growth-fostering connections as well as repair of the inevitable disconnections that occur in human relationships throughout the life span (Walker, 2004a). The above elements outline the central assumptions and tenets of relational-cultural theory, however to deepen our understanding of the theory in action a closer examination of several implicit themes is necessary, i.e., empathy, mutuality, etc.

**Relational dynamics of connection, disconnection, and violation.** In relational-cultural theory connection implies a reaching out from a place of authenticity to acknowledge, and truly be with another in a full, honoring way that embraces the whole

of the another person rather than merely identifying with an aspect or categorization of them, i.e., their race, age, ethnicity, or other socially ascribed status like client, etc.

Connection within RCT is inherently mutual. Connection implies more than the uni-directional flow of reaching out but the reception of the reaching out that also includes a reaching back; a joining in the space of connection in which new possibilities can emerge. Said another way, RCT encompasses not only connection but also mutuality.

Mutuality is

affecting the other and being affected by the other; one extends oneself out to the other and is also receptive to the impact of the other. There is openness to influence, emotional availability, and a constantly changing pattern of responding to and affecting the other's state. There is both receptivity and active initiative toward the other. (Jordan as cited in Birrell & Freyd, 2006, p. 56)

Connection within RCT is this reaching out from behind one's own mask(s), as one *is*, to create and share a space of mutuality and empathy; not merely making oneself aware of what '*I* would feel in her shoes' but rather a deep openness to what '*she* feels in *her* shoes at this moment.' Hence, RCT is more than mutuality alone but also an empathy rich creative relational process in which "openness to change allows something new to happen, building on the different contributions of each person" (Surrey as cited in Baker Miller & Stiver, 1997, p. 43).

Baker Miller and Stiver have suggested that mutual empathy is the "great unsung human gift" (1997, p. 29) out of which mutual empowerment flows. RCT proposes that mutual empowerment, the ability to act within the relational connection and have an impact on another (Baker Miller & Stiver, 1997), naturally emerges within mutually empathic relationships. It is precisely in this space between, the mutual empathy space when inhabited by both or all authentically and fully present, in which new possibilities

for understanding one's own feelings and thoughts in the context of connection with another's thoughts and feelings emerges. The dynamic flow that reflects something more, something beyond 'me' that exists in the courageous space of mutuality and empathy results from this space between which creates what Baker Miller (1986) has called the growth-fostering connection.

RCT describes growth-fostering relationships as composed of the following five "good" things that define mutual empowerment in connection:

- (1) A sense of zest or well-being that comes from connecting with another person or other persons;
- (2) The ability and motivation to take action in the relationship as well as other situations;
- (3) Increased knowledge of oneself and the other person(s);
- (4) An increased sense of worth; and
- (5) A desire for more connections beyond the particular one. (Baker Miller & Stiver, 1997)

These five good things have been described as outcomes of growth-fostering relationships; the results of mutually empathic and empowering relationships (Jordan & Hartling, n.d.).

As important as connection is within RCT, there is also a necessary focus on disconnection. An understanding of disconnection is particularly salient given the pervasiveness and primacy of cultural values that stand in stark contrast to growth-fostering connections in our society (Baker Miller, 2008; Hartling & Sparks, 2008; Jordan, 2004a). Disconnections represent those instances in relationship or connection

when one misunderstands, injures, or violates another (Jordan, 2004c). Throughout the life span opportunities for disconnection abound. Empathic failings are a natural and inevitable part of relationship within the human family. Jordan (2001) identifies two types of disconnection: acute – when one is misunderstood or let down in a number of ways; chronic – when one begins to feel ineffectual and helpless in relationships leading to isolation, self-blame, and immobilization.

Experiences of disconnection can lead to the development of strategies of disconnection. When a person cannot represent oneself or one's feelings in relationship or is met with the empathic failure of another he or she may keep aspects of her or his authentic self out of the relationship to maintain the connection. RCT refers to this dynamic as the central relational paradox, and it will spawn the development of a variety of strategies to keep important, authentic parts of one's experience out of the relationship in an effort to maintain some form of relationship, even unhealthy ones (Hartling, Rosen, Walker, & Jordan, 2004). The paradox, which results from chronic disconnection, is that though the desire for connection is strong, the fear of the vulnerability necessary for authentic connections also intensifies. The individual is then caught between an intense desire for connection and the terror of it simultaneously (Jordan, 2001). This amputating of one's inner experience, or authentic being, from connection is not only present in a dyadic or familial relationships, but occurs at in the larger society as well.

At a societal level, people are forced by judgments, prejudice, and bias from more powerful others into inauthentic connection or are allowed to bring only certain parts of themselves into connection... Often they are silenced. This leaves many individuals and groups of people in states of chronic disconnection and marginalization. (Jordan, 2001, p. 96)

The significance of repeated experiences of empathic, growth-fostering connection or chronic disconnection, particularly early experiences, create relational images "...that contain expectations of being able to be who one is, of staying connected with self and other people, and of being able to have an effect on relationships" (Jordan, 2001, p. 95) or not. Relational images, then guide one's sense of worth, empowerment, self knowledge, and desire to engage other relationships. A subtle yet important point is that relational images though internally created are profoundly influenced by one's experience in the larger society in addition to significant familial relationships. RCT also seeks to explore how cultural stratification along various socially defined strata shapes the development of relationships and relational possibilities throughout the life span by incorporating the concept of controlling images from Hill Collins (1990); that is, how images of race, class, gender, or sexual orientation imposed by the dominant culture disempower and/or subordinate various groups in society (Jordan & Walker, 2004).

Connective disruptions need not be intentional, and can be repaired resulting in strengthened connections "...when the injured person can represent his or her needs and feelings to the other person and feels responded to – as if his or her feelings matter to the other person – he or she is empowered, feels relationally competent, and the relationship is strengthened" (Jordan, 2004b, p. 23).

**Relational Cultural Theory and parent leader journeys from clienthood to leadership.** Though RCT was developed within psychotherapy and psychology, there are several resonant themes that are helpful to the exploration of parent leader journeys from clienthood to leadership in child welfare systems reform by deepening our understanding of: (1) how the organizational context can function as a place of chronic

disconnection including the development of relational images and use of controlling images in the client-professional relationship, i.e., “once an addict always an addict” (K. Mays, personal communication, October 23, 2009); and (2) the nurturing affect of relational resilience and awareness within growth fostering connections. I have included excerpts taken from an interview with a parent leader in child welfare systems reform in the Northwest United States below as a way to demonstrate/apply how the conceptual themes of RCT might help us make sense of parent leader journeys from clienthood to collaborative leadership in child welfare systems reform.

**The organizational context as a place of chronic disconnection.** Hartling and Sparks (2008) suggest that the cultural influence of a separation-focused society results in most organizations operating according to standards that normalize separation, competition, independence, and self-sufficiency. Even in organizational environments that exist to provide social support, healing and well-being, self-in-separation norms inform long-standing approaches to how those supports are provided often resulting in relational disconnection; a sense of being missed, misunderstood, and/or just not gotten (Jordan, 2001). A relational-cultural approach foregrounds the nexus of marginalizing forces that seeks to critically analyze and transform “...systems of power, domination, subordination, and stratification that impede the health, growth, and development of all people” (Hartling & Sparks, 2008, p. 167). RCT, then, provides the necessary tools to see and interrupt mechanisms of oppression as they function in the therapeutic relationship as well as the larger society; the latter by looking beyond the individual’s circumstance but providing a framework through which the nexus of forces that surround, impact, and provide meaning for life choices.

Within child welfare, the helping relationship is fraught with disconnection(s) which often are multiplied exponentially by the larger social context in which the family and service provider exist, i.e., communities and neighborhoods disproportionately affected by poverty. A point of profound disconnection within child welfare is the courtroom. A mandated court appearance before a judge and a host of professionals, all there to decide the conditions under which or if a family can be reunified or if parental rights will be permanently terminated, can be a frightening experience filled with shame, anger, and a sense of hopelessness. As one parent recounted:

I went up for my visit, and they didn't bring my kids, and I think that's important for you to hear. He didn't bring my kids to the court ordered, one hour a week supervised visit... Do you know how discouraging that is to go and have your kids not come and have the same person ... tell you, "Your kids don't want to be with you. I'm not bringing them. I'm not going to make them be with you. They don't want to be with you." ...I went to my [court-ordered] visits every Friday, and [the social worker] didn't bring my kids for two months. (B. Lopez, personal communication, October 21, 2009)

In seeking to understand the journey from clienthood to leadership, relational-cultural theory provides another means for making sense of the organizational context of child welfare from a relational perspective that takes seriously the need for growth-fostering connections as an integral part of healthy human development generally but also considering the impact of trauma, loss, shame and silence, which are often a part of the child welfare experience for parents (Whipple & Zalenski, 2006). Even with the short excerpt above there are several places where disconnection occurs and is reinforced, pushing Lopez further and further to the margins resulting her silence and discouragement. Though in theory, having legal representation in a courtroom setting is intended to protect you, the relational impact of having someone who may have only known you for the three minutes prior to entering the courtroom compounded by the

other system professionals speaking for, about, and in some cases against you creates a deep chasm in which the parent, though present and surrounded by a veritable army, stands completely alone. In short, RCT helps us to further understand what birth parents experience in an organizational system that operates within a culture of disconnection. Another parent described her experience in court as if “standing there covered in labels; shame, guilt, loss, worthless, hopelessness” (L. Harris, personal communication, October 22, 2009).

**The nurturing effect of relational resilience and awareness within growth fostering connections.** As much as RCT restores a bridge of empathic understanding of experiences of disconnection, it also provides an inspiring image of what is possible in the “space between” (Baker Miller & Stiver, 1997). Without exception, every parent leader that I’ve observed or spoken with that has been a client within child welfare and is now a leader-partner in that systems reform and improvement efforts has mentioned at least one person that entered into this space between with them that resulted in an entirely new reality for her or him. Many parent leaders identified a clergyperson, their Alcoholics Anonymous or Narcotics Anonymous group. One parent identified a judge that served this purpose. This parent leader simply stated, “he believed in me” (K. Mays, personal communication, October 19, 2009). This statement, in its simplicity and elegance, embodies the power of growth-fostering connections even, or perhaps especially, in cultures of disconnection out of which a new life emerged. That is, having someone that can see beyond the innumerable categorizations and labels that become attached to parents as they move through the child welfare system, externally from others and internally from a diminished sense of worth, to the possibility of who that parent is as



a person into that space between very well may be a critical first step for journeying from clienthood to leadership.

Conceptual ideas and practices on the reworking or repairing of disconnections are particularly salient to the exploration of the journey of parent leaders in child welfare from clienthood to leadership. Within RCT the conscious restoration of connection becomes an important vehicle for relational resilience by improving relational competencies and strengths (Jordan, 2004c). That is, relational resilience represents the ability to participate in enlarging connections throughout life's experiences despite the inevitable disconnections and violations that occur (Hartling, 2008). Hartling proposes that an RCT inspired definition of resilience would be "the ability to connect, reconnect, and resist disconnection in response to hardships, adversities, trauma, and alienating social/cultural practices" (p. 56). This definition of relational resilience is particularly relevant in light of self leadership theory and practice as described above.

RCT provides a point of entry for understanding the child welfare systems context from the perspective of connection, disconnection, and violation (Baker Miller, 2008; Hartling & Sparks, 2008), which illuminates experiences of clienthood in child welfare in terms of pervasive and chronic disconnection. RCT also provides a means for understanding the impact of one's sense of effectiveness, or lack thereof, within relationships, i.e., ability to influence others positively in the myriad relationships that birth parents encounter within the child welfare context – the caseworker, the judge, service providers, their own children and family members, etc. It is precisely at this point that relational-cultural theory is such a powerful conceptual and theoretical tool for our purposes. The growth-fostering connection that yields increased vitality (zest); increased

ability to take action (empowerment); increased clarity (a clearer picture of one's self, the other person(s), and the relationship); increased sense of worth; a desire for continuing to build other growth-fostering relationships (Jordan & Hartling, n.d.); as well as the ability to consider the cultural context in which these relationships exist that characterize much of what I've observed with parent leaders across the country in my consulting work. Before proceeding forward there must be at least a mention of the proverbial elephant on the page – gender.

RCT was created to address gendered notions of “human development” that misunderstood and pathologized women's ways of being and relating (Baker Miller, 1986). Relational-cultural theory evolved out of the awareness of the impact of culture within our relationships, and like gendered notions culturally posited ideas about race also visit our relational worlds in profound ways.

In child welfare, gender (Brown, 2006; Swift, 1995), race (Cohen, 2003; McPhatter & Gattaway, 2003), and class (Zajac, 2008) dynamics are present and active within the organizational context. For example, though there is a current push toward father involvement and father inclusion in child welfare, the long held belief and practice is that mothers are primarily, if not singularly, responsible for the rearing of children (Hays, 1996) which often increases the scrutiny foisted upon mothers entering the child welfare system (Smith, 2008). While at the same time, these gendered ideals within the larger culture have placed unrealistic expectations on women, especially poor women of color, and in some ways rendered the mothers themselves invisible within the organizational system of child welfare (Brown, 2006; Johnson & Sullivan, 2008; Smith, 2006). Mother service recipients in child welfare always seem to be buried under layers

of labels and socially constructed meanings that maintain a dynamic that demands a constant proving of oneself against a white, middle-class normative standard that ignores embedded obstacles for some and hides certain privileges for others (Walker, 2004b; Zajac, 2008).

Indeed, women often become the sole focus on the child protection intervention (Scourfield, 2001) with some public child welfare agencies not even having systems in place to inquire about placement with the father or paternal family (Huebner, Werner, Hartwig, White, & Shewa, 2008). The racialized, gendered, class-defined are ubiquitous elements within child welfare, the question for compelling contribution of RCT to this dissertation study was how, then, did the racialized, gendered, class-defined ideas impact the birth parent leader self-concept and expression of leadership? I have provided further elaboration in the interpretation section, Chapter V.

### **Relational Concepts in the Leadership Literature**

Relational concepts are emerging perspectives in leadership studies (Clark, 2008; Pearce & Conger, 2003). Though there is not an agreed upon definition, I have included the following three related theoretical perspectives in this section to broaden the frame through which the parent journey from clienthood to leadership will be explored: shared leadership, relational leadership, and collaborative leadership. I have provided a brief review of the three theoretical concepts together in a single section, as opposed to providing an in-depth review of each separately, to maintain attention on and to the essential research focus: the transformative experience of coming to an awareness of one's leader self. Though a transformative experience is an inherently internal one it is important to consider the nuanced ways that context influences the inner experience.

Consequently, relational leadership concepts are included to illuminate the intersections between the internal terrain and the external context. Similar to the previous sections, I have provided a brief overview of the principal concepts and operative definitions, followed by a discussion of the essential themes and theoretical building blocks common across these leadership theories, and concluded with a discussion of the connection between the presented theoretical ideas and the parent leader journeys from clienthood to leadership.

**Shared leadership.** Pearce and Conger have defined shared leadership as “a dynamic, interactive influence process among individuals in groups for which the *objective is to lead one another* [emphasis added] to the achievement of group or organizational goals or both” (2003, p. 1). In conventional leadership paradigms, the focus remains on a leader-follower dichotomy that usually presumes a unilateral flow of influence, i.e., from the leader to the followers. Even leader-member exchange theories that account for the influence followers have on leader behavior, e.g., leaders must meet follower expectations or criteria at some level to elicit a followership, remain locked in dichotomous thought pattern that can’t see beyond the deeply embedded cultural notions of a single or small group of leader(s). Shared leadership, in contrast, shifts the focus from the leader to the activity and processes of leadership that can be shared throughout a social system (Pearce & Conger, 2003). Pearce and Conger note that the influence process is multidirectional, flowing laterally and vertically within the group or organization. Shared leadership provides a theoretical basis for understanding leadership as an activity that includes multiple actors in the social context, each with some capacity to influence the process of accomplishing agreed upon goals. Cox, Pearce, and Perry

further describe shared leadership as “... a dynamic exchange of *lateral influence* [emphasis added] among peers rather than simply relying on vertical, downward influence by an appointed leader” (2003, p. 4). Cox, Pearce, and Perry (2003) offer this description of shared leadership based on the organizational context of new product development organizations and teas, which begs the obvious question: do these ideas hold any relevance in a child welfare context where child safety is top priority versus gaining more market share? Beyond that, does the shared leadership concept hold up in light of my research question?

Shared leadership concepts are gaining considerable momentum within child welfare (see for example, the burgeoning literature on Family Group Decision Making in Merkel-Holguin, 2003). In terms of the current study, shared leadership concepts offer a compelling explanation of the context that would nurture mechanisms of lateral influence in child welfare systems. For example, a public defender working closely with parent leader group in the Northwest United States noted that parent leaders were so effective precisely because they were not a part of the traditional power structure, and could navigate around longstanding and entrenched adversarial history between agencies and the assigned representatives. He felt parent leaders “could effectively shift and maintain the focus of all the system partners on their collective goal” which was to inform and educate parents about the child welfare system and what they needed to do to be reunified with their children (confidential participant, personal communication, October, 20, 2009). He felt very strongly that this was something that the parent leaders were uniquely qualified and capable of doing because they didn’t have the organizational baggage. This

example demonstrates the dynamic lateral influence that Cox, Pearce, and Perry (2003) describe above.

**Relational leadership.** Relational perspectives represent relatively new areas of study in the leadership literature (Uhl-Bien, 2006). One of the central features of relational theories of leadership is the emphasis on the processes that constitute leadership within the social context. As such, relational perspectives in the leadership literature draw considerably from social constructivism to reframe and expand conventional ideas about leadership by emphasizing the ways in which the actors within a social context construct leadership in everyday interaction, i.e., conversation, meaning-making, etc. (Cunliffe & Eriksen, 2009; Drath, 2001; Hosking & Bouwen, 2000; Perrault, 2005; Uhl-Bien, 2006). Discourse and language are central areas of focus within relational perspectives. Cunliffe and Eriksen (2009) elaborate the vital connection between social constructivist thinking and relational leadership.

Guided by the assertion that we are actively involved in creating and maintaining our social and organizational experiences, ... language is constitutive in this process: it doesn't *describe* the world, it *shapes* how we see, make meanings in, act and experience our world. In sum, language ourselves and our world exist in a mutual relationship in which meaning emerge and differ in different social, historical, and linguistic settings. This ontology... suggests that organizational members actively create their organizational world through their relationships with one another; that communication and what we say is important, and that the way we each experience our world differs. (p. 17)

Whereas shared leadership establishes conceptually the distributed nature of leadership, relational concepts highlight the processes and vehicles by which leadership comes into being, becomes 'real' to the various social actors in a given context. Said another way, relational perspectives foreground the multiple interpretative intersections that simultaneously reflect and inform social realities through discourse. Rather than a

search for an objective out-there reality, social constructivist guided relational perspectives suggest that it is in the discursive interchanges, the ‘what’s being talked about’, that meaning is created. Consequently, relational leadership, as a theoretical lens, makes visible the meaning-making processes and interpretative interchanges through which leadership comes into being as well as shapes the context in which it emerged. The relational leadership lens invites a widened view on the phenomenon of leadership; one that suggests the relational and social nature of human experience and sees organizational contexts as dynamic systems of human interactions and conversations (Cunliffe, 2008). In describing relational leadership Cunliffe and Eriksen (2009) assert that “relational leadership is not a theory or a model about leadership, nor it is about attributes or skills; it offers a way of thinking about who leaders are and how they relate with others and their surroundings” (p. 19).

An emphasis on discourse is of particular relevance to this study in that the power, the life, in it is to be found in the stories, the narrative accounts of the parent leaders. The relational leadership theoretical lens brings into focus the power of story to influence action in profound ways. As Gergen suggests “if we wish to change patterns of action one significant means of doing so is through altering forms of discourse – the way events are described, explained or interpreted” (2005, p. 115). A theoretical lens that takes seriously the connections between language and action is a crucial for understanding the transformative journey from clienthood to leadership; both being socially constructed through discourse. The key point is that parent leader contributions to the living discourse, the living language in organizational practice, is an active and transformative presence that not only impacts the individual sense of self but influences

the contextual reality of the system as well. This ontological shift focuses our attention not on the individual parent leader per se but suggests that the emergence of the leader-consciousness/being results from the meaning(s) derived in and from relationships with others.

**Collaborative leadership.** As a way to extend the conversation about shared leadership and other relational concepts in the leadership literature I conclude this section with a brief discussion of collaborative leadership. As Bruner (1991) aptly points out, collaboration is not the appropriate ‘fit’ for every group, problem, or situation. However, for the purposes of understanding the transformative journey of parent leaders from clienthood to leadership collaborative leadership as a distinct, yet related, theoretical frame is compelling.

The dynamic and shared nature of leadership within a collaborative context flattens and expands the influential, interactive, and creative processes that constitute leadership. As discussed previously, these processes are fundamentally contextual. The question that collaborative leadership theories address relates to the intention of creating cultural qualities, i.e., values, beliefs, practices, procedures, philosophy, etc., that saturate the context in which leadership is created. In other words, what are the conscious and intentional ways in which we can collectively create and maintain a culture of collaboration (Bushe, 2006)?

To deepen our understanding of collaborative leadership rightly begins with a clear definition of collaboration. Chrislip and Larson offer the following definition of collaboration – “a mutually beneficial relationship between two or more parties who work toward common goals by sharing responsibility, authority, and accountability for



achieving results” (1994, p. 5). Collaboration, they suggest, is distinct from communication (sharing knowledge and information) and more than coordination or cooperation (helping various parties to achieve individual goals). “The purpose of collaboration is to create a shared vision and joint strategies to address concerns that go beyond the purview of any particular party” (Chrislip & Larson, 1994, p. 5), group, or stakeholder; indeed, within a culture of collaboration these categorizations take on a different meaning. Collaboration, which means to work together, works precisely because it engages diverse stakeholders as peers to facilitate dialogue, mutual learning, shared responsibility, *and* action (Chrislip, 2002). Within a culture of collaboration as described here stakeholders represent

those people who are responsible for problems or issues, those who are affected by them, those whose perspectives or knowledge(s) are needed to develop good solutions or strategies, and those who have the power and resources to block or implement solutions and strategies...those people who, if they were to reach agreement, could act together to achieve real results. (Chrislip & Larson, 1994, p. 65)

In a collaborative context, the stakeholders comprise the constituency for change that demands a truly diverse representation of all impacted by the issue at hand to create lasting change. Collaborative groups then are quite naturally places of considerable conflict and tension. Indeed, inherent in the concepts about collaboration as presented by Chrislip and Larson (1994) and Chrislip (2002) is the need for multiple stakeholder groups to build facilitative capacity within the collaborative context. In reality, such diversity and tension make collaborative groups incredibly fragile. As Horwarth and Morrison (2007) caution collaborative groups are fraught with opportunities for power imbalances between agency professionals and parents and disconnection (Hartling & Sparks, 2008) which can threaten and often corrupt the collaborative values that could

create an environment of mutuality, authenticity, and shared accountability. Within the social sector, collaboration has become the reigning theme of the day. Public and private grantmakers increasingly require collaborative involvement of multiple stakeholders to receive funding. Likewise, a seemingly ever-shrinking pool of resources for social programs and initiatives has spawned non-traditional ‘partnerships’ and long-standing partnerships into previously undisturbed power-sharing terrain.

These circumstances have conspired to create timely opportunities for the leadership of parents. I do not mean to imply that the mere presence of the rhetoric of collaboration or even the presence of multiple stakeholders, including parent leaders, automatically creates a culture of collaboration. However, I do mean to make the point that the convergence of multiple circumstances that bring parents to collaborative decision making tables to participate in the leadership processes of bringing forth new possibilities and realities, for example, statewide Child and Family Service Reviews, should not be overlooked as an important contributor to the transformative journey from clienthood to leadership.

Collaborative leadership reflects an intentional and shared commitment to mutuality, reciprocity, and inclusion in the process of bringing forth new realities together. Further, I believe that the presence of such collaborative contexts are central features in the parent leadership becoming precisely because it is the place where this leader-being is enacted, in the interactions and dialogue, even or maybe especially the heated difficult exchanges where shared meaning seems most elusive, that a new leader sense of self can be fully realized; in community. For example, I was facilitating an event for a multi-stakeholder group, public agencies, community-based organizations,

and community volunteers, that was concluding a six-year grant and one parent leader said, through her tears, “I never thought I would be doing all of this. I have never in my life felt that I had so many people in my corner” (confidential participant, personal communication, September 16, 2009). Though collaborative groups are fragile and often contentious, where there is a shared commitment to keep coming back to the table to work through the mire of misunderstanding to create a common good, a relational context emerges that can nurture not only a deeper awareness of shared concerns but an new sense of self also.

**Relational leadership concepts and parent leader journeys from clienthood to leadership.** I have presented three core relational leadership concepts that, taken together, provide a compelling frame through which to re-consider the transformative journey of parent leaders from clienthood to parent leadership in child welfare systems change. The relational leadership concepts presented above provide a philosophical grounding and theoretical language for articulating the journey from clienthood to parent leadership. Shared leadership, for example, sets a clear sight on the process of leadership that extends the self leadership realm into a collective context; going from influencing one’s self to influencing others. Relational leadership pushes further down into the contextual milieu by illuminating the social constructed meaning- and reality-making processes through which shared understanding and mutual influence emerge.

Collaborative leadership contextualizes our discussion in a slightly different way with a focus on how an intentional creation of a culture of collaboration becomes in itself a vehicle or space in which parent leadership is acknowledged, defined, spoken about, seen, and felt. The collaborative context focused on real change, collaborative calls forth

values and other cultural elements that simultaneously reflect and call forth the leadership of parents. Taken together, these theoretical concepts provide an alternate view of leadership effectively reaches past previous heroic leader, leader-follower understandings to bring into clear focus relational processes of leadership itself in which all social actors can be leader partners in leadership. In this way, relational perspectives on leadership provide a theoretical home for the exploration of the transformative journey from clienthood to leadership.

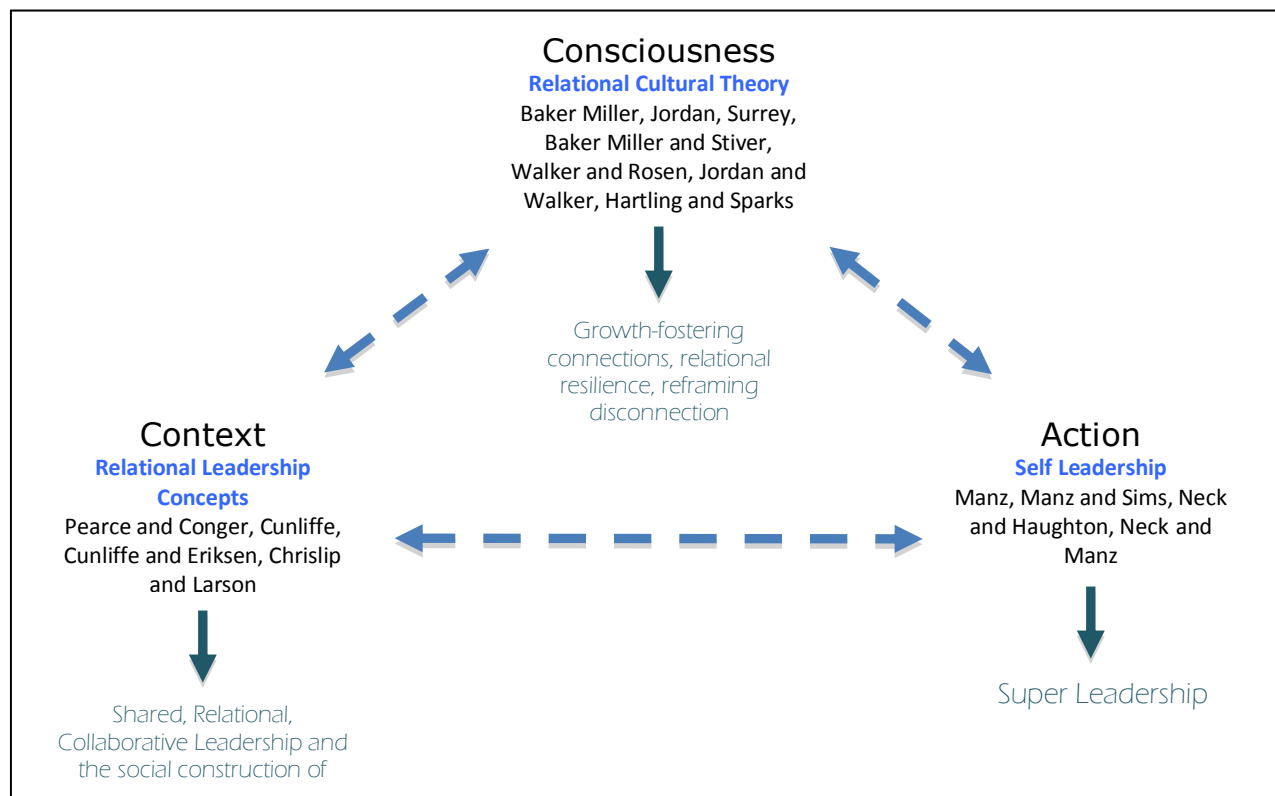
### **Chapter Summary**

I have reviewed the relevant literature with the intention of identifying conceptual ideas that would deepen my understanding of the transformative journey from clienthood within child welfare to being a leader partner in child welfare system reform from the perspective of parent leaders. This approach was in keeping with the exploratory and social constructivist nature of the study in which I used the literature as one of the vehicles to illuminate and make sense of the parent leader experiences from a conceptual standpoint.

The review of the literature has brought into sharper focus the conceptual frames presented in Chapter I that have provided an initial starting point for understanding of what theoretically may inform or illuminate the transformative journey from clienthood to leadership among birth parent leaders (Figure 2.1). Using the same basic frame that represents the complex interaction between consciousness, context, and action, I have filled theoretical concepts (and requisite authors) from the literature to illustrate with greater specificity and clarity what these elements are and how I have interpreted them as a result of the review of the literature. This graphic (Figure 2.2) provides a shorthand

picture of reflections on my professional practitioner perspective, preliminary discussions with birth parent leaders about their experiences, and now a comprehensive review of the literature. Building on the learning of the literature review, Chapter III describes the rationale, methodological parameters, and the specific strategies that I used to gather and interpret the narratives shared by birth parent leader participants.

**Figure 2.2. Conceptual Framework for Understanding the Transformative Journey from Client to Birth Parent Leader**



### **Chapter III: Methodology**

Two questions have guided the research I conducted for this dissertation:

- (1) What does the transformative journey from clienthood to leadership look like as expressed in the life experiences of birth parent leaders in child welfare?
- (2) What does birth parent leadership in child welfare require on the part of the birth parent leader and the child welfare organization and system?

This chapter presents the methodology and methods I have used to answer these questions. In it, I first discuss my philosophical grounding, then present portraiture as a research methodology, and finally describe the data collection and analysis processes I used. I conclude the chapter with a discussion of the relevant ethical considerations.

#### **Philosophical Positionality: Where I Stand**

In acknowledging that previous efforts to develop a critical social science have largely failed to contribute to anti-oppressive practice or policy making, we must ask different questions about how to construct and conduct our inquiries. (Brown & Strega, 2005, p. 12)

The philosophical grounding for my dissertation research is situated squarely within a social constructivist paradigm. Social constructivism in research is built on fundamental assumption that individuals seek meaning in the world in which they live and that meaning, as such, is inter-subjective. That is, meaning is not only varied, but is fundamentally shaped by social interaction with one's life-world. Social constructivism suggests that rather than one absolute truth, multiple realities are shaped by and shape the context in which inquiry takes place. Thus, truth and meaning are evolving and dynamic social processes and products. "The goal of research [in constructivism], then, is to rely as much as possible on the participants' views of the situation being studied. The questions become broad and general so that the participants can construct the meaning of

a situation, a meaning typically forged in discussions or interactions with other persons” (Creswell, 2003, p. 8).

The social constructivist paradigm is especially important and relevant to my study because of its emphasis and reliance on participant voice in the construction of meaning. My approach naturally lends itself to strategies of inquiry that prioritize mutual and shared meaning-making throughout the process of research (Creswell, 2003). With social constructivism representing the philosophical roots of my dissertation research, the soil in which the root is nurtured is a transformative, activist framework that explicitly sets forth a social justice agenda.

Given this social justice agenda, and consistent with my values and beliefs, I have adopted Mertens (2009) criteria for judging the quality of my research (Figure 3.1). Rather than assuming a neutral, objective stance, research within a social justice paradigm requires the researcher to bring her whole self to the research process and maintain a critical attentiveness to one’s biases, privilege, and other contextual influences which guide, consciously or unconsciously, the process and interpretation of research (Denzin & Lincoln, 2008; Mertens, 2009).

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### **Figure 3.1. Criteria for Quality in Research and Evaluation**

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Authenticity	<p>The researcher should present a fair and balanced view of all perspectives, values, and beliefs (Lincoln &amp; Guba as cited in Mertens, 2009, p. 39). Among the criteria identified by Lincoln and Guba to judge the authenticity of investigations are the following:</p> <ul style="list-style-type: none"> <li>■ <i>Fairness</i>: the extent to which different constructions and their underlying value structures are solicited and honored throughout the process of inquiry and research.</li> <li>■ <i>Ontological authenticity</i>: the degree to which individual/group’s conscious experience of the world became more informed, was transformed, or expanded as a result of the research experience.</li> <li>■ <i>Catalytic experience</i>: the extent to which action is stimulated by the inquiry process.</li> </ul>
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Positionality or Standpoint Epistemology	The researcher should acknowledge that all texts are incomplete and represent specific positions. Texts cannot claim to contain all universal truth because all knowledge is contextual; therefore, the researcher must acknowledge the context of the research.
Community	The researcher should know the community well enough to link the research results to positive action within that community.
Attention to Voice	The researcher must seek out those who are silent and must involve those who are marginalized.
Critical Reflexivity	The researcher must be able to enter into a high level of awareness that understands the psychological state of others to uncover dialectical relationships (Lincoln & Guba as cited in Mertens, 2009, p. 40). The researcher needs to have a heightened degree of self-awareness for personal transformation and critical subjectivity.
Reciprocity	The researcher needs to demonstrate that a method of study was used that allowed the researcher to develop a sense of trust and mutuality with the participants (Lincoln & Guba as cited in Mertens, 2009, p. 40).
Sharing the Perquisites of Privilege	The researcher should be prepared to share in the royalties of books other publications that result from the research. "Lincoln (1995) says: We owe a debt to the persons whose lives we portray" (Lincoln & Guba as cited in Mertens, 2009, p. 40).

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Within this paradigm, knowing one's biases and assumptions is not enough. The act of making one's biases and privileges explicit establishes a "covenant" between the researcher and the community members with whom the inquiry, meaning making, and sharing of information will take place. Hence, when I planned the study, I adopted the term "co-researcher" to describe the role I envisioned for participants. But through the process of observing participants at work and given a fuller understanding of logistical realities, I realized that participants simply could not be expected to "co-create" the study. This did not, however, absolve me of the responsibility of transparency and respectful engagement.

### **The Portraiture Methodology**

For this study, I have used the portraiture method developed by Sara Lawrence Lightfoot. According to Lawrence-Lightfoot, "portraiture is a method of qualitative



research that blurs the boundaries of aesthetics and empiricism in an effort to capture the complexity, dynamics, and subtlety of human experience and organizational life"

(Lawrence–Lightfoot & Hoffmann Davis, 1997, p. xv). A research portraitist:

- (1) views human experience as being framed and shaped by context, e.g., the "setting—physical, geographic, temporal, historical, cultural, aesthetic—within which the action takes place" (Lawrence-Lightfoot & Hoffmann Davis, 1997, p. 41);
- (2) recognizes that her voice as the researcher is "in the assumptions, preoccupations, and framework she brings to the inquiry; in the questions she asks; in the data she gathers; in the choice of the stories she tells; in the language, cadence, and rhythm of her narrative" (Lawrence-Lightfoot & Hoffmann Davis, 1997, p. 85);
- (3) builds productive and benign relationships with her subjects as she constructs, shapes, and draws portraits;
- (4) develops emergent themes through an iterative and generative process of "bring[ing] interpretive insight, analytic scrutiny, and aesthetic order to the collection of data" (Lawrence-Lightfoot & Hoffmann Davis, 1997, p. 185); and
- (5) then brings all these elements together to form part of an aesthetic whole that informs and inspires, documents and transforms, and speaks to the heart and the head.

Portraiture is methodologically fitting given the purpose of the study, the research questions, and my own positionality and biases as a researcher. This is a narrative

methodology in that the development of their portraits will require parent leaders to look deeply into their experiences as both clients of the child welfare system and collaborative leaders in child welfare systems change and then construct narrative accounts of their journeys. The re-telling of parent leader stories requires a method that can capture and reflect back the nuances of the narrative from the perspective of the teller and can include contextual influences and interruptions that flow in and through the life story as conveyed in written and oral accounts.

### **Selecting Research Participants**

Understanding the experiential journey from clienthood to leadership required that research participants have walked in both worlds, formerly as service recipients in child welfare and now as leaders in child welfare. To the end, I used the following criteria to identify potential participants:

- *Involvement with the child welfare system:* participants must have had an individual case with a child welfare agency that had been closed for at least two years.
- *Current leadership role:* participants had to be actively engaged in child welfare system change activities locally or nationally for at least twelve months.
- *Age:* participants had to be over twenty-five years of age.

In addition to meeting these life experience criteria, participants had to be willing to participate in the several rounds of inquiry described in the next section.

Given my consulting work with child welfare systems implementing systems change initiatives, I was able to use the above criteria to identify a preliminary list of

communities to participate that included: the Washington's Statewide Parent Advisory Council; Contra Costa County's Partnering for Permanency program; and the Kansas Family Advisory Network.

To identify the actual study participants, I made contact with ten parent leaders and provided them with the orientation materials found in Appendices A and B) and the reflective exercises found in Appendices E, F, and G). In cases where a program employed parent leaders engaged in child welfare systems change as a part of their job function, I contacted the program coordinator or supervisor and informed them about the study. I asked the program coordinator to provide contact information for potential parent leaders in their program; copies of program materials; and whenever possible, allow my participation in the daily operations of the program (i.e., supervisory meetings, staff meetings, community outreach events, training and other professional development activities offered by the program, even a desk in the office).

It is important to point out that the program coordinator essentially served as my sponsor. As an outsider, a researcher outsider especially, it was important that I establish a respectful and reciprocal relationship with the program coordinator as they literally served as my guide in the cultural context of the program. The importance of this relational work cannot be overstated and should not be undervalued.

Once on site, I met with the parent leaders or program coordinators to review the research activities schedule and begin learning about parent leader work in child welfare systems change.

Out of the eleven potential participants that I identified, nine birth parent leaders ultimately participated in the study: six in the pilot study and all the participants from the

pilot study plus an additional three in the dissertation research. Two participants are from Kansas; one each from Seattle, Vancouver, and Everett, Washington; and three from Martinez, California. Eight of the nine participants are women; five are Caucasian; one are Latino; and three are African-American. Two of the nine are employed by public child welfare agencies as full-time employees of the county or State; one is a full-time employee of a service provider organization; three are full-time employees of a service provider agency with their positions funded by a county child welfare agency contract; and two are employed outside of child welfare altogether. For all nine participants substance abuse was the primary reason they entered the child welfare system for services. The time between the closure of their case and when they began their working with the child welfare was less than a month to ten years. The age range of the participants was 31 - 50 years of age.

Two birth parents did not participate in the study. One had encountered significant personal hardship at the initiation of the study. After multiple conversations, I did not feel it appropriate to include this parent leader in the study during this time of personal crisis. The second birth parent was not included in the study after I discovered that the parent leader did not meet all the criteria for participation in the study. Consequently, the findings of this dissertation research are based on nine participants that met all the criteria for participation in the study.

### **Information Gathering Tools and Processes**

**The pilot study.** Between August and October, 2009, I conducted a two-stage pilot study with two birth parent leaders in Kansas to:

- (1) test the goodness of fit of the portraiture method to the study's intended goals;

- (2) assess the effectiveness of the information gathering tools and processes to illuminate and cull out essential elements of the transformative journey from clienthood to birth parent leadership; and
- (3) provide a field of practice for myself as a novice portraitist.

In addition to assessing the effectiveness of the implements, the pilot was an opportunity for me to consider the match, or mis-match, between me and the portraiture method. As a novice portraitist, I needed a way to assess whether this method was a good match for me as the research facilitator and lead researcher. Though I intended the pilot study to help me assess the effectiveness of the tools and processes, several important themes emerged during the pilot study and are presented in Chapter IV.

**The full study.** In keeping with portraiture methodology, I used several tools to gather the information needed to construct portraits, including:

- a biographical questionnaire (Appendix C): The answers to these questions provided a general entry point into the life story of the parent leader. The questionnaire asked who they are, where they reside, how they are currently involved in child welfare systems change work, where they do their work (i.e., a local child welfare agency or on a national level).
- a Past as Prologue Exercise (Appendix D): Conducted before the first on-site interview, the Past as Prologue exercise guided co-researchers through their life experiences with the child welfare system and enabled them to recognize the leadership and transformative learning experiences that had taken place along the way.

- an individual interview protocol (Appendix F): Used during on-site interviews conducted in March 2010, the individual interview protocol was based on the research questions with probes included for each question. I then examined the interview texts, looking for common themes and used those themes as the basis for the focus group questions and probes.
- a Personal/Leader Vision Exercise (Appendix E): This exercise helped co-researchers make an explicit link between their life experience and collaborative leadership. It gave parent leaders an opportunity first to respond to the questions individually and then to share the results collectively. I, in turn, used the common themes that emerged during the focus group discussion.
- a Focus Group Interview Protocol (Appendix G): For the on-site focus group, I developed questions and probes drawn directly from the individual interviews, Past as Prologue exercise, and the Personal/Leaders Vision exercise.

My intent in using each of these tools was to reveal, from varying perspectives, the transformative journey of the birth parent leaders through the use of repetition as an intentional exploratory device. Consequently, I incorporated essentially the same questions in multiple formats, i.e., biographical questionnaire, reflective exercises, interview protocol, and focus group. I had hoped that creating multiple vehicles for reflection would accomplish two ends:

- (4) to create familiarity and safety as the birth parent leaders allowed me, a stranger, into reflections on their life histories and their lives in motion; and

(5) to facilitate a peeling back of memory and experience that could enable the essence of their transformative experience to emerge in the process of inquiry and reflection.

Four of the nine participants did not complete the biographical questionnaire and written reflective exercises. In the end, five of the nine birth parent leader participants completed the reflective exercises, were interviewed, and participated in a focus group. It is important to note that though the nine participants did not complete all the exercises, this did not disqualify anyone from the study. Rather, what I found as the lead researcher was that though I hoped this multi-faceted approach would create layers of reflection with the participants the multiple and varied information gathering vehicles were simply not feasible for the very busy lives of the birth parent leader participants in this study. Further, I found that the number of tools I constructed for the study confound the central purpose and objective of the study in the pages of paper. I eventually discovered that the most important information-gathering vehicles I had at my disposal were the in-depth interviews, time spent with the birth parent leaders, and transparency about the research process.

I audio and digitally (via camcorder) recorded all interviews digitally for audio and video playback and sent the audio tapes to a third party service for transcription. I sent the draft transcriptions to co-researchers to check for accuracy. The video recordings allowed me to literally replay not just the voice but body language and environmental cues within the interviews that I would have likely overlooked or missed otherwise. I audio, and where possible, digitally recorded all focus groups.

In addition, I reviewed written and electronic or digital materials provided by parent leaders and shadowed the parent leaders over several days to gain a clear sense of the context in which the parent leaders work and lead.

I also maintained a researcher reflective journal to document my own learning process and alignment with relational commitments as outlined in chapter 1 (see the Criteria by which I hope to be judged section) as the study unfolds and progresses.

### **Ethical Considerations**

In accordance with Antioch University's Institutional Review Board procedures that require the informed consent of research participants in social research, there are specific considerations that I have addressed or will address in the course of inquiry, interpretation, and dissemination of the study.

**Emotional self-care.** The nature of inquiry might have been traumatic for some participants as they reflected on past experiences. Hence, I provided a list of therapists in each area and asked that participants inform their support network of their participation in the study, e.g., AA/NA sponsors, clinical supervisors, clergyperson, family or friends, about their participation in the study and that they might need a listening ear or supportive shoulder during or after their participation in the project. As I learned from participants, however, they tell their stories frequently "as part of our recovery" (Mary Lopez) and can avail themselves of a number of existing support mechanisms.

**Confidentiality.** Participants had the choice of either identifying themselves by name in the study or selecting a pseudonym. Participant confidentiality has been of the utmost importance throughout the study, from reflections on past experiences and implications and recommendations to other child welfare system partners. Also, the



portraits will hopefully be widely shared, and as such it was imperative that parent leaders be made aware of and prepared for potential feedback from the publication and distribution of the details of their lives in the form of leader portraits. Confidentiality was also crucial given their current involvement as child welfare systems change participants. Their comments could be interpreted as hostile to the agency or agency personnel, and could jeopardize their continued participation in child welfare systems change activities in the local or state child welfare agency. I, therefore, discussed these risks in detail with all participants prior to their participation.

**Honoring the covenant.** Pursuant to Lincoln's guidance (as cited in Mertens, 2009), if presentations or additional publications are crafted from this research, they will be co-authored with research participants so as to maintain the relationship of trust and collaboration between myself and the research participants. This act of collaboration also honors the most fundamental beliefs of the social justice/transformational paradigm: the one who has lived the experience expressed in the narrative is its owner, not the one who is primarily responsible for writing, analyzing, and sharing the results. It is of utmost importance that parent leaders maintain ownership and control over their stories. As one parent leader stated, "...it's like being allowed in someone's bedroom. These are experiences that I went through; this is my story. I would be all over anybody with both feet who tried to tell my story without my permission" (L. Harris, personal communication, October 22, 2009).

## **Chapter Summary**

In this chapter, I have "outed" my researcher biases and beliefs about how research should be conducted, for what purposes, and with/by whom. Beyond that, I

have also identified where my research is situated within the broader philosophy of science and inquiry and described the methodology I used. I have provided an overview of the types of information gathering tools I used; and have briefly described the intended purpose for each tool, the selection criteria for participants, the processes that guided the information gathering and shared interpretation work in the dissertation. In the last section, I discussed the ethical considerations involved in the research.

## **Chapter IV: Birth Parents as Leaders in Child Welfare**

In this chapter, I present the transformative journey from clienthood to leadership as illustrated by five narrative portraits and four sketches of birth parent leaders. I also include a summary of the virtual roundtable I convened for two purposes:

- (1) to bring birth parent leader participants together to discuss their recommendations for birth parent leadership and
- (2) to give them an opportunity to share what they hoped others would take from the stories of their journeys.

I began the study with an idea that birth parent leadership was a confluence of experiences between the birth parent's ability to heal and integrate the debilitating emotions that accompanied having one's children placed into foster care, acquire new skills and a sense of self-empowerment, and opportunity for the expression of one's sense of purpose. The narrative portrayals revealed as much about the intersection of personal transformation and leadership emergence as the importance of the relational context in which the leadership of birth parents is expressed. Ultimately, these portraits illustrate the terrain of a transformative journey between despair and hopelessness to a life of wholeness, fulfillment, and purpose.

### **The Essential Themes**

Through analysis of the materials gathered during the study, I identified nine dimensions or themes that can be found within the portraits and narratives of all of the birth parent leaders. They are:

- The Bridge Builder: the ability to reach out and bring diverse constituencies, multiple agencies, and professionals together around those things that will help families reunify once they enter the child welfare system.
- Warrior Spirit: the ability to fight multiple battles along the transformative journey with a spirit of optimism and the willingness to see opportunities in the midst of struggle.
- Authenticity: the ability have a laser-like focus on the desired outcome, despite obstacles and setbacks, while taking responsibility for the "real" in oneself and others.
- Accountability: the ability to be accountable for one's own actions and to call others to account, gently, with humility and an intense commitment to helping others.
- Compassion: the ability to catch people warmly and lovingly when they fall and to help them mend their broken selves.
- Walking by Faith: the ability to take risks and to tolerate uncertainly because of a deep faith both in a higher power and in one's potential.
- Voice: the ability to articulate the birth parent perspective and to use one's voice to educate professionals on "reality" rather than theory or policy.
- Integration: the ability to open up, take in, and be transformed by the experiences on both sides of the fence--caseworker and client.
- Inspiration: the ability to use one's own journey to arouse and motivate change in others.

The sections that follow tell the stories of the individuals who have cleared their own path on this transformative journey.

### **Five Portraits of Birth Parent Leaders**

**Debbie Conway: The bridge builder.** Debbie Conway's journey from clienthood to leadership is a powerful example of the spirit and essence of bridge building and collaboration. Her ability to reach out and bring together diverse constituencies around those things that will help families reunify once they enter the child welfare system is woven throughout her work and leadership. Debbie's own history as a client within child welfare as well as her education in chemical dependency treatment brought her into contact with numerous agencies. She now draws on those experiences and connections to help other birth parents navigate the child welfare system towards reunification as well as inform and inspire other system professionals by representing the voice and perspective of birth parents. Her work is distinguished by an ability to move between and among systems and organizational cultures translating one to another, building bridges between the multiple agencies and professionals that comprise the child welfare system.

***Waking up.*** Debra "Debbie" Conway began using alcohol at age eight. This began a twenty-five year fight with addiction. July 27, 2003 marks a significant victory for Debbie: it is the day she began a life of sobriety. This was the necessary first step on Debbie's thousand-mile journey from clienthood to leadership. The magnitude of her transformative first steps becomes clear as Debbie describes her decades-long struggle with addiction. Embracing sobriety was in some regards a leap of faith--faith that she

could build a new life for herself without drugs and alcohol and also be a healthy Mom for her children.

In our conversations about her transformative journey, Debbie describes two experiences that facilitated her initial movement towards transformation and leadership:

(1) the moment of clarity that came as a result of a methamphetamine induced overdose and

(2) the events that occurred in treatment on her 40<sup>th</sup> birthday.

In the middle of in-patient treatment, I turned 40 years old. I received pictures of my kids on my birthday.... I got to talk to them. I received ... lab results that I was [Hepatitis] C free and HIV free, which was important considering the realm I had just come from. And, on that same day, I also received my termination [of parental rights] papers in the mail....

These events stand out almost like historical markers that have been erected to serve as torches of inspiration for others that find themselves on this dark road. In her birth parent advocacy work, Debbie uses her life experiences to provide strength and hope to other birth parents in the system. She says confidently, "that's my specialty... because that's where I come from."

With the drug haze lifted, and the behaviors that facilitated Debbie's drug abuse in clear view, she began the work of rebuilding a life for herself and family without substances. One year from her clean date, July 27, 2004, her dependency case was dismissed, and her children returned home. This solid foundation of stability became a launching pad for Debbie to learn about herself, her desires, skills, and abilities and to decide what she wanted to do with her life with the power of new choices and possibilities. Pursuing an education played a major role in Debbie's transformative journey, serving as the doorway to a new world and helping her define her place in it.

Education was the catalyst for me that kicked me from this side over to this one. It gave me the empowerment, the skills... and then to be honest with you, I thought I'd fried some brain cells. [When] I was able to take some classes and get pretty good grades, that was it. I became on a quest for self-knowledge, really. I wanted to know why and check things out. I had... a clean slate.

I am pleasantly surprised when Debbie also mentions the powerful impact of the "enrichment stuff" on her educational process. She credits the "enrichment stuff" with inspiring this major life transformation.

It was the whole looking at art, the beauty of art, the different Portland galleries and me just seeing a whole other world that I actually couldn't be a part of before because I was in this hole [of addiction].... Just experiencing different forms of art and looking at the history behind it, I ... felt alive.... [I]t wasn't necessarily the art itself: it was the filling my mind with beautiful stuff and that was powerful.... I saw everything in a different light. I took the time to see outside my block, my neighborhood, and myself and see the world and actually realized I could be a part of it.

These experiences were necessary precursors for Debbie to recognize that she could be a part of, and contribute to, a whole new world. Soon after Debbie's case was closed, she began to get invitations to share her story at the treatment centers and programs that had helped her along her road to recovery and reunification with her family. Sharing her story with others was an important way for Debbie to give back, but she also used it as an opportunity to further what had become her personal mission of being the "best chemical dependency counselor [she] could be." Consequently, Debbie used these speaking engagements to identify resources other birth parents, particularly moms in substance abuse treatment with children in foster care, needed to stay clean and sober and to safely reunify with their children. For Debbie, these opportunities to share her success story helped her to build and expand connections that were not just about getting the kids home but also establishing networks of support that help families heal some of the "deep sores" they brought with them into the child welfare system.

I am a firm believer that it takes a village to heal a family.... [M]y job would be just to support and encourage and encourage and let you cry and to navigate a system. [The work that parents need to do] goes way beyond what [social workers are] asking them to do.... [T]o heal takes way more than the [completing the] cookie cutter [plan] or even a collaborative] case plan it takes to get your kids back. Because we got some deep sores.

***Making a difference.***

We are parents whose children were removed from our care due to allegations of abuse or neglect. We are parents who have worked hard to regain custody of our children. We are parents who understand what it takes to get through these difficult times. We are parent partners.

- *Clark County Parent Partner Program Brochure*

As Debbie completed her education and continued to develop community connections throughout Vancouver, Washington, she embedded herself so deeply into the community services network that she was a natural choice to facilitate the creation of a new program within the Department of Children and Family Services to help birth parents successfully navigate the child welfare system.

Begun in 2008, the Parent Partner program has two primary focus areas:

- (1) helping birth parents with children in foster care chart a course through the child welfare system by sharing information, support, and guidance and
- (2) providing parent leadership by participating in numerous child- and family-focused workgroups, interagency committees, and community and governmental forums to act as the "parents' voice" of families involved with the child welfare system.

The program seeks to utilize birth parents as a resource that helps parents receiving services to:

- become more informed consumers of the child welfare system and the services available;



- move more quickly through their anger;
- develop a good working relationship with their social worker; and
- more quickly engage in services. (Marcenko, Brown, Davoy, & Conway, 2010).

The program accomplishes its goals through monthly educational classes on the child welfare system and one-on-one support from a parent partner. Since 2008, program has offered one-on-one support to 547 parents, graduated 251 parents from the Nurturing Families in Substance Abuse Treatment and Recovery parenting class, and had 279 participants in the *Here's the Deal* class. In addition to working directly with birth parents who have had, or are at risk for having, children placed in foster care, Debbie, as a Parent Partner program staff member, provides consultation and assistance to social workers and other professionals assigned to help parents throughout their case history. In 2009, for example, parent partners participated in 347 staff meetings with social workers and provided guidance on managing alcohol and other drug related issues on 442 open cases.

According to system partners who sit on the advisory group for the program, Debbie's leadership role in the Parent Partner program has been crucial to its success. An attorney hired through the Office of Public Defense, for example, described Debbie's leadership role in the development of the program this way:

it's really collaborative! People that normally would have been scratching their eyes out were able to come together under Debbie's leadership and coalesce around seeing what can we do to make the whole work better for children and families. Debbie's facilitation of the workgroup helped to mitigate the longstanding adversarial relationship between agencies.

As I spoke with Debbie further about how she perceived her leader self, she echoed this idea of being a collaborative and systems partner.

Debbie: On the broader scope, ... I [am] really good ... [at] bringing systems [and partners] together that have never been together before and [at] being in the leadership in [deciding] what [it] is that gonna look like.

Nicole: I've heard that a lot today. People were reflecting on [Parent Partners'] ability to ... bring parts that were previously very disparate and figure out what would be the gel that could bring people together and not have them come to continue the fight, but really be able to collaborate with one another.... Figuring out how to make the system function in a more healthy way ... [is] your specialty.

Debbie: Exactly. And I don't know what I'm doing. But in those realms ... that's just where I fit. That's where I feel comfortable in bridging those gaps, in pulling [people] together.

Nicole: So as a leader, there is a sense of being a bridge-builder... translating across systems and experiential worlds.

Debbie: [Gasp]. Absolutely.

Nicole: That is a big part of your leadership: being that bridge builder. [Your ability to do the] translating across system worlds between agencies and experiential worlds between client and professional. That bridge-builder piece I think is very significant.

Debbie: I do too.

The ability to see and make connections within and across systems has made Debbie an invaluable partner within the Department of Children and Family Services because she literally brings a rich network of resources with her to each interaction or forum. This knowledge of community resources is not by happenstance: Debbie realized early on that to embed herself within the child welfare system she had to "bring more than just my experience to the table.... [I] had to bring resources and knowledge." As such, she not only identified existing community resources that social workers did not have knowledge of or time to investigate, but she also has brought new resources into the

community through her networks developed outside of the child welfare agency. For example, Debbie was instrumental in successfully advocating for a new housing voucher program in Vancouver, the Family Unification Program, for which she now serves as the program liaison. One of the core issues that Debbie works on is housing because having benefited from public housing through the Vancouver Housing Authority herself, Debbie understands the importance having safe and stable housing plays in establishing a life without substances and reunification with children placed in foster care.

***Working together.*** Debbie's success and achievements within the Department of Child and Family Services and the Vancouver community overall is truly impressive, but she is quick to tell me that her success has as much to do with the organizational context, and the people who have embraced her, as with her accomplishments. Though Debbie has prepared and proven herself again and again, she feels blessed to be in this department and the Vancouver social services community. Even as we walk through the office, Debbie introducing me and the purpose of the study, staff routinely offer unsolicited comments about the atmosphere in the department as innovative and "open to trying new things."

Debbie repeatedly speaks of the "get 'er doners" (GRDs), who she credits with getting the parent partner program established within the department.

I'm working with two people from the department who have already had the experience and the knowledge to implement a brand new program in the department. So for me, I think that was a big, huge deal. I wasn't with somebody who just had a good idea. [The parents on the advisory board] nickname them the Get 'Er Doners, GRDs because that's what you need. You need people that have the capability and the knowledge and the connections to implement a change in the office.

The GRDs not only helped to craft the program framework and policy, but also made sure that Debbie and the Parent Partner program had a space within the department, along side the social workers. Eventually, they were able to secure the necessary support to bring Debbie on full-time as an employee of the agency after her initial contract ended.

Beyond the innovative organizational culture and programmatic supports, I notice how Debbie speaks of the system professionals--the people at multiple levels in the organizational hierarchy--as partners, peers, and in some cases, friends. There is a clear appreciation and affinity for these insider collaborators. When I ask her to say more about this, she elaborates:

Because you are pulled in and you really want to help and when you get to be a part of something you're passionate about, you have to have people watch over you. Because if you don't, you burn out so fast. The work consumes you. You don't recognize its coming, but when you have a job you're passionate about, you don't recognize those internal triggers.

In Debbie's description of her relationship with her supervisor, she speaks about the importance of having someone there to help avoid running off the cliff of burn out in her enthusiasm. This strikes me as a kind of relational accountability that nurtures and sustains her in the expanding responsibilities that are not only a part of Debbie's work within the agency and community, but her growth as a person living her passion. Far from the adversarial relationship I expected, Debbie speaks of how--in this agency and at this time--she has "the freedom to soar."

***A work in progress.*** During my time with Debbie, I am struck not only by her brilliance, but also her love for this work. In my reflections on my observations and conversations with Debbie, I realize that it is not so much the creativity and passion that have captured my attention, but also the clarity of purpose that infuses and fuels her

leadership within the Department of Child and Family Services and the Vancouver, Washington community as a whole.

...It is about me coming a full complete circle, coming through it and out it to come around to come back and help other people. So, as I go back around my circle, I'm grabbing somebody and taking them out and going around, grabbing and taking them out.... Birth parents have to be included in this somehow [so]... everything I do and everything I get my hands on is a door open for another birth parent to be there.

This picture reflects a woman that knows that "things happen for a reason;" that life happens for a reason. Still, Debbie's life teaches that it is not what happens, but what one does with life's happenings that counts. Debbie has chosen to use her past experiences and current choices as vehicles for building bridges and inspiring change within herself, other birth parents, and the agency professionals with whom she works and leads.

I am a work in progress, and I ... never realized my potential. Ten years ago, nine years ago, I would've laughed in your face if you would've said this is who you're going to be, ... It's kind of surreal a little bit and so sometimes I go, 'Geeze if I had never gone down that path of addiction, maybe I'd be working on my PhD.' It's great because I also know that things happen for a reason. I would not be doing what I'm doing today if I had not walked the path that I walked.

**Brenda Lopez: Warrior spirit.** I first met Brenda Lopez at a national child welfare conference in Washington, DC. She participated in a panel presentation on the program she had developed to help birth parents successfully navigate the child welfare system through a comprehensive, multi-faceted approach that included education, mentorship, and community service. The Parent-to-Parent Dependency 101, 201, and 301 course curricula and program facilitated by "veteran parents" was compelling. I knew immediately that I had to include Brenda and the veteran parent programs she was building throughout Washington state in this study. The focus on community service was

the initial focal point that literally drew me across the country, from Washington, DC to Seattle, Washington.

During my visits with Brenda, however, I became keenly aware that what drew me in was not community service programming or birth parent advocacy, although both were central elements of Brenda's leader activities. Not until my second visit did I begin to recognize that it was the essence of a warrior spirit that was the source of the community service, birth parent advocacy, and strengths-based mentorship I witnessed in her actions.

Warrior spirit implies a subtle reflective action that is an essential characteristic or quality of leadership as conceptualized by Senge (1999). This reflective action is the necessary impetus for bringing forth the new reality that is envisioned in the work of leadership. Brenda's warrior spirit demands deep, persistent self-inquiry that removes the blinders of limited thinking and self-destructive habits, allowing her to "see only opportunities." Brenda Lopez' portrait provides a clear line of sight into the dynamic, encompassing healing, reflective action that has birthed a new reality within Brenda's own consciousness as well as the organizational context in which she leads.

***The woman in the mirror.*** Brenda had been abusing substances, off and on, from five years of age to twenty-eight years of age, when child protective services (CPS) entered her life. Though not the first encounter with CPS, 1998 was the most memorable because it was when her two children were removed and placed in substitute care. Brenda was self-destructing: her life was "out of control" and her mental health was deteriorating. Having burnt bridges with her family, with no home, job, car, or knowledge of where her children had been placed or how or when she would see them,

Brenda was isolated and needed help. She checked herself into a mental hospital and continued trying to reach out to family for information about her children. She eventually made contact with CPS, and was told that she would need to appear in court if she wanted to see her children again. The judge's one hour per week visitation order provided a measure of hope that sustained her.

Brenda's long-standing, self-destructive behaviors had convinced her she was "no good" and "worthless." She was filled with despair and even thoughts of suicide; but Brenda's defining moment came on the day of her first court-ordered visit with her children:

So, [I'm feeling] pretty desperate, pretty disgusted in myself, pretty overwhelmed with ... life; still trying to figure out if I wanted to be on earth or in heaven; and not quite sure if people were being truthful ... [about being] able to see my kids.... And so, I remember the day I was to go see my kids for my first visit. My brother ... handed me a five dollar bill and ... said, 'here, this is for you to buy the kids snacks.' ... [H]e gave me that five dollar bill and I said, 'are you sure that's for me?' He said, 'yeah;' and I said, 'It's mine?' He said, 'yeah.' I said 'Give me five dollars worth of dope.' [When] he gave me the dope, ... I went into the bathroom and I was getting high.... [T]his is how I felt for the whole year ... leading up to this. I am in the bathroom smoking this methamphetamine. I look in the mirror, and I look like I'm half dead. I'm smoking it, and I just am convicted that with everything I am, I've become, I've done (losing my kids, bad parent, horrible person), [I will never amount to nothing. [I] don't deserve to really live. [H]ow dare [I] take that five dollars and buy myself dope when it was meant for a good visit with your kids. So, all of that is just like right there; and I'm crying and I'm smoking. [T]hat's how I felt, and that was when I reached out to God.... I'm weeping and I'm like 'God, Jesus I don't know how to do this. I don't know how to live without dope. I don't know how to live without drinking. I don't know how to be a parent. I need your help.' And that's when I made that commitment, that covenant that 'I'll do anything, I will go where you lead me, and I will throw these drugs away.' And that was the defining moment, the pivotal moment, in my life.

This defining, pivotal moment for Brenda signifies a recognition that she was not where she wanted to be, but there was also the hope that another reality lay beyond the despair she had experienced in her own childhood and perpetuated, in part, as an adult

with her own children. This moment of surrender is not about giving in, but rather hoping and making a commitment to take a different path. It is from hope and this covenant that the warrior spirit arises.

***The wars within and without.*** Brenda's transformative journey began at that pivotal moment. As she and I discuss her journey, I am struck by Brenda's use of the term "veteran" parent.

Nicole: I wanted to ask you about the veteran parent terminology. Is that something that you crafted and why did you use that [term]. When I hear the word "veteran," I think Vietnam veterans. So, where did that come from for you? Can you talk with me some about that?

Brenda: In 2005, the guardian *at litem* that oversaw my children in our case came to me and asked me if I would be interested in applying for a position to develop some kind of parent ... [education] program for the court. And I applied ... and got the position. In the paperwork, it said "veteran parent." So, the paperwork called us veteran parents of the system; and ... it made sense to ... me because ... we did have to fight our own war.... [We are ... veteran parents of the child welfare system. We fought a war, and we got to the other side of that war and got our children back. So, it really is ... deep for us, but there are other folks who feel the same as you just did. When I think of veteran parent, I think of the war.

Nicole: Those are just my associations. [When I hear] "veteran," I think of some kind of war veteran; and for me the big war was the Vietnam War. But I wanted to ask you where did that term come from, and ... what does it mean to you, and [you stated it] beautifully.... If I am not putting words in your mouth, Brenda, some of that war is the internal war.... It's like there's a war on a number of levels.... [W]ould that be okay to say?

Brenda: That's great, I really like that.... [A]fter we had developed the Washington State Parent Advocacy Committee, we started identifying veteran parents ... [from among] ... birth parents across the state [to become] committee members. And so we had to have that dialogue: are we veteran parents, are we birth parents, are we parent partners, who are we? And it was decided then--but it's not concrete for some--that the committee for the work that we were doing ... would be called veteran parents. At least that's what I remember.

Nicole: I think that's a very powerful image, [on] ... many levels, [for] the work that you're doing. That's ... what I'm hearing.



Brenda: [W]hat I love about what you're saying is this: ... it's helping me redefine what war I was fighting. And there were, absolutely, wars on different levels. There was the war of my drug addiction and my own personal childhood experiences. There was the war of my internalizing what kind of a person I was.... Then, there was also the war of trying to navigate a system that isn't designed for you to succeed, in my eyes.... I think people ... who work in the child welfare system really have tried to craft the child welfare system in a way that would be helpful, ... but the way that it actually operates is not necessarily to support parents in all of the ways they need ... to be successful.

Brenda beautifully describes the multiple levels that served as her training ground for birth parent leadership within child welfare. The inner healing she speaks of as the war of recovery from substance abuse, childhood experiences, and reconceptualizing the internal beliefs of "...the kind of person I was." Brenda also articulates some of the outer terrain: the challenges of navigating a system that is not necessarily designed for birth parent success. As Brenda further explores this metaphorical imagery with me, she identifies the tools and experiences that facilitated her successful movement in ways that allowed her to connect with her truth, find her voice, and transform her experiences into useful lessons for others.

***Relational lifelines that heal.*** A key element of Brenda's transformative journey is the healing power of several pivotal relationships within the community and eventually child welfare. These relationships became mirrors that reflected back the strength, courage, and optimism that were becoming central elements in Brenda's new life, feeding her desire, not just to survive, but also thrive. Healing, affirming relationships served as relational lifelines through which Brenda's talents were nurtured and grew. One of Brenda's lifelines was her faith community.

...I can't say enough about my faith community and how instrumental their support and their willingness to believe in me and give me opportunities helped me to grow and develop and see the sky's the limit. Everything is an opportunity and not an obstacle because had they not ... agreed to let me ... volunteer for

them. [After all], ... who would want me to come and volunteer for them after all the life I carried on? But they were willing to give me that opportunity and then to hire me; ... let me have the keys to the church; ... let me negotiate ... with the insurance companies; [let me] be a wedding coordinator; let me be their safety officer; send me off to trainings; put me through school.

Relational lifelines and affirming community served a couple of purposes in Brenda's transformative journey:

(6) They reflected back to Brenda her talents and gifts as she was in the process of self-discovery and definition.

(7) They enabled Brenda to learn and develop marketable skills.

These opportunities to participate, contribute, and lead demonstrated to Brenda in real-time that there was something special about her that she had not yet seen in herself. This healing balm helped Brenda stay on the journey and instilled a deep hope and enthusiasm for the future.

*Service and the wisdom of doing.* Having begun the process of recovery and a spiritual restoration, Brenda's attention kept expanding outward as she began to recognize her own leadership ability and the healing effect it had on those she served. Her service became a way for other veteran parents "who were in[to] such devastating things... to step outside of themselves, and see some joy in life, even toward community service projects." Brenda began to draw on the powerful experiences of giving back to create opportunities for putting other veteran parents in positions, places, and circumstances where they could find their strengths in ways "...that will help them be better and greater leaders."

Service, as demonstrated by Brenda's journey, has become a dialectical loop between the inner wisdom and confidence she has gained and the outer context in which

she lives, learns, and leads. Brenda did not, however, turn her attention outward and forget about the inner sanctum. Instead, she has cleared a pathway of awareness that has allowed her action to be informed by this inner wisdom and grace.

When I ask Brenda to reflect on the wisdom she would share with others, she responds:

Brenda: I think that the wisdom that I would [offer] would be to believe in yourself. Believe ... that you can do it; believe ... that things will change. Also, ... trust in others. And I like to say that, because it's so easy to get caught up in negative or pessimistic thinking, I think just to think optimistically.

Nicole: If I can ask you for some of your own optimism, do what you can to see the opportunities. [As I listen to] you speak, ... the thing that [I'm hearing] somewhere inside me, is, "do what you can to see only opportunities...."

Brenda: Yes, very good.

Nicole: Thank you. Thank you for that.

Brenda: Thank you.

Brenda has found the strength and courage to face her demons again and again. Rather than perfection, Brenda has honed the skills of persistence which have nourished awareness and wisdom that were not possible before she made that covenant in the mirror many years ago. Winning the inner war for her own voice and self-authorship has brought Brenda the greatest prize: a renewed sense of self that nurtures and inspires leadership and change at profound levels within other veteran parents, social work and court professionals, and ultimately within child welfare system.

### **Cheryl Barrett: Authenticity.**

Authenticity calls both leaders and followers to address what is real, to dream for a new, more humane future, and to embody the true and real in ourselves as we engage others. When we are rootless, authenticity offers historical grounding; when we are trapped, authenticity offers freedom; when we are unjustly treated, authenticity offers justice; when we are oppressed, authenticity offers

empowerment; when we are apathetic, authenticity offers love; when we abdicate, authenticity identifies our responsibility ... Authenticity arouses us to face our fears and take responsibility for the true and the real in ourselves and the world (Terry, 1993, pp. 272-273).

One thing that is immediately apparent about Cheryl Barrett is that she is a woman who will tell you exactly what she thinks. Watching Cheryl move through the Contra Costa County Office of Children and Family Services is like watching, and hearing, a locomotive. Though no more than five feet tall, Cheryl has big presence and a big voice to match. One look and it's clear, this woman is a scrapper with an iron will. She knows that mountains can be moved--not with the force of will or power but faith, conviction, and unwavering authenticity. Far from being a steamroller that flattens everything in its path, Cheryl brings a warmth when you least expect it.

I was challenged to capture the breadth and depth of what I witnessed in Cheryl, until I found the reflection on authenticity from Robert Terry. His description of authenticity captures the essence of what I saw in Cheryl, "...to take responsibility for the true and the real in ourselves and the world" (Terry, 1993, p. 272). Not at all haughty, Cheryl's way of being embodies the courage to face the true and real with faith and responsibility, love and strength, combined with an ability "to tap into the energy to create those things that matter deeply" (Senge, 1999, p. 78) within herself and the context in which she lives and leads.

***My way or the highway.*** Cheryl's encounter with the child welfare system was abrupt: "...child welfare wouldn't have been knocking at my door if the Pittsburgh police didn't call them to come pick my kids up. Our house was raided because of a meth lab in the garage." Consequently, her four youngest children--a set of twins just turned two, a five year old, and an eleven year old, all boys--were placed into foster care. Shortly

thereafter, she went to jail. Though this was the first time Cheryl's children had been placed in foster care, it was not the first time she had been arrested for drug-related charges. Cheryl began dealing to supplement public assistance she received to care for her younger children, and eventually became a "Queen Pin." Cheryl describes herself at this time as "...the queen of bitches. [It was] my way or the highway." Despite the warnings from her husband, she allowed the boyfriend of her older daughter to manufacture methamphetamine in the garage because it was "...my way or the highway.

*Not in the equation.* Though Cheryl knew that what she was doing was not right, her philosophy was "...if you're going to play, you got to be willing to pay." And, she had always been willing to do so. Her arrests for sales before had resulted in thirty- to forty-five-day stays in jail, while her children were well cared for by her sister. With her last arrest, however, her children had become part of the pay-to-play equation.

...I knew when I went into jail with the mentality of I got caught and I have to pay the piper... But nowhere in that equation [had I] thought [about] my kids being taken away from me. I was willing to pay the price, but nowhere at all did child welfare come in the equation [with] my kids going into foster care or being adopted.

As I listen to Cheryl speak with such matter-of-factness about her life choices, I begin to notice how surprised I am to hear just how much she genuinely cared for her children. Cheryl's priority was always on being able to take care of her children, making sure they were fed, clothed, had a place to live. Even during her addiction and "entrepreneurship," her ability to provide for her children was paramount. Given her intense love for her children, I asked her how having her children placed impacted her sense of self.

First it didn't. [F]or that first week--until I ended up getting arrested--it was just part of the price I paid. I was getting high, cleaning the house up, trying in my

head to figure out how can I manipulate my way out of this situation. Because I'm entrepreneur, I knew how to... tell lies and cry at the right time. I knew how to work people... All during that first week, until I was arrested and even after the moment I was arrested, I was getting high and trying to figure out, 'Okay, how am I going to get out of this mess?'

Cheryl was arrested and taken to jail on September 7, 2001. After a few days, she began coming out of her fog to confront a turn of events that changed her perception of herself and her situation.

That was the moment I woke up....[When] they were locking us all down, ... there was talk about the country being attacked, [but] you couldn't actually see what was going on.... We didn't know where. We just knew planes were flying into buildings and people were dying..., and it was at that moment I woke up after sleeping the drugs off. [I was] listening to that and realizing that I didn't know where my kids were. I had no clue if they were alive or dead.... Then I looked at my life, [and thought], 'Oh my God. What did I do?' ... I was powerless to do anything about it because I was locked up.... [It] was very hard for me because I was very connected to my kids,... and to know that I couldn't be there to protect my kids, to make sure they ate and make sure that they were okay, it was my bottom.... However, I'm a bright enough girl to know that I'm pretty powerless about that right now, and then I did what I had always. I was raised to believe in a higher power, God. That's the only place I had to turn. I had to turn to God.

***Let's make a deal.*** Even during her addiction, Cheryl knew God and even prayed, but only for others not for herself. In jail, with her children placed in foster care, Cheryl knew the situation required more than she could do herself.

In my head I said, 'Okay, God let's make a deal. Here's our deal. If I can read this entire New Testament between now and next week when I go to court, You're going to let me out of jail... I got all the way to the bull pin, which is where they hold you before you go into court, and I finished the last part of the New Testament. I walked in there so certain that I was getting out that day, [but] I was wrong.

Cheryl's "deal" fell through, and she remained in jail. Initially angry, she discarded her study of the Bible in favor of a fiction novel. Though she tried to remain focused on the fictional plot, the scriptures she'd read on her way to court kept surfacing. Cheryl picked up the Bible again, this time without a deal in mind: "...I had to turn to my

spiritual part. I had to give everything to God, and I had to understand that I had to trust Him. My kids were going to be okay, but I had to really focus on changing myself."

This is the moment when Cheryl's transformative journey began.

***Changing from the inside out.*** Without any other place to begin, Cheryl started to apply what she had been reading and studying in the scripture in her own life. Cheryl began changing the way she talked, stopped "cussin' like sailor." She started paying attention not only to her own behavior, but that of others, not as judgment, but as observation. Her daily interactions with the other female inmates and jail staff became opportunities for Cheryl to reflect on and contemplate her own behavior, life history, and what was to come. As her perspective and actions changed, Cheryl began to impact those around her in positive ways. Her message of "cleaning up the inside first" began to influence young women in jail. Soon, "my way or the highway" gave way to mentorship to those around her. Cheryl mentions one person at this time in her life that contributed to this crucial transition inside her, Mr. Leary.

He was a very big mentor, and he was a very spiritual man; and I could talk to him.... Everything that he taught me was partially what God puts us through, He uses it for good. So, I think that he probably was a really big motivator that there's no sense changing your life or changing who you are unless it makes an impact on the world around you, your community, whatever that looked like. My community simply was in jail so that was the community that I had impact on. And, he taught me that anything I could do and any way that I [could] change, unless I shared it, was a waste of everything.

***Improvisational genius.*** While in jail, Cheryl received the case plan she was to complete via mail.

I got a card from some worker saying call collect. I didn't really know she meant call collect. Fortunately, I graduated from high school. I had a 4.0 grade point average and I could comprehend things that many other people can't 'cause they have been in generational addiction .... I was fortunate. I didn't start [using] until late in life... I knew what life was supposed to be like.

Cheryl took her strong will now fortified by a spiritual foundation and went to work. With no other guidance, Cheryl began deciphering the case plan, and understood that the "big ole thick case plan" described what the child welfare agency required of her to have her children returned. She realized she had a chance, and started taking one step at a time, utilizing every program and support within the jail that looked anything like the requirements laid out in the case plan. For example, when the case plan called for parenting classes, she enrolled in the anger management classes offered inside the jail. Or, the plan indicated that she needed to engage in therapy. "So, where are you going to get a therapist? I met with the Chaplain so we could do some therapy together." At every turn, Cheryl was able to take what she was given and create a workable solution creatively. This went on for five-and-a-half months—the period of time between first receiving the case plan and first being contacted by a social worker from the agency.

Despite the challenges of coordinating a case plan without support, Cheryl noted how fortunate she was—to have finished high school, to have not started into drug use and addiction until late in life, to not having been contacted by her social worker sooner.

As Cheryl described how she navigated a child welfare system under enormous pressure and with no supports at the beginning, I came to understand why. Cheryl's addiction didn't begin until she was nearly thirty years old. She had been "...a member of the PTA, had a bluebird troop, and knew how to use a checkbook. I knew what life was supposed to look like." Cheryl was, indeed, fortunate to have these positive life management skills and experiences to guide her through this crisis, she needed them.

I was especially curious about Cheryl's thankfulness for the five-and-a-half months with no contact from the social worker:



[W]hen the social worker came to see me after five and a half months, I had already completed these classes. I had already been really gotten into reading the New Testament, [and] now I was reading the Old Testament. I understood the the Old Testament because I read the New Testament. I was going to Bible study and church. I had a job because my case plan said I needed to find a job too. I was working in the engraving shop [as an] apprentice .... So, I [had] made so many changes in my life by this five and a half month mark that when she came in [and said what I heard. Words mean things, and what we hear and what you say may be two different things. That's [how] we train [social work] staff now.... So, I'm not going to tell you 100 percent she said.... [Here's what I heard,] 'It don't matter what you do here. You're a captive audience, and you'll never see your kids again in your life.' ... Now, did she say it that way? I don't know. I'm not even going to say that she did or ... didn't because she's a wonderful lady. But that's what I heard. When I left ... after she told me that, if she [had] come and said that to me early on, I would have given up, wouldn't have done anything. But since it was five and a half months later and I'd already made all these changes in my life and I was truly changing, I wasn't going to take what she said. I wasn't going to accept that as just the fact.

***On-the-job training for God.*** Cheryl's creativity, determination, faith, and positive outlook paid off. She reunified with not only her children, but her husband after eleven months in a mix of jail and in-patient programs. Towards the end of her clienthood experience, even then, Cheryl began to see another possibility on the horizon.

[E]arly on in my journey, once I got out of jail, when I ended up going to Corbin House, I was a little resentful because I'd already finished my inpatient treatment program and now I had to do another one, but I was willing to do it to get my kids. And I remember telling the staff there that this is all on-the-job training for me because I'm not sure how I'm going to use this in the future. I just know that God wants me to use this. So, everything that I've already learned, ... now I'm redoing here; but I'm ... putting on a different pair of glasses and watching how things work internally so I can use it as on-the-job training.... I remember telling them this is all on-the-job training....

These life experiences, along with her faith, have provided the foundation for Cheryl's current work as a parent partner and birth parent leader in child welfare.

*A living example.* As Cheryl reflects on her clienthood experiences and how they impact her work as a birth parent leader in child welfare, her iron will and faith are front and center.

My job is not a job. My job is a passion, ... and I understand that because of my own spirituality and my own beliefs. I believe that because, at first, I didn't understand that my life needed to go somewhere. I was hard-headed; and God had to knock me down [and] put me in jail for me to wake up and listen. But why is it that I had to put my family through everything that I put them through? ...[W]hen I look back at that, [I know] I went through everything that I went through and my family went through it with me for this reason: ... so I can do what I do [today]. Who better to minister to a drug addict than another drug addict? Who better minister to somebody with mental health problems than somebody that's learned how to navigate that system? ... [M]aybe I don't have them myself, but you know what, I certainly have problems within my own household; and I've worked with many, many families who've had mental health issues that I've lived in now. And God uses every experience that I had to help that next person down the road...

Though Cheryl acknowledges her own regrets about the suffering her family experienced as she went through her addiction, recovery, and child welfare, she clearly sees how these experiences are a blessing for so many, including herself. When I asked Cheryl about how her work now made her feel about herself, she expresses a deep sense of gratitude and determination.

[I]t keeps me humble; and it makes me grateful every single day. I tell people that I'm grateful that I have my kids every single day and I thank God for it. I tell them, I tell myself, 'every single day, I'm one hit away from losing my kids forever next time' so it keeps me real. It makes me appreciate my family, and when my kids might run through my front room with muddy feet, all of them chasing each other, I stop and thank God most that I had the opportunity to parent my children when it looked like I wasn't able to. So, it really just keeps me humble. It keeps me grateful. It keeps me moving forward.

Rather than a sense of trepidation, Cheryl jumped into the parent partner role with both feet. She recalls that she was the "pushy parent...I kept calling saying, 'what's up with [the Parent Partner program]?'... I was ready. I was prepared to go. I knew that God had this job for me and I know this was my job." As Cheryl discusses the complexities

and the joys that are a part of her job as a parent partner, I notice that she also is keenly aware of the impact she has on other birth parents and child welfare professionals. In her role as a parent partner in Contra Costa County's Department of Children and Family Services, Cheryl notes that her presence and willingness to speak up as a partner and "advocate of the case plan" gives the social workers as much hope as the birth parents.

It shows [social workers] success. It shows that--and, I'll be the first one to tell them--anyone can change, look at me. I'm a dope fiend; and if I can do it, Lord only knows what this family can do with the right support. Give them a chance. What if we did this and you got to look at where they came from and I think that if we try this and try that, well, let's give them a chance and see where they go with that. Don't just give up on them. But there's ... a point ... where ... a [social] worker is working harder than the parent, I'm telling them you need to stop, OK? You're working harder than they are .

Cheryl's comment is interesting to me in its simplicity and depth. She not only encourages the social worker to not give up by being the living example that change is possible, but she also exemplifies accountability by telling that worker not to work harder than the birth parent. In that one statement, Cheryl effortlessly integrates hope, inspired action, and shared accountability in meaningful service. This is the heart of authenticity: to give back and to give forward. That is, to give back to the birth parents coming behind her, to share with the social workers she now sits beside, and to give forward in ways that have the potential to forge powerful bonds and bring forth new realities within the Department of Children and Family Services, Contra Costa county and her community through the lessons of one's own life experiences.

### ***Representing hope.***

Leadership...is the constant invitation to all of us to stay the course, to take the next steps on the journey, to create the future, to recognize and admit our own foibles and shortcomings. It is to take responsibility for ourselves in concert with others, seeking to create and build a global commonwealth worthy of the best that we as human beings have to offer (Terry, 1993, p. 275).

If I were to change Terry's (1993) "global commonwealth" in the quote above to "child welfare system," his reflection on leadership would capture an essential dimension of Cheryl Barrett's transformative journey. Her own journey of leadership was tested in the crucible of authenticity; that is, creating an authentic existence not based on the money or control she could wield, but in loving service that is as strong as iron yet gentle as a mother's love, even a pushy one. Cheryl's authenticity and leadership represents an abiding spirituality and hope that enlivens and energizes not only her life, but also the community in which she lives and serves.

It's not the power, because I have no power and I love that. I am powerless, and I have no power but to be able to walk into a courtroom or courthouse and see several parents. Even ... new ones seek you out because you represent hope.... [T]hat's what I can represent, and I've got a lot of that in my pocket.

**Mary Lopez: Courage and compassion.** One of the first things I notice about Mary Lopez is her easy laughter and welcoming spirit. She is the consummate cheerleader. Her friend and colleague, Cheryl Barrett, has named her "Mary Do-Gooder." As our conversations continue, however, I notice that along with the enthusiasm and warm heartedness there is also a cautiousness. Mary seems to have a sense of caution that comes from having survived one's own life choices, especially the difficult ones, in ways that allow greater empathy and compassion to emerge. Across the desk from Mary, I felt I was as much under her keen observation as she was mine. Mary asked questions that probed who I was and what my intentions were for these stories, for her story. Mary's questions and demeanor seemed a relational reconnaissance that gave her an opportunity to assess the safety and risk of sharing the peaks and valleys of her life with a complete stranger brandishing a notepad and multiple recorders. Beyond helping

her get a feel for who I was and my intentions for the study, Mary's questions revealed not resistance, but courage. The courage that it takes to step past one's initial hesitation or fear and engage in a process of discovery of one's choosing rather than simply reacting without challenge to the quiet voices of criticism that can keep us locked in patterns of despair.

Senge's (1999) description of leadership as that which "...breathes life *into...*," directs our attention to the inner dimensions of leadership. That is, before the possibility of bringing forth new realities can be realized externally, the minds and hearts leaders are energized, inspired, and renewed. Mary Lopez' transformative journey from clienthood to birth parent leadership reflects the courage that the inner journey requires. Mary's experience highlights the inner transformative journey that can, indeed, bring forth new realities in ways that inspire, engage, and enliven us.

***And the children shall lead them.*** Mary's family came to the attention of the child welfare system through law enforcement. Her home was raided as a result of the use and sale of methamphetamine. Though the agency attempted to reach out to Mary, she avoided all contact with the Contra Costa Department of Children and Family Services. Though Mary wanted help, wanted to stop using, she didn't know how to stop using. More importantly, at the time she couldn't see how she would be able to support her three girls and herself without selling. "For the year previous to my house being raided and child welfare getting involved, I was really ... done getting high. I was miserable, but there was that fear, 'Okay, if I stop doing what I'm doing, how am I going to survive?' " The tipping point came when Mary's then sixteen year old daughter

weighed in: after being visited by a social worker at her school, Mary's daughter came home and asked her mother to reconsider the child welfare agency's offer to help.

My daughter, who was sixteen, came home [from school] and she's the one. She goes, 'Mom, hey, this lady came to my school and talked to us.' And, of course, I had a meltdown. I'm crying going, 'Are you kidding me? They're going to take you guys away from me.' And she, I just remember her saying, 'Mom, this lady can help us.' She goes, 'Will you just call her?' And that always brings tears to my eyes, years later, because I don't think if it wasn't for her saying, 'Mom, give this lady a call,' I wouldn't have called. There's no way I would have called. I just wouldn't have. And I knew I needed help, I just didn't know how to do it.... So, I did call.

***What the hell happened to my life?*** After that initial appointment with the social worker, Mary acknowledges that once her case opened she was blessed to work with multiple service providers that genuinely wanted to engage with her and see her succeed. "I think my whole dynamic is a lot different than a lot of people's experience. My dynamic was so different that every worker that entered my life was really engaging with me." Mary's family was the first in Contra Costa county to participate in Team Decision Making meetings a newly adopted process for client engagement being offered by the department. The Team Decision Making process brought all the community-based service providers as well as the family's own supports to the table to work together to create a plan that would address the family's issues, and where possible, keep families together with the necessary supports to address child safety concerns.

Though the support of professional service providers made some elements of the journey easier, at some point Mary had to confront the greatest challenge of all: herself. It all erupted at one of the early detention hearings in court. One of the conditions of the Team Decision Making meeting was that Mary would attend out-patient treatment for substance abuse. She knew, however, that she wouldn't be able to maintain clean and

sober choices in her same environment and consequently couldn't produce a clean drug test. As a result, her two youngest children, ages sixteen and five, were placed in foster care.

So at the [Team Decision Making meeting], they didn't actually remove my kids at that time; and I don't remember at what court hearing it was, I'm assuming it was maybe the jurisdictional hearing. And I couldn't provide a clean test for the department, so they definitely recommended detaining the kids. I didn't turn them over well. I turned over [my youngest child] shortly; but I did not have her with me in court, and they were asking for her and I was telling them, 'No, I'm not turning her over.' I probably told them to f-off. I said all kinds of things, but I don't think I can say all that. Bottom line is I told the judge to f\*\*\* off and looked at him and asked him 'Don't you know who I am?' I go, 'don't you know who the F I am?' So, I remember just kind of walking out and here comes this little red headed short little woman, [my kids social worker],..., and she was up in my face and she goes, 'we are going to charge you with kidnapping if you don't turn that little girl over.' And so of course I'm like, 'Okay I'm looking at drug dealing charges, possession, possession for sale charges, now kidnapping, what the hell happened to my life.'

The possibility of losing her children forever was the catalyst for Mary to engage authentically in the change process.

***Change is scary.*** Mary was fully prepared to go to jail for her drug use and sale. The possibility of losing her children to foster care never entered her mind, and with her children now detained, Mary began to engage the process of change at a deeper level.

That was hard. That was probably one of the hardest things I ever did because it meant change. I knew I wanted change--and ... I don't get this and even in my own head sometimes—[but now that it was being offered, it] still was very scary.... So, I enter [treatment]; and it was scary.... I wasn't scared of the people or the place, but it was more of, 'wow my life's about ready to change and what does that really look like, can I really do this?' Did I believe in myself? Probably not, probably not at all at that point.

During our conversations, Mary tells me just how difficult it was to pack up her home before entering treatment, knowing that upon her completion of treatment she'd be

homeless. In the details of Mary's reflections, I begin to understand the fear and sense of being overwhelmed that are central to her story.

When I ask Mary about how she felt about herself when her family entered child welfare, she shares candidly her perspectives on the inner aspects of her client experience:

Mary: I think it's absolutely humiliating. It's definitely humiliating. I think [about] the fact ... [that] I loved my kids-- I absolutely loved my kids. And did I make poor decisions? Absolutely. There's no doubt in my mind that the decisions I made and the lifestyle I chose to lead were absolutely horrible. But did I love them? My God I loved [my kids]. And now I have people, in a department in a court telling me that I endangered the lives of my children.... [T]oday, I can clearly see it; back then, I had looked at it as, 'I love my kids, I would die for my kids, I would kill you for my kids and you're telling me I endangered the lives of my kids?' And that was hard to swallow. I think ... that ... getting to the point within myself [when I was able to say], 'Yes, you were right. I endangered the lives of my kids,' was a process. In the beginning, I'm an addict, I'm a drug dealer, I'm whatever else you want to call me, call me a [whore], call me whatever you want I'm those things. But you're telling me I endangered the lives of my kids, I didn't get that piece of it, it took awhile because ... I viewed it as, 'I love them, I would do anything to protect them. I did what I had to do to survive. I provided a home for them. They had everything they wanted, the whole nine yards; and you're telling me I endangered the lives of my kids.'

Nicole: So, that reframe--if I could use this word--was really difficult because you're like, 'I know what I've had to give up. I know what I've done. I know the situations I've put myself in as their mom so that they could have the stuff that I know that they needed.'

Mary: Because today I [look back and see that] I thought I could not do it without doing it the way I did. You know, Nicole, I was very hard. So, when people told me, you endangered the lives of your kids, [I thought], 'I would kill a mother f\*\*cker for my kids.' Sorry to say it like that.

Nicole: That was the real.

Mary: That's how I behaved. I raised my girls to sock him before he socks you; and you're telling me I endangered [my kids]. Today, I clearly see it; and I look back and say, 'Oh God, I get the whole big picture.'

Nicole: But at that beginning point, ... you felt, 'what do you mean I don't love my kids?'



Mary: I viewed it a little bit different. [Here's how I viewed it]: I didn't beat my kids. I didn't molest my kids. I would not let anybody touch my kids. It doesn't mean we didn't have full on blowouts in the house. Gosh, we have food. Anything they wanted, we were there.... I kind of viewed myself separately than somebody that did physically harm their children or molest their kids. 'I'm not like them, I'm just an addict....' So, that was very difficult; and I'm going to be honest, I didn't get that. It's so funny because 'yes, I am an addict; yes, I know I desperately need help in my addiction; and I know I desperately needed help in other areas. But I didn't get that ... piece of endangering my children until I was going through my criminal stuff; and I was able to sit down with my attorney. At that time, I was over a year sober and ... almost towards the end of my CFS case [plan].... And I sat down with my attorney; and all of a sudden, she's flipping through my file; and there were pictures of my house. [There were] pictures of all the substances and all this paraphernalia.... Yes, it was in a safe; but that safe was completely unlocked and open. And so, just looking at my bedroom and the things I had in my bedroom, I was like 'wow, I had that in the home with my children?' The people I allowed into our home, the people I allowed around myself and my children. I get it! Oh my God, do I get it! Did I endanger their life every single day? Absolutely. Did I drive under the influence every single day? Absolutely. So, I get it today; but I didn't get it ... in the beginning.

*A compassion for people.* Mary Lopez is now a birth parent leader and parent partner working within the very same child welfare system in Contra Costa County in which she began her own journey of change back in February 2003. As a parent partner, Mary not only helps birth parents navigate the child welfare system, she also helps them access needed resources and serves as a guide through some of the inner terrain she had to transverse as a part of her own journey.

An additional core tenet of Contra Costa's Parent Partner program is to consult with social workers within the system about specific cases and families as well as to represent the birth parent voice throughout the agency. Mary is quick to point out that "[being a parent partner] is a lot more than just a job..." When I ask her to speak with me further about what it means to her to be a parent partner, Mary describes it this way:

I think you've got to have a compassion for people. I think you have to believe in people [and] be understanding of where they're at,... We have to be willing to ...

believe ... that they can change.... I think sometimes we have to remember where we come from and the struggles that we've actually had to personally walk through.

Mary's description of the parent partner job is driven by compassion that has been tested and refined in the fires of her own life experience. When I ask Mary how her work as a parent partner impacts her sense of self, she responds simply,

I feel I'm just me,... doing the next right thing. It's just doing the next right thing even when nobody's looking.... I feel I'm blessed to have this opportunity. It's kind of crazy because it doesn't empower me, it doesn't make me feel better than, it's just kind of doing the next right thing.... It's funny I feel at peace--very, very at peace. I know that today within me, no matter what situation happens in my life, that I will be okay because life happens to us. A lot of great things happen to us, but sometimes bad things happen; and there's blessings even in the bad.

***A compassionate heart as leadership.***

"Let there be kindness in your face, in your eyes, in your smile, in the warmth of your greeting. Always have a cheerful smile. Don't only give your care, but give your heart as well."

- Mother Teresa

As we conclude our conversation, I ask Mary if she considers herself a leader:

Today, I definitely view myself as a leader, but when you say, 'do you view yourself as a leader,' a lot of people say, what is a leader? We have the President of the United States, we have the CEO of the company, we have our bosses at employment, we have Mother Teresa, who's a wonderful leader,... but now you also have me... We don't view ourselves as leaders; but in reality, my gosh, we are all leaders. You see a need, fill it. It doesn't have to be big. Everything starts out small; you see a need, fill it. You see a hole in somebody's life, you fill it. You see somebody struggling with a lack of understanding, you fill it... That goes with my beliefs and my spirituality and just who I am today.

The advice from Mother Teresa about kindness and warmth suits Mary Lopez well. She is able to care and give her heart as she goes about attending to those things she can "fill." She easily shares her heart with others. There is often an overlooked strength and courage within compassion; the enthusiastic cheer-leader is at times mistakenly assumed to be weak. Mary's transformative journey from clienthood to

leadership, however, illustrates the courage required to begin one's own journey of change and the compassionate heart that can help others along that path as well.

### **Dave Mason: Accountability**

I have a lot of struggles in my past that I have overcome. Some of the stuff I went through I wouldn't wish on my worst enemy. But with all the crap I went through, I bring knowledge and skills you can't learn from a text book... I care about all families that are in the struggle; and my knowledge around being a crappy husband and father for a period of time, and flipping my life around to be a husband and father my wife and children deserve is what I can bring to the families I work with.

- Dave Mason

My first introduction to Dave Mason occurred at the Parent's Anonymous California statewide conference in 2010. In a crowded conference hall filled with people, I could hardly hear him over the chatter and noise of hotel staff breaking down the ballroom for the next session. Frankly, he was so quiet that I became concerned about how our conversations would go. Specifically, I wondered if he would feel comfortable enough to open up about his experiences in front of a camera.

Though I couldn't hear Dave very well that first day, I soon came to recognize an intensity and assuredness, even stubbornness, that lie behind that quiet demeanor and smile. Dave Mason is a man that wants to stand up and be counted as a loving husband, involved father, and now a parent partner to other birth parents, especially fathers, involved in child welfare. It is this clear commitment to standing up and being counted as a husband and father that distinguishes Dave's transformative journey from clienthood to leadership.

***Nothing left but anger.*** Dave began heading for a collision course with the Contra Costa County Child and Family Services department as a result of a 13-year addiction to methamphetamine. When he met his wife, he was very entrenched in a

lifestyle of addiction; and they continued to use together. Soon after they met, a baby was on the way and was born “tox pos” for methamphetamine. When a child is born “tox pos,” the hospital automatically notifies child protection. Dave didn’t know exactly what would come of his child’s toxicity report at the time, but he knew something would happen.

On the day they were to return home from the hospital, Dave sat in the hospital parking lot and smoked meth. When he arrived at his wife’s room, he found a social worker there holding his newborn. Dave was told that his child would not be returning home with him and his wife that day. Dave couldn’t even understand why this person, this stranger, was even holding his child. After all, he wasn’t doing any harm to his daughter; smoking meth only affected him.

...At the time, I didn’t feel like I was doing [anything] wrong, that I was affecting my daughter. So I was really angry, and I didn’t understand what was gonna transpire; but I knew in my head that I wasn’t gonna get my daughter back ever again. I just felt really enclosed.. I was angry. I can just really sum it up – I was angry about everything (Dave Mason, personal communication, March 3, 2010).

***In a dark tunnel.*** That day in the hospital wasn’t the last day Dave saw his daughter. At the 72-hour hearing, the judge awarded him custody on the condition that his wife leave the home and enter drug treatment. Still addicted himself, he was now responsible for caring for his daughter single-handedly while his wife began treatment. Dave remembers “...propping a pillow up in her car seat and sticking a bottle in her mouth and going in the room and getting high” (personal communication, March 3, 2010). Though Dave thought he had dodged a bullet, the department required he take random drug tests. Since he knew he couldn’t produce a clean test, he tried to alter his test results and was soon caught. A supplemental petition was filed for his daughter to be

placed in foster care. Soon, the social worker was once again there to pick up his child.

This time Dave was sure he'd blown it for good.

[W]hen the social worker came and picked my daughter up, I was standing out in the middle of the street and when she drove off, I remember I seen my daughter's care seat handle sticking up [through the back windshield]. And I don't know what it was, but something hit me in my head and said, 'I don't have no control over anything in my life.' ... I never once thought I wasn't, that I didn't have control... And just that moment, something just clicked in my head that I don't even have control over keeping my own daughter. It just dropped me to me knees in the middle of the street. Then I remember I was in this dark tunnel and I couldn't see in front of me and I couldn't see in back of me. And I didn't know what my future was. But I knew I needed to get help... That was the beginning.

For the first time, Dave reached out for help. At this preliminary stage, he wasn't so much reaching out for help as he was trying to get his daughter returned to his care.

"My main thing was I needed to get my daughter back... It wasn't like ... I knew I had a severe addiction and ... knew I had no control over it; but what motivated me to get in there was getting my daughter back" (Dave Mason, personal communication, March 3, 2010). Without knowing whether or not it was even possible to get her back if he did certain things, he called every drug treatment program for men in Contra Costa county weekly, sometimes multiple times each week, until he found an available slot. Sitting across from Dave in the empty office I had been loaned for my week of observation with the parent partner staff, I am aware of how moved I am by Dave's admission to being emotional about having his daughter placed and how that emotional response, plain and simple, feels like a father's love for his daughter.

***The transition from client to leader.*** Though initially more concerned about reunification than recovery, Dave eventually saw the connection between the two and the need to do his recovery for himself. He jumped in and began taking more and more responsibility for his recovery, learning about addiction, and eventually became a drug

and alcohol counselor. Dave honed his mentoring skills as a drug and alcohol counselor, running an out-patient support group in his county. As Dave is walking me through this transition from the recipient to the provider, he takes what initially seems like a detour.

...It was weird because when I went through the child welfare and our case was closed, I did all this stuff, but I was so diligent once I got clean. I was taking all these extra programs, these parenting classes and stuff. I remember when our case got closed...[T]he courts really applauded my wife, [but] they really did not show me as much recognition as they did my wife. And that hurt.... It took me a long time before I was able to see a light at the end of my tunnel...It was real hard. There wasn't real support for me and my wife; we were constantly made to separate.

As a result of Dave's experience as a Dad and husband going through the child welfare system, he can describe the feeling of not really being "seen" throughout the process. Even at the point of case closure when his wife is acknowledged by the court, it was as if he was barely there. He also reflected how the experience placed a strain on his marriage. What I initially thought was a detour was actually central to Dave's transition to leadership. These experiences, particularly as a father and husband, had a profound and indelible impact on his leadership as a birth parent in child welfare. "So, when I got out of this, it was always in my mind, 'Man I wish I could start up a program that I could go and support some of these parents, especially Dads.' I mean this is something that was crossing my thoughts ever since I got out of child welfare" (Dave Mason, personal communication, March 3, 2010).

***You got you here.*** Dave acknowledges that once he accepted responsibility for his own actions and recognized the role he played in child protection services entering his life, his client experience was a very positive one. Like many other birth parent leaders in child welfare I've met, he believes that CPS's intervention certainly gave his family a better life and may in fact have saved his own.

I didn't have a bad experience with child welfare, I mean I really didn't. I needed that in my life.... Child welfare's intervention in my life is basically what saved my life, and my family's life, you know what I mean. If it wasn't for child welfare getting involved with me, I probably wouldn't be alive, you know. And my daughter would be neglected. I just can't even comprehend what my family, or what myself would be right now if we weren't involved in child welfare.... Jail. Some of my friends have been murdered in [the addiction] lifestyle.... None of that ... really made me [open my eyes even a little].

As our conversation moves from Dave's client experience to his leadership work, I hear even more clearly the keystone of Dave's approach: accountability. Like all of the other birth parent leader participants I spoke with, Dave actively uses his experiences as the flashlight to shine a path towards success for each family he mentors. He uses his own experiences of being in denial and feeling like "a victim" of the child welfare system to help other parents just entering the system.

The thing that I do is help them understand why they are here because a lot of parents, when they come into the child welfare system, ... are in denial. It's 'I'm the victim'.... I know what they're feeling. I was sitting in the courtroom the same way. 'I'm the victim, my daughter was taken by this agency,... Who are they to take away my rights as a parent because of something that I'm doing to myself?' ... I had that mentality. I can turn those [experiences around] today and work with parents. Working with them to understand that they played a role in being here. And [following it up with] what can we do from this point on to get your kids back....

I notice a consistent refrain in what Dave says to other parents, particularly those with substance abuse issues like those that brought his family into care: "you got you here." Still, Dave's reality checks with parents are filled with encouragement and are non-judgmental. As an outsider to these experiences, if I had just read, "you got you here," I might bristle. Given the current context, however, a straightforward approach is absolutely necessary. With federally mandated timelines, birth parents can only benefit from knowing the stakes—the consequences--as soon as their children enter care. Dave

doesn't waste a minute: he introduces himself and the Parent Partner program to birth parents at their first court appearance, the detention hearing.

***The way I keep what I have is to give it away.*** In the relatively short time I've spent with Dave, his attitude of gratitude is evident when he talks about the work he now does with birth parents, especially fathers and married couples. He knows, firsthand, what it is like to be present and engaged as a father, and be looked over. He also recalls the lack of support for him and his wife attempting to navigate their own recovery as well as the child welfare system.

Dave uses these experiences of "being disappeared" as another opportunity to give away the good he received on his own journey. Dave's leadership is about finding ways to give away the knowledge, hope, and strength he has attained in his own life and work. He underscores that, "what I've been taught is that to keep what I have, I have to give it away." This principle guides him in the daily challenges and triumphs of the leaderly service that he has chosen and that has chosen him.

When I ask Dave to think about the impact of this work on his own sense of self, he again tears up:

It is an emotional part for me; it's my family. I have a life with my family.... Doing this work has impacted my life greatly.... I can't even imagine what it would be like if it was any different. I'm a father. I'm a husband. I'm a good father and a good husband. This line of work is ... why I'm that. That line of work is why and who I am today.

***A light at the end of the tunnel.*** Dave's experience as a father and husband remain central to his birth parent leadership in child welfare. From the earliest steps in his own journey, Dave's primary motivation was reunification with his child and wife. His hope for the future is that child welfare can expand to include dads as well as moms



in the supportive network of services. Senge writes that “leadership is about tapping the energy to create-especially something that matters deeply. Where this energy exists, we are more engaged, fulfilled, and productive. We are more alive” (1999, p. 78). Dave’s life is certainly an example of that.

### **Sketches from the Pilot Study**

As I described in Chapter III, prior to the primary information gathering phases of the study, I conducted a preliminary two-stage pilot. This section presents the pilot study findings as shorter narrative sketches rather than full portraits in order to capture themes not found in the full portraits. Moreover, the voice and experience of the birth parent leaders in the pilot study bring an added diversity to the study that warrants inclusion in that three of the birth parent leaders in the pilot study are African-American mothers, while none of the birth parent participants in the full study are; and one of the birth parent leaders was a social worker in child welfare who became a client.

The narrative sketches below maintain my focus on the essence of the transformative journey from clienthood to birth parent leadership.

#### **Angela Braxton: Walking by faith.**

"Now faith is the substance of things hoped for the evidence of things not seen."  
- Hebrews 11:1, King James Version

Angela Braxton is a woman of faith; not just in the religious sense, but also in her leadership. Angela’s journey has provided many opportunities, tests really, of a new found faith in herself, her leadership, as well as faith in the child welfare systems with whom she now partners. As with most tests of faith, the opportunity exists either to retreat to the safety of the familiar or to reach for something greater that can only be discovered along the path uncertainty. Angela’s life is a testament to the discipline of

pushing towards that greater possibility by just showing up, again and again, even when she "doesn't know what [she's] doing." This discipline of showing up has been honed by walking by faith.

According to Senge (1999), an ability to see the unseen, the new reality, is virtually a prerequisite for leadership. This is also the essence of faith: the ability to envision an 'other' possibility beyond the current circumstance, condition, or form.

***Show thyself approved.*** Angela began her work as a birth parent leader in child welfare after receiving an invitation to participate on an advisory council made up of family members and child welfare professionals as part of the systems of care demonstration grant program in Kansas. Angela notes that very early on she became aware of the need to constantly demonstrate that as a birth parent she belonged at the table; that she was "ready" and up to the task. "It has always been a "show thyself approved" thing with child welfare systems as a [birth] parent." There are certainly the external examiners, the other child welfare professionals who readily and persistently assess the readiness of birth parents to participate as leaders and partners in child welfare. However, Angela's comment also suggests that there is the work that goes along with proving to oneself that one is capable, ready, and worthy:

As a family partner, without all the letters behind our names, we tend to think that we are not good enough and I think we carry that as a result of course of coming under the radar in the system in the first place and we just continue to carry that through until we begin to see that we are okay with ourselves.

Juxtaposed with needing to prove oneself is the issue of credibility. As a birth parent leader, an important lesson that Angela has recognized is that her life experiences are the credentials needed to be of service in a child welfare context. "Keep in mind that parents like myself, we have a PhD in our experience; and nobody can share those

experiences, those strengths, that we gained from those experiences or that hope that we have--like we can. Nobody else can do that."

***Walking by faith.*** In learning to value her life experience, and perhaps most importantly, using those experiences to inform how she leads, Angela has also become confident enough to show up, speak from her reservoir of life experience, and know that this is "...exactly what I'm supposed to be doing... It's a learning experience, ... and I truly believe ... that as a result of this work, I've picked up, from every stop, another piece of who I am meant to be."

**LaShaunda Harris: Voice.** LaShaunda is a woman of few words, quiet and observant. She is rarely the first to speak, but when she does you feel as though you've heard the wisdom and strength of someone who has a familiar relationship with the valleys of life--someone who's "been through somethin'" and took very good notes along the way. LaShaunda keeps herself grounded by remembering where she's come from and what she's come through to continue progressing forward in her leadership and life of recovery. "...It's a marathon. It's not a walk, it's not a journey. It's just everyday... It's a marathon."

***Finding and using her voice.*** LaShaunda knows firsthand the importance of finding one's voice, but she also knows that finding one's voice is not a solitary quest. Indeed, it often requires the support of a trusting and trustworthy community; and she knows that because what helped her break out of the cocoon of despair and be able to find and eventually use her voice for change was "...[The] people I met along my journey, I just robbed them, robbed them of their support, and held them tight, embraced

them with my arms,... I [was] broken, and I needed everybody to put Humpty Dumpty back together again; and I've held onto them throughout my whole journey...."

Having been silenced by shame, LaShaunda now uses her voice to help other birth parents experiencing the hopelessness that she once felt. "...I try to help, really, by being a voice, though and just try and [speak on] things that are unspoken, the shame and the guilt.... [I]t's ... realness... I don't think you can help anybody without that realness." In her work with other substance abusing moms, she now uses her voice as a way to fill the silence left by shame until they, too, discover the strength and power of their own voice to create a new life for themselves and their children.

***Leadership is as leadership does.*** As my conversation with LaShaunda turns to an explicit discussion about leadership, I am caught off guard by her reticence to acknowledge herself as a birth parent leader.

...No, I don't want that title. Am I facilitating, collaborating? Being this one individual here in this community trying make this movement to make a difference. It's [like] a shakedown! It's a shakedown..., and ... I just want to be a part of it.... [W]e all kind of come together ... to facilitate just something positive for those moms and those children coming ahead of us... I just think I'm one little fish that's in this big pond trying to do that. And, so I don't see it as [leading]....

It wasn't until I shared Senge's definition of leadership, "the capacity of a human community--people living and working together--to bring forth new realities" (1999, p. 78), that LaShaunda could begin to acknowledge her leadership role. As I was speaking, these words, LaShaunda's whole demeanor transformed before me. It seemed as if her being began to literally expand into these words. Like water fills a glass, it was as if LaShaunda rose to the top, above the reticence and self-doubt. "Oh, yeah. I like that terminology. I like it. I'm a definitely leader if we're using that definition." During the

course of our conversation over several hours, I was struck by the power of these words to awaken awareness of her daily actions as leadership.

As our dialogue concludes, I was left wondering about the healing power of birth parent leadership to not only improve systems and organizations, but to heal old and deep internal wounds inflicted by the shame and humiliation, grief and loss experienced as a client in child welfare. The inner healing exemplified by LaShaunda's marathon then seems to be the heart and soul of any movement. LaShaunda's life exemplifies that it is, indeed, the inner transformation that makes the outer transformation, the shakedown, possible; not just for ourselves but those "coming ahead of us."

**Sherry Tomlinson: Integration.** Sherry Tomlinson's story shares both similarities and differences with others in the study. Sherry entered child welfare through the front door as a social worker within the child protection system. Her fifteen-year history as a social worker, however, did not make her immune to the perils of addiction that bring countless birth parents to the attention of the child welfare system. Sherry's transformative journey is distinguished by her ability to integrate the multiple perspectives afforded by her life experience: a social worker who has removed children from parents, a birth parent who has had her own children removed, and now a birth parent leader bringing forth new realities in the child welfare system she knows inside and out.

***Through the back door.*** Sherry describes her perspective as a birth parent leader as a strange one. "I came to [birth parent leadership] through the back door." Sherry was a social worker for fifteen years doing child abuse investigations with child protective services. Soon after the birth of her son, Sherry's life changed dramatically as a result of

a series of overwhelming events. Sherry found herself in a place she didn't want to be, but couldn't find her way back.

...[I was] a social worker in the system completely unable to ask anybody for help. I had always been the helper. I had never asked for any help. I saw it as a sign of weakness... One thing led to another, and I began this major journey into addiction.... I isolated myself... and just found myself completely unable and unwilling to reach out to anyone. So, I reached out to [methamphetamine].

When addiction began to dominate all facets of her life, Sherry resigned her social work position. In 2000, she was arrested; and her son was placed in protective custody by the same department that had formerly employed her. Then, the shame began to settle in. By her second arrest, Sherry had nearly given up:

I got out of jail that time, and just had completely lost all hope.... [I] saw myself as a failure as a professional, a failure as a mother, a failure as a person. I saw absolutely no hope, absolutely no way out, ... no chance of reversal, nothing.

***Learning to trust.*** Sherry began a recovery program as a last resort. One of the early lessons Sherry discovered in recovery was the importance of connections to others. Far from the weakness she'd assumed before, she now understood the necessity of connections as relational lifesavers and found them in the unlikeliest of people.

[W]hen I went to my very first recovery meeting, the very first one I ever went to, a woman I had taken her children [as a child protective social worker], got up, and headed across the room. I thought she was going to hit me, and she wrapped her arms around me, and she said, 'I am so proud of you.' That was the first connection I made in recovery—with a woman [whose children] I had taken....

These early recovery experiences were crucial for Sherry as they taught her what it was like, as the "ex-social worker," to be the birth parent that needed the support. As Sherry continued to grow in recovery, learning to trust herself and others along the way, she began to recognize the value of her experience in bringing a deeper level of understanding between birth parents and the social workers assisting them.

*A unique perspective to share.* It wasn't long before Sherry realized that--as a former social worker, recovering drug addict, and former child welfare services client--her experience was, in fact, unique. She had truly specialized knowledge that other social workers *and* birth parents needed to know. "I finally had this ... perspective that I never had before; and I thought, 'Oh, they need to know this stuff!' "

Sherry's integration of her experiences from "both sides of the fence" instilled a new vision for how the child welfare system and those in it could function in more collaborative and trusting ways.

*No more "us and them."* When Sherry began to work as a birth parent leader in child welfare, her integrated perspective became the centerpiece of her approach. Translating her understanding of the 'other side' to both birth parents and social workers became a natural way for Sherry to contribute. Pervasive and deep misperceptions of "the other" greatly impede the ability of birth parents and social workers to come together in constructive ways at multiple levels in child welfare; the wall is always there.

Sometimes we think we know what someone else's perception is, when we really don't have a clue. Because our vision is so clouded by our own issues, we are unable to really see things from another person's perspective. I see that frequently with social workers and birth parents. There is almost an "us against them" feeling on both sides.

Sherry knows, perhaps better than anyone, that the system needs the perspective of both social workers and birth parents to work at its best. She notes, however, that it is not enough to show up with a list of expectations or demands for the other. Instead, both birth parents and social workers have their respective work to do. Sherry's life has taught her that her own healing was a crucial prerequisite for her to begin the work of healing

the system. Likewise, social workers must learn to challenge their own assumptions and biases about the ability of birth parents to change for the better. Sherry's message to other social workers and birth parents working together to improve the child welfare system is simple. "It all goes back to those recovery principles. HOW are we going to make this work? "With 'honesty, open-mindedness, and willingness,' we are well on our way."

**Kimberly Mays: Inspired action.** Kimberly Mays is a woman on a mission to inspire a shift of mind and heart and policy and practice in child welfare. Kimberly's life echoes a consistent theme: change *is* possible with the proper supports, services, and the respect and dignity that all human beings deserve, no matter "how they look on paper." Kimberly's mission of inspiration is grounded in her own journey of addiction, loss, and redemption. Knowing the despair, hopelessness, and powerlessness of a system not yet able to see beyond the conditions of a life temporarily unhinged, Kimberly skillfully uses her life as a living example to inspire birth parents to aspire to the better life waiting on the other side of different choices, social workers to believe that change is, in fact, possible, and policymakers to remove systemic barriers that impede birth parent success.

***A history of despair.*** Kimberly had multiple interactions with the child welfare system, resulting in the termination of parental rights for nine of her ten children. Kimberly's substance abuse history was as lengthy as her criminal history. She began to sell drugs to support her addiction, and her addiction worsened with each dependency case. Each time that Kimberly had been involved with the child welfare system, the result had been the loss of her parental rights. The trauma from the loss of her children—due to her choices--only exacerbated her drug abuse. For a period of time, Kimberly's



life cycled between drug use and drug sale. The more pain Kimberly felt, the more she self-medicated with drugs; the more she used, the more she had to sell. "... I knew I wasn't mentally ill... I was emotionally ill from the trauma of my choices that caused me to lose my kids." The drug use became a form of "self-mutilation"--a way for Kimberly to inflict a pain on herself that she imagined her children suffered as a result of her lifestyle choices.

*A divine pardon.* Kimberly's life had deteriorated to the point that she no longer wanted to live. The despair of a life without her children was more than she could bear. She turned to God, the only support she knew, and asked for help. Kimberly, now pregnant with her tenth child, was arrested on March 23, 2004 for bail jumping and escape. In addition, she already had eight points and had a large quantity of drugs when she was arrested; the prospects did not look good. The law required a minimum 58-month sentence; but because of other offenses, the state prosecuting attorney added 60 months. Despite the circumstances, Kimberly's faith assured her of another possibility. "By that time I had turned the will of my life over to the care of God. I started reading this thing called the Bible, and increasing my faith.... I found a scripture that's from Isaiah 55:6-8, the end of the scripture said, 'If you will turn from your wicked ways, and turn to God, God will have mercy and pardon you.'" Kimberly took this scripture to heart, and hoped for a miracle. On July 1, 2004, the sentencing day, Kimberly's hope was realized. Although she was sentenced to zero to twelve months, she was released that day on her personal recognizance because she had already served her time while awaiting sentencing.

***Every human being is valuable.***

My dream is for Washington state to get to the position where they're utilizing their most valuable resource, which is human beings, and investing in them in tangible ways that fit the needs of the individual and the community, and that they can be utilized versus ostracized, marginalized, disempowered, and under-represented... [For] the stakeholders and systems, leaders, and citizens to understand that every human being is valuable, and that it will benefit us... to invest in people.

Kimberly understands the need to "invest in people," because of, not in spite of, devastating circumstances, like those that brought Kimberly into the child welfare system. It is in the midst of the devastation that hope, opportunity, respect, and dignity are most needed. "My main technique is to be an example, a living example, that even the worst of the worst..., the most hopeless case is redeemable if the right services are in place." Kimberly has taken her experience and faith, and began working towards making her dream a reality. Kimberly is pursuing a Master's degree in Public Administration so that she can position herself to be at the tables where policy is made. Her experience has taught her that it is often the systemic barriers that create impediments for birth parents in the child welfare system, particularly incarcerated parents. "I want to be up at those tables where they're writing those policies because these policies aren't really tailored to the population they trying to serve in a proactive, productive way..."

As I reflect on my conversations with Kimberly Mays and conclude her sketch, a statement she made comes to mind: "...nothing makes me. I make the world..." I cannot think of a more true or powerful expression of leadership than these seven words.

Kimberly Mays' transformative journey from the hopelessness of her clienthood experience to a life of leadership guided by faith and expressed in service is certainly an example of "making a new world."

## **The Birth Parent Leader Virtual Roundtable**

The virtual roundtable afforded an opportunity for me as the research facilitator to hear the voice of the multiple birth parent leader participants reflecting together on the meaning and value of their leadership, recommendations they had for the field, and the bits of wisdom they hoped readers would take away from their journeys. Eight of the nine birth parent leaders participated in the roundtable discussion.

### **Identifying the heart of birth parent leadership.**

... the capacity of a human community-people living and working together-to bring forth new realities. Another way to say this is that leadership energizes. Leadership breathes life into an enterprise, without which nothing truly new can emerge (Senge, 1999, p. 78).

I began the dialogue with the birth parent leaders by asking them to reflect on the definition of leadership that I had used as a foundation upon which to build the study. Reactions to the definition were interesting and varied.

When asked if Senge's (1999) definition was a fitting description of their leadership experience, there was general agreement that this definition was, indeed, a good fit. Specifically, the part of the Senge's definition that resonated with everyone was that leadership "...brings forth new realities" and that leadership "breathes new life into an enterprise, without which nothing truly new can emerge" (1999, p. 78). It was clear for the birth parent leader participants that birth parent leadership in child welfare represents a cultural shift, a new reality, in child welfare and that it engages and energizes not just birth parents, but also other system professionals and partners. As Mary Lopez, put it:

I think it's important. First off, we've all obviously taken responsibility for whatever actions brought us into child welfare way in the beginning and have been able to kind of use that to make ourselves useful and helpful ... [because we have] an understanding of how child welfare works and ... we can help families... and [help other child welfare system professionals] understand that

change is possible. A lot of times, people see our parents as parents and going through the system, but they don't see the real end result and how change is possible. So, I think we bring [proof] to the table that change is possible.

Mary beautifully articulates the multi-dimensional nature of birth parent leadership, the internal processes, e.g., taking responsibility, as well as the external expressions of birth parent leadership, e.g., making themselves useful and helpful. Angela Braxton punctuates the point by stating simply "...we are system changers..."

***Being the first.*** As the dialogue about birth parent leadership continued, however, important nuances and challenges to the Senge (1999) definition emerged. For example, Debbie Conway noted that though she loved the quote there was something missing in it from the lens of her life experience. Specifically, it didn't seem to speak to the challenges of being the one that clears the way, makes the mistakes, and, perhaps most importantly, becomes the focus of attention for all the good and mistakes that can occur in the work and in one's personal life. Here is what she said:

I think it's a little bit bigger than [bringing forth new realities] because in that quote you said ... 'people living and working together.' I love that quote, but there's something special that has to be going on, and I don't know if you mean the word trailblazers... [Because] somebody has to be like the point man. Somebody's got to go out there and take the hits to be the first one out there to open the trail for the rest to come... And that's kind of what we do, we take the hits, we take the glory, we take all that stuff because of the culture change: the way the culture ... in child welfare ... is so anti-birth parent engagement....

Debbie's comment provides a reality checkpoint on the Senge (1999) definition as experienced within the context of birth parents as leaders in child welfare, particularly as it relates to being the first one on the field.

I found Debbie's metaphor very interesting. In it, she conveys the risk and vulnerability as well as the crucial role of this first-generation of birth parent leaders as laying the ground work for other birth parent leaders coming behind her. There was

agreement amongst the birth parent leaders that one of the primary motivations for doing this work, risks and all, is to open the door for other birth parents to emerge as leaders within child welfare as they have.

Her comment also identifies another key dimension of being out front first. Not only is one the target for the hits, she or he is also learning in motion, succeeding and failing, all under the scrutiny of multiple stakeholders. "It's something a little bit different because the hits are hard and they affect you because our lives are so public" (Debbie Conway, Virtual Roundtable Dialogue, Portraits of Change Dissertation Study, June 2010). Debbie's comment also implies that as a birth parent leader, one has to be aware of and prepared for the pressures that come along with experience of having one's life now being subject to scrutiny. Moreover, all of this takes place this within an organizational context that is in the midst of shifting from anti-birth parent engagement to embracing birth parent leaders as partners. Angela Braxton reinforced this point:

I believe that sometimes when [child welfare] systems do see that change [in us] it's like we have no more room and not just as an addicted person but that we have no more room to make mistakes after we start working with the child welfare system and partnership. There's very little room for error there, and I know for me I can't walk that, for me that's like being back in the system, [with] me and my children dealing with the child welfare system.

Angela's comment reflects that feeling of being under the microscope, again, as though she were still a client. Even amongst the birth parent leaders who commented on the generous support and respect from other system professionals, there remained this feeling of the pressure of being the first.

**Credibility and being a professional among professionals.** Despite the pressures of being the first, birth parent leaders acknowledged the importance of their presence within the child welfare system. Namely, their stories were crucial vehicles for

inspiring changes not only among birth parents receiving services, but also the staff delivering those services and the administrators and legislators making the policies that govern the delivery of child welfare services. Each participant had a complex case when she or he was a client of the child welfare system. For most, the professionals involved in their case had lost hope along the way that change was even possible because of the lengthy history or extreme circumstances of her or his case. It was this history, for many birth parent leaders, that was the basis of their credibility as a partner and leader within child welfare. Though there was general agreement that the "PhD in life experience" was the reason their presence was needed and valued in child welfare, I was struck by the nuanced discussion about credentials and professional recognition that emerged in the dialogue:

Angela Braxton: ... I don't have a degree [in social work]. I'm a surgical technician by trade, but I do feel ... I have and am very much worthy of a degree in the affects that the child welfare system has had on me and my family. Nobody can discount that, I don't care how many letters are behind their names, nobody can discount that and nobody can tell that experience, walk through that experience.... I used to let that intimidate me: my first thing was, "Oh my god, I need to go back to school." You know what: I'll go back to school when I feel like it's time not because I'm feeling pressured to have letters behind my name. I can put some letters behind there; I'll put my own letters behind there.

Kimberly Mays: That's very true; and I want to share that if you do decide [to get a degree], [it's] going to also give you a different advantage as well.... [N]ow, ... I'm invited to tables because of my degree. That puts you at tables that you might not be [invited] to just being a birth parent.... So, getting [to] ... all the tables that deal with children administration policies enables me not only to come to [protect] ... birth parent[s] and their benefits, but I'm also able to come as a person with an education with the same level opinion as you to help you change ... policies. Because of my experience as a birth parent and my education, I can look [at a policy and say], "this is not going to work."

Debbie Conway: I don't think that's the direction I was trying to go with that. What I was trying to say is that I know for some of you and for me, I don't have the degrees behind my name either. I have something in chemical dependency, but it's not a master's degree or anything, but I still have an equal input. It's all

equal and so life experience is [equal to a degree], and they respect it as equal because of my journey and [how] I came out of it.... So, I don't have to have a degree behind my name. ...[W]e're now equal just because the department and the community service providers have given [parent partners] equal status because they value the life experience of navigating through the system and where we're at today. So that's what I was trying to say, it's not a need to go to school.

These comments may reflect another pressure, for some, not necessarily related to being the first, but needing to prove or demonstrate that they "belong" alongside the "professionals." This sentiment came up in every individual interview with a birth parent leader participant. Usually, this "prove-you-belong" dynamic was present during the early developmental phases of a birth parent engagement program the leader participants were involved in or developed. However, I believe the discussion does reflect that though for some birth parent leaders the direct experience of successfully navigating the child welfare system is valued, this experiential knowledge may not yet be viewed as on par with the professionalized credentials of other professionals in the child welfare context.

**Dissonance.** During the roundtable discussion, one birth parent leader noted that in her area being employed by the formal child welfare agency would result in her having less freedom to speak authentically about the systemic barriers and deficiencies within the child welfare system. The substantive content of the responses could have been considered informational exchange, but the tone was much stronger. As I thought more about the veritable firestorm that seemed to come from out of nowhere, I was curious about the critical, almost chastising tone of the birth parent leader responses.

This part of the roundtable stands out so distinctly because it is in such stark contrast to the patience, ease, and warmth I experienced in my individual interviews and observations of each of the birth parent leaders in the study. I wondered was there

something behind this stormy turn in the conversation. I have more questions than answers regarding this dynamic. However, what stands out most to me in reflection is not the momentary disconnection, but the manner in which the group quickly re-engaged the dialogue and each other. I believe within this example is a powerful example of relational resilience that can help diverse groups weather the temporary, yet inevitable storms that are a natural part of any collective effort.

### **A new vision of birth parents in child welfare.**

My overall hope that all of them take away from this is that people have the capacity to change and not only change but give back and heal a community. In all areas, all of them have some sort of biases or blocks up. So, the parents feel, 'Oh, that's the department, the adversarial role or the department.' Oh, it's the birth parents. We can't have them behind these doors [in child welfare]. So all of them have some kind of perceived biases about not letting the other one collaborate somehow. So, if anything, if anyone takes anything away from it is that somebody like where I came from and the history I grew up with, given the opportunity, given the support look where I'm able to be. And if I'm able to do that why can't somebody else, why can't somebody else, why can't somebody else. And so the open-mindedness on all parties involved and trying to figure out how to role model that, how do you exemplify that, how do you create that? If I had one wish that anyone took away, [it is] have an open mind and try different stuff.

Debbie's comment reflects the sentiments expressed by each of the birth parent leader participants in the study; the hope that their work and this study will illustrate that, given the supports and opportunity even the seeming worst cases can not only succeed in reunifying their own families but also contribute to the healing of the system and the community. I can think of no better expression of bringing forth new realities.

### **Chapter Summary**

In this chapter, I have presented the core, the bones, of the study in the form of portraits and sketches to illuminate the essential elements of the transformative journey from clienthood to birth parent leadership in child welfare. Incorporating Senge's (1999)



definition of leadership as a guidepost, several themes emerged from the lived experiences of the nine birth parent leader participants. With the foundation now established, I turn to the task of interpretation of the themes in light of the purpose of the study and a discussion of the implications of the study for leadership studies and child welfare.

## **Chapter V: Discussion of Findings and Recommendations for Further Study**

In the current Chapter, I present a thorough interpretation of the findings in light of my research questions. I have incorporated the metaphorical use of the transformative journey to frame the interpretation. I conclude with a critical analysis of key concepts from the literature presented in Chapter II.

The narrative portrayals illustrated the deep, inner healing that were the necessary first steps towards personal transformation. However, the portraits also revealed the ways in which the participants in the study transformed their own experience into knowledge and wisdom to be shared with others thereby not only doing leadership but embodying it's essence. The definition of leadership on which the study rests, “the capacity of a human community – living and working together – to bring forth new realities” (Senge, 1999, p. 78) is reflected in the nine themes that then represented the essential dimensions of the transformative journey from clienthood to leadership: authenticity, voice, accountability, integration, compassion, faith, inspiration, warrior spirit, and integration. However, the narrative portraits were also punctuated by the participants discussion of the organizational context in which their transformative experience and leadership development.

I began this study with the goal of understanding the transformative experience from client and service recipient to collaborative leader and partner in child welfare. I was especially curious about how birth parent leaders made sense of their own feelings of anger and shame, despair and hopelessness to become collaborative leaders and partners within the very systems in which they were once clients. I flatly assumed that the work

that of the birth parent leader participants in child welfare agencies was fundamentally leadership.

The day-to-day practice of birth parent leaders in the study exemplified leadership as defined by Senge (1999). An essential theme that emerged in the portraits was the multiple ways in which birth parent leaders were organizational interpreters and quite literally became guides for families receiving services, voluntarily or involuntarily. A core function of the daily work was to ensure that families understood the services outlined in the departmental case plan, the expectations of the court (if court involved), and the requirements of the child welfare department to be reunified with their children. The birth parent leaders helped families grasp the intent and responsibilities embedded in the professional jargon that can often stifle a family's progress.

The interpretation work of the birth parent leader participants was also beneficial to child welfare professionals. Birth parent leaders provided insight and clarity about the actions of family members that could get misinterpreted as non-compliance. Drawing on their own experiences with relapse, shame, anger, and just plain overwhelm, the birth parent leaders leveraged the trust and credibility they had earned within the system to build bridges of understanding among agency practitioners about the realities of fulfilling all the requirements within a case plan. This was particularly important for highly complex cases in which the families required multiple services and/or one or both parents were incarcerated. As Cheryl Barrett's portrait demonstrates the extremely difficult and daunting challenges families confront with few supports in place to help them navigate the case plan while incarcerated while incarcerated.

Beyond the more abstract work of organizational translating, birth parent leaders were instrumental in the identification and development of innovative programs that addressed the needs of families with children in foster care. For example, in Vancouver, WA, Debbie Conway was instrumental in helping to forge a partnership between child welfare and the Vancouver Housing Authority to increase the number of subsidized housing vouchers for child welfare involved families that needed safe, affordable housing. This is especially important for substance-affected families in which a parent's sobriety is in jeopardy if they can't find housing outside of the communities in which it is difficult or impossible to escape the reach of drugs. Debbie is constantly on the move within the community to identify available resources and services within the community to meet the needs of families, e.g., parenting classes for substance-affected families. In so doing, she is able to help families with their real needs in ways that promote their long-term success. These examples of the day-to-day activities demonstrate what the birth parents leader participants do concretely. As such, my research questions were not seeking to answer if their work was/is leadership or not? I believe their work clearly reflects leadership as defined by Senge (1999).

Though Senge's (1999) definition made clear that birth parents engaged in child welfare systems as collaborative problem solvers, mentors, advocates, etc. was, in fact, leadership. However, what wasn't clear to me was how birth parents navigated through initial feelings of hopelessness, voicelessness, and often toxic shame, to be able to "bring forth new realities" within the context of child welfare. I used the following research questions to guide the inquiry:

- What does the experience from clienthood to leadership look like as expressed in the lives of birth parent leaders in child welfare?
- What does birth parent leadership in child welfare require from birth parents and the child welfare agencies?

The narrative portrayals revealed as much about the intersection of personal transformation and leadership emergence as the importance of the relational context in which the leadership of birth parents is expressed. What sense can be made of the juxtaposition of personal transformation, birth parent leadership expression, and the contextual dimensions of child welfare?

I have alluded to the journey from clienthood to leadership as transformative throughout the dissertation. However, I have yet to elaborate on the nature of the transformative experience, and why I have chosen to use it as a metaphorical frame for the study.

### **The Transformative Journey as Metaphor**

The metaphor of the journey reflects more than simply departure, arrival, and return (Metzner, 2010). Rather, transformative journey contains within it a sense of profound and often intentional change and discovery. The return to the place of origin, the place and circumstance of one's beginning, involves sharing with others the gifts that one has found or were given in the quest. The transformative journey then contains within it a sense of purpose suggesting that while the rewards of one's personal quest cannot be achieved or received by anyone else, the new found strength and wisdom of the individual quest are for the betterment of one's family, village, or community as well.

Metaphorically, journeying conjures images of movement not only across distances but also states of consciousness (Metzner, 2010). It reminds us that we do not end transformative journeys the way we began; that we are profoundly changed along the way. “The completed journey always ends with a return, a homecoming, to the ordinary world ... that was left behind. This world has been transformed, if our journey has been successful, into a new world seen with fresh eyes. The end of the journey is the beginning of a new, empowered way of life” (Metzner, 2010, p. 226). The new world of which Metzner (2010) speaks is one that perhaps was always possible in the realm of potentiality but not accessible or even conceivable. Consequently, the power of the transformative journey is being able to see a new world replete with previously unrecognized choices, opportunities, and possibilities with a certainty that one is not only a part of this new other world but can impact it as well.

**Seeing the journey.** Thinking about the transformative journey through the lens of the transformative journey as metaphor resonated with me as I reflected on the qualities of the transformative journey of birth parents and their leadership in child welfare and my professional observations in the field and throughout the information-gathering phase of the dissertation project. It was precisely the sense of personal quest through which one is changed profoundly and from which one returns to the world a new creature, empowered with new knowledge, passion, and power, that captured my imagination and inspired a phenomenological exploration of the transformative experiences of birth parents from clienthood to leadership in child welfare.

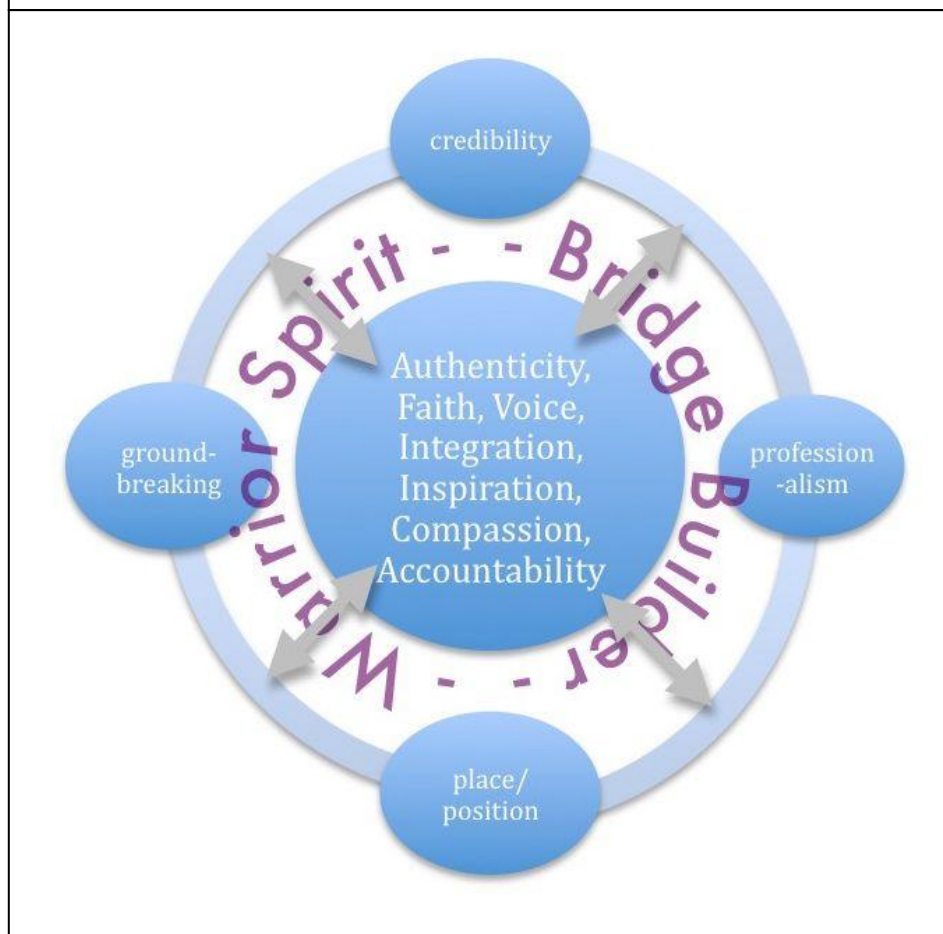
I began the study with an idea that birth parent leadership was a confluence of experiences between the birth parent’s ability to heal and integrate the debilitating

emotions that accompanied having one's children' placed into foster care, acquire new skills and a sense of self-empowerment, and opportunity for the expression of one's sense of purpose. However, the portraits reveal a nuanced journey; first, a healing one that weaves it's way through the healing necessary for a restored sense of self and empowerment; and second, the triumphant homecoming driven by a mission of service (Figure 5.1: A New Conceptual Framework of Birth Parent Leadership).

### **Making Sense of the Themes**

The themes that emerged in the construction the narrative portrayals represented a point of convergence through which each participant's experience came together. The interpretive process of constructing the narrative portraits focused on three interrelated elements I saw as central to the transformative journey: (1) the essential nature of the transformative journey for each birth parent leader participant; (2) birth parent leader perceptions of their collaborative involvement within child welfare; and (3) the emergence of the birth parent's sense of self as leader and partner alongside child welfare agency professionals. Consequently, each portrait represents what I saw as the proverbial eye of the needle; the point thru which the entire transformative narrative came into focus. Throughout the interpretive process I kept returning to an inner dialogue driven by the following questions.

*What does the birth parent leader keep returning to? What has driven her (him) forward through each phase, set back, triumph and plateau of this journey? What is vital to this person's lifeworld experience? What's the spirit of this woman's (man's) story? What gives the pages and pages and pages of texts coherence?*

**Figure 5. 1. A Revised Framework for Birth Parent Leadership**

**Inner journey.** During the construction of the narrative portrayals, I was repeatedly struck by the feelings of hopelessness, shame, fear, guilt, and seeming insurmountable circumstances that confronted birth parent leaders while receiving child welfare services. Within the mountain of emotional pain, was the recognition that what life had become, for themselves and their children, was the result of the parent's own choices. This latter point seemed the most difficult and long-lasting in its impact; the residual effect still breaking through surface of our conversations. "Mentoring parents and supporting parents through the dependency process is ... very rewarding and almost a atonement for my past mistakes that led to my own dependencies. Having your children



removed is an experience that never leaves you” (Kimberly Mays, electronic correspondence, March 2010). However, what I found so inspiring about the birth parent leaders was not so much the difficulty of their circumstances, or even that the birth parent leaders had survived them. Rather, I was amazed at how they were able to transcend and integrate the trauma in ways that enabled their support of other parents as well as collaborative involvement with the very child welfare agencies that handled, and in some instances mis-handled, their former cases.

Despite the immense pain, or perhaps precisely because of it the birth parent leaders could recognize just how far off the rails their lives had drifted. The recognition of the havoc of their choices for themselves and children became a crucial impetus for the transformative journey. Though the most difficult, the inner journey is marked by two distinct and crucial dimensions: (1) reckoning - seeing the current reality for exactly what it is and seeing oneself for exactly what one is in that moment; and (2) waking up - recognizing that the current circumstance is not one’s absolute or total existence forever and ultimately to realize that another life is possible on the other side of different choices. Consequently, the contours of the inner journey are punctuated by moments of clarity and moments of grace. That is, seeing the truth of the current situation fully with almost heart wrenching clarity and believing that a better life is somehow possible despite how impossible or improbable the circumstances may seem. It was the inner journey that signified a covenant with oneself to not return to the point of departure in the same state as one left. The inner journey is then the portal through which each birth parent leader began the life-long journey of recovery to authenticity, voice, faith, compassion, accountability, integration, and inspired action. These dimensions then do not just

represent one-time experiences but are continuously unfolding elements of a renewed life that began with those life-altering moments of clarity and grace.

**Venturing beyond the past.** The inner journey represents a moment of commitment and surrender; the transformative journey thus commences. However, in my continuing dialogue with the birth parent leader participants it became clear that though the covenant was a necessary first step something else was needed to activate the journey beyond the state of awareness and commitment to actual movement. The warrior spirit and bridge builder dimensions came to represent the transition from awareness and wanting to change to actually engaging in the work of change. The warrior spirit and bridge building dimension signal a journeying out of one's previous state of being and awareness to another, from clienthood to leadership.

The warrior spirit element represented the fire within that marked an initiation to another level of healing and awareness. I have used warrior spirit as a way to give expression to the life altering work of transformative change; this is the groundbreaking and sometimes back-breaking work of change that represents more than a tweak here or there. The warrior spirit dimension represents the demolition of destructive patterns and the construction of new, healthier ones. "I had to really focus on changing myself. At this point, I didn't have the ability to go out there and to be an upstanding citizen or anything. So all I could do is try to figure out how can I clean the inside of me" (Cheryl Barrett, personal communication, March 2010).

The transformative journey was actualized with Cheryl Barrett's focus on the inside. Brenda Lopez' moment in the mirror was actualized as she walked several miles to a clean and sober shelter. For Dave Mason, literally knocked unconscious by the

grief of seeing his daughter being taken away by the social worker, regaining consciousness and calling every substance abuse treatment option for fathers in Contra Costa county until he found an available bed without a referral.

In many warrior epic tales, the hero is often the least likely warrior; not the seventh generation warrior groomed from birth to carry the mantle but the unlikely one that has wandered for years literally stumbling upon the moment of initiation. The warrior comes to understand that the fight is not outside oneself but within and the prize not conquest over another but one's own Self. At this moment of recognition, the warrior begins a journey of renewal, empowerment that is internally driven and self authored while maintaining an openness that integrates the love and guidance from others with one's own growing internal well of wisdom. These are the early stages of venturing beyond the solitude necessary in the moment of commitment and initiation to reemerge ready to engage the consequences of one's past and venture towards the possibility of a profoundly different life.

Birth parent leaders often spoke of multiple relationships that were essential to their continued healing and growth through these early stages of initiation and re-emergence. These relationships were crucial in that it was in these relationships that the birth parent's emerging self was reflected through the non-judgmental, affirming perspective of another. These affirming relationships provided a new vision of the birth parent that they often were not yet able to conceive for themselves.

As far as regaining self-respect and confidence, those kinds of things, it was a combination of re-establishing relationships with people that I knew in the past, but on a different level. I remember specifically how I felt the day I had to deal with a probation officer, do a [urine analysis] for them – it was a professional acquaintance at one time. And I remember how I felt that day ... absolutely the lowest worm on the earth. That probation officer ended up running a teenage

girl's home... She called me and said, "we need you to come and do a group for our girls. Will you do it?" And, I thought this is the same person that made me pee in a cup. It made me realize, I guess, how it was my perception, not necessarily her perception. I mean, she was as a professional much more willing to see the healing process in me, than I was when I fell, and that made a big impact on me. [I asked her], how could you be sure that I wasn't a bad influence? She said, "Because I know you, and I know the love that you have for people." Just being able to accept that I hadn't destroyed that, if that makes sense?

These persons became communities of faith that nurtured a renewed and positive sense of self. Though often linked to a faith-based organization, these faith based communities are not necessarily religious. By faith, I mean a person or community of people that believe in another's potential and activate that belief through opening doors of opportunity. There is a Christian scripture that several birth parent leaders cited during our conversations, "Faith without works is dead" (James 2:17). I became keenly aware that birth parent leaders knew in a profound way the meaning of this text in their own life map. The people within their personal communities of faith not only spoke of or hoped they could "turn things around" but these mentors, social workers, pastors, judges, and others actively sought to call forth the emerging empowered self by creating opportunities for the birth parent's new self to be realized.

Birth parent leader participants spoke of these nurturing relationships as essential not only to their ability to be able to realize their own potential but also to reach into the reservoir of their own experience to help another. Said another way, these nurturing relationships made way for self-realization, but also established a foundational transition point from an internal focus from self healing to service to others. "The only way we keep what we have is to give it away" (Dave Mason, personal communication, March 4, 2010). The acts of paying forward the value of their own experiences created reciprocating loops of inspiration that supported their continued growth and healing,

learning and development and eventually leading within the contextual world and relationships of child welfare in which all of the birth parent leaders are enmeshed. The cycle of inspiration as I've described here signals the crucial movement from the inner self outward as an expression of building bridges of hope, mutuality, and understanding.

The bridge builder dimension is another essential element within the birth parent leader portraits. This dimension of the transformative journey represents the way in which the birth parent leaders in the study have become masterful at reaching across the multiple gaps in understanding between their own experience as former clients and many agency and court professionals. In so doing, they have emerged as cultural and experiential navigators between current birth parent service recipients and child welfare professionals as well as between professionals within multiple systems, e.g., courts, housing, drug treatment, mental health service, etc. "That bridge builder piece is really significant... There are so many ... social service agencies that need to be a part of the team in this. I feel very comfortable navigating across systems and being a part of that leadership" (Debbie Conway, personal communication, October 20, 2009). The bridge-builder dimension expands the transformative journey from the internal terrain outward to the contextual world of the child welfare agency, the court, multiple service providers, and ultimately the community at large. Given the complexity of the child welfare and the importance of local, community based services, birth parent leaders are often not only bridge builders within and across service systems, but are constantly engaging community based resources to inform and assist families. "[The] power of getting to know the resources in my community because that's what kind of helps me stay grounded too is learning how to use those resources because they're available for us, for the

community. But until I got involved in the child welfare system I had no idea of the impact that my community could help me until someone showed me that, ‘okay, instead of me going to steal some Pampers or something like that there are resources out there that would help me to learn how to [access] those resources’ (Parent Partner\*<sup>5</sup>, Contra Costa Parent Partner Program, personal communication, May 12, 2010).

**Becoming leader-partners in child welfare.** Homecoming, the return to one’s place of origin, is a central theme of the transformative journey metaphor. For the birth parent leader participants in the study, the homecoming is more than simply returning to the latitude and longitude where their own involvement with child welfare began. In essence, birth parent leader participants had returned to *do* something despite the internal and external barriers they encountered upon their return to the child welfare agency as transformed persons on a mission.

I had such a long history with [the Washington Department of Social and Health Services]. I’m not even exaggerating when I said how many times I lied and manipulated. I was a little off the charts... I got somebody fired. It was just totally insane. It was awful. I started out with that. I was known for that. So when I finally got clean and sober, I’m like I’m gonna come in here and be honest, and you fell for it a hundred times when I lied every single time before. I was really scared. I thought, ‘what are social workers gonna do?’ Because I’d never been on a true binding mission before. I’d never really been like that. I just knew something had internally change in me (Debbie Conway, personal communication, October 20, 2009).

Debbie’s reflection on her homecoming experience demonstrates again those moments of clarity as well as a new found courage, a sense of being on a “true binding mission” that buoyed her beyond her initial fears as she re-entered the child welfare agency transformed. Homecoming for birth parent leaders in child welfare is a rich and varied experience filled with celebration, recognition, service and continued growth while

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<sup>5</sup> \* This comment was the result of an impromptu discussion, so the name of the commentator is not included for confidentiality purposes.

also at times an unexpected estrangement. The role, status, and power dynamics surrounding the presence of birth parents leaders given their former client status were also persistent themes in the experience of becoming partners and leaders within the context of child welfare for the participants in my study.

The portraits themselves are narrative reflections of lives in motion within a contextual reality held in place by numerous social, ideological, and organizational forces that shape professionalized practices and the organizational system in which they function. Birth parent participants were well aware of their groundbreaking roles within child welfare as partners and leaders; that what they are doing is not the norm in child welfare. Along with the enthusiasm and passion that each conveyed about their work in child welfare agencies, there were also elements which echoed an outsider-insider status of sorts, within their return to the child welfare agencies and courts that once served them as clients. In the case of the transformative journey from clienthood to birth parent leadership, issues about the professional legitimacy, credibility and trust of former birth parent clients in decision-making or service roles, conflicting ideas about the most effective place and positionality to affect greater involvement of birth parents within the child welfare system beyond the case plan all emerged as important themes during individual and group conversations with participants in the study.

Birth parent leader participants by and large expressed a deep sense of mutuality, inclusion, and partnership in their role and leaders in child welfare. However, these contextual dissonances highlight, I believe reveal some of the crucial intersections where birth parent leaders are now emerging into new roles and functions within the organizational structure and day-to-day functioning. Consequently, there are experiences

of disconnection that occur within a context of chronic disconnection like child welfare (Hartling, 2008; Hartling & Sparks, 2008). Throughout the study the birth parent leaders provided numerous reminders that the narrative portrayals are not only individual stories but that they also contain imprints of larger contextual issues of a continuing outsider insider status for birth parents. One of the most poignant examples was the sense that “one false move” would not only effect the individual but the whole program in which birth parents were involved.

There was a bad seed when I first came on that could have ruined if for all of us... everybody outside-social workers, supervisors,... they look at our program as a whole. So if I'm doing something bad, they're not saying, 'look Dave's just doing something bad. They're going to look at [the program and say], 'we need to rethink this because these parent are doing something bad' (Dave Mason, personal communication, March 4, 2010).

I assumed that there would be a major issue within the birth parent leader experiences. So much so, my question wasn't would this be part of the experience but how do birth parent leaders reconcile it with their perceptions of themselves as 'partners?'

All of the participants could cite experiences in which they were made aware of a hierarchical status dynamic at work. For example, each one had comments about how they had to rise to a higher standard than even the social worker, i.e., in dress, as a way to maintain credibility and respect not only from the birth parents but agency and court professionals as well. I couldn't help but think that as former clients, with case histories of their own, that they always walked a tight line. Even when performing well, there was this sense of always having to “show myself approved” (Angela Braxton, personal communication, August 21, 2009).

Despite these challenges of credibility more interesting to me was the manner in which the participants in the study devised strategies that maintained their own dignity,



sense of empowerment, and respect. One of strategies that was frequently articulated was that their self worth was not tied to a status label attached to them by a professional. For each birth parent leader their sense of worth was dictated internally, or by a higher authority than the agency, usually God. Many affirmed that they were doing “God’s work” (Dave Mason, personal communication, March 6, 2010) or following the leadership and guidance of God in their work (Sherry Tomlinson, personal communication, August 21, 2009). These affirming strategies served as acts of resistance and vehicles of re-connection and eventually transformed connections (Jordan, 2004a).

The birth parent leaders ability to maintain an empowered sense of self, focus on one’s own mission, and the confidence from being ‘sanctioned’ by a higher authority seems to be a central strategy that maintains an empowered sense of self and re-engage their co-workers with the same vigor, clarity, and sense of collaboration. This is the essence of ‘relational resilience.’ “The ability to reconnect, to be resilient in relationships, to move back into connection to see if mutual growth-enhancing relatedness can be reestablished is one of the most important skills one can develop” (Jordan, 2004a, p. 58). These skills of relational resilience are central tools within the birth parent leadership toolkit.

### **A Road from Clienthood to Birth Parent Leadership**

I have started this section with “a” road rather than “the” road from clienthood as a reminder that this study is an exploratory journey. Hence, the narrative portrayals of the participants each serve as sources of illumination, a light shone on the phenomenon the transformative experience of birth parent leaders in child welfare.

**A journey through clienthood.** The transformative experiences of the nine birth parent leaders that participated in this study reflect necessary points of departure and transition that pushed the birth parent leaders along their path of purposeful transformation through clienthood, from crisis to engagement to integration and the first return. I began the study with an intent to learn from the participants what the transformative journey looked like, and through their courageous generosity I have conceptualized the journey and its multiple and varied places of transition as two joining paths: a journey through clienthood and a life of leadership (Figure 5.2).

**Figure 5. 2.**  
A road to birth parent leadership



The clienthood experience has within it the multiple transitory stages of crisis, recovery, engagement, discovery, integration, and return. Each of the stages provided the necessary clearing and foundation setting for the next.

**Crisis** represented the initial recognition that life had, indeed, become unmanageable. As Mary noted, "...what the hell happened to my life" (Mary Lopez, personal communication, March 4, 2010).

**Recovery** signaled a willingness to begin the painful and difficult work of rebuilding a life from the core outward; everything was to be made anew.

**Engagement** marked the beginning of not hoping for, thinking about, or fantasizing about a new life but the early stages of putting those dreams into action by taking the steps that could make the dream for a new life real. "...When I showed up on the steps [of the treatment center] ... I was ready to peel back the

layers of everything that had held me back” (LaShaunda Harris, personal communication, October 23, 2009).

**Discovery** marked an important transition that began the shift in focus on the world of opportunity that was there before but inaccessible before the healing process began. “[J]ust seeing a whole other world that I actually couldn’t be a part of before because I was in this hole [of addiction]. ... I saw everything in a different light. I took the time to see outside my block, my neighborhood, and myself and see the world and actually realized I could be a part of it. ” (Debbie Conway, personal communication, October 2009).

**Integration** heralds a redemption of courage, hope, and an empowered sense of self that propelled birth parents forward into a new world born of new choices and habits. Integration then sets the foundation for the first return.

The first return that began with re-entering the context, i.e., the child welfare agency, and continues with an expression of a renewed, purposeful life as an empowered, integrated partner within the organizational context from where the birth parent leaders began their transformative journey. By integration, I mean one’s sense of being whole, no longer fragmented by conditions or conditioned habits of mind (Fritz, 1989) that maintain a life-world of being perpetually scattered and shattered. Integration, in this context, reflects going from depths of pain, hopelessness, humiliation and shame to an integrated sense of self in which one is wholly, self-empowered to determine one’s life and impact the world. Kimberly Mays powerfully articulated her transformative journey this way: “Nothing makes me. I make my world ... Nothing makes me. I’m a choice

right? I create my future, you know I make my own video with what I want to see, what I want, and then how to get there” (personal communication, October 21, 2009).

Integration as I’m am using it here is not yet reflective of a full integration into the organizational structure. Rather, I believe there is an important inner pre-cursor for making the transition from margin to center, and ultimately to sustain one’s place as an equal and collaborative partner in bringing forth new realities within the organizational system (Senge, 1999). It reflects the process of healing that is central to the journey through clienthood, pushes through the transition of integration, and establishes a port of departure from which the leadership journey is initiated. Consequently, the process of healing, integration, learning, and leadership become a living dialectic that continuously expands one’s own sense of self, but also becomes the inner reservoir of knowledge and passion from which one draws to impact the organizational context in which one is enmeshed.

I am suggesting that this deeper, self-integration solidifies, or perhaps even makes possible, the integration of birth parents as leader-partners in the child welfare context. Beyond the rhetoric of what makes birth parents “useful” within child welfare, I believe this issue of integration and leadership expands the focus from a transactional paradigm of making birth parents useful to that of a truly holistic, integrative leadership paradigm. This integrative leadership paradigm would take seriously the internal processes of healing and relational resilience (Jordan, 2004a) that contribute to the capacity humans within community to bring forth new realities.

**A life of leadership.** Engaging the transformative journey as metaphor foregrounds the quality of the journey is an unending one; an unfolding path on which a

life of leadership unfolds. Rather than a singular journey between two finite experiential points, which my use of language throughout has implied, the portraits illuminate another possibility.

**Homecoming** represented a crucial point of return. This second return to the child welfare agency, the system that had been the enemy but had now seen through a new perspective that allowed authenticity and mutuality.

**Purpose** signaled more than simply returning to the birth parent's beginning place within child welfare. The portraits reveal a sense of rebirth ignited by a desire to integrate past experiences into a larger vision and mission for life. Even in the face of fear and self-doubts, the birth parent leaders in my study came to a "... real binding mission..." (Debbie Conway, personal communication, March 2010) within the child welfare system.

**Development** marked the transition from hearing the call to stepping into opportunities for learning, growth, and extending beyond previous experience into an expansive new world. The developmental stage was very much like a bootcamp in which an enormous amount of knowledge is integrated and applied within a condensed timeframe. For Brenda Lopez her work as a Veteran Parent led her into the new terrain of curriculum development for the Dependency 101, 201, and 301 courses for birth parents with children placed in foster care.

**Co-creation** reflects an integration within the organizational context that has become a natural expression of one's individual purpose and collaborative capacity for change. As Angela Braxton reflected, having healed herself, she

could was in a position to work alongside agency practitioners to “...heal the system” (Angela Braxton, personal communication, August 21, 2009).

The nine examples of the leadership of birth parents contextualized within child welfare suggest that the transformative journey perhaps must be initiated in crisis of clienthood, but leadership is required for the second return, the homecoming. In this sense, the homecoming is its own initiation to the beginning of another journey, a test of one’s resolve to a renewed life that is nurtured in the practice of leadership day-to-day. The expression of birth parent leadership then reflects as much an individual, disciplined effort as relational resilience and collaborative partnership in context.

The life of leadership, from homecoming to actualizing one’s purpose in context, from skill development and capacity building and co-creation ultimately constitute the life of leadership as expressed by birth parents in this study. Co-creation within the birth parent portraits represents the fundamental expression of leadership in which new realities are brought into being through the everyday interactions within the child welfare context in which birth parent leaders are enmeshed. The birth parent leaders portraits are replete with examples of how their presence, voice, advocacy, education, and inspired actions influence their local context in powerful and important ways. Indeed, if “...we are actively involved in creating and maintaining our social and organizational experiences [through language] ... language is constitutive in this process; it doesn’t *describe* the world, it *shapes* how we see, make meanings in, act and experience our world,” (Cunliffe & Eriksen, 2009, p. 17), then the participant’s portraits may challenge and expand the discourse about theories of power and it’s function.

What emerged from the birth parent leader reflections on their own transformative experience was an integrated perspective that could “contain” together the dynamic and generative tensions between the individual and the relational as well as the contextual and spiritual. A holistic, integrative, relational perspective of leadership that shifts the paradigm to one in which the dimensions of healing, mutuality, and relational webs of support are central to our understanding of leadership as a shared process. Such a perspective shifts the concept of leadership accountability beyond ‘did you do what you said you would?’ to a relational accountability reflected in ‘have you done the inner and relational work necessary to contribute to allow leadership to emerge and proliferate?’

Turning our attention to relational accountability in leadership suggests interesting questions about power, i.e., how it is expressed, by whom, how it functions, and for who’s benefit? Within the realm of relational accountability, power, like leadership, is a shared, mutually accessible resource. In a space of relational accountability, leadership is both a commitment to self, other, and the spaces created and recreated in the ongoing, evolving context to which all constituent social actors contribute.

For example, the ‘communities of faith’ as described above became the substance that fueled the birth parents continued growth and transformative learning and leading. The relationships then became the first canvas upon which the birth parent leaders began to map their own world; transitioning a world of powerlessness and hopelessness into purposeful living, service, and ultimately leadership.

## **A Critical Analysis of Key Concepts From the Literature Review**

The conceptual framework (Figure 2.1) that I used to organize my initial ideas were based on the protocol of the development of relevant dimensions drawn from professional practice as well as concepts from the literature as described in Chapter II (Lawrence Lightfoot & Hoffmann Davis, 1997). However, in development of the narrative portrayals additional dimensions emerged as a result of the multiple conversations with the birth parent leaders about their transformative journey. The result has been a revised conceptual framework (see Figure 5.1) that has challenged and expanded my initial theoretical ideas about the essential nature of the transformative experience of birth parents that have a foot in both the experiential world of clienthood and now leadership, and have traversed the terrain in between.

**Revisiting power.** The narrative portrayals challenged my initial ideas about power, particularly its impact, functioning, and expression within the context of child welfare. Even the definition of clienthood assumes a power-over dynamic to be challenged in a fundamental manner. The findings pressed my own deeply fixed notions about the contextual dynamics in which birth parent leadership is now emerging in child welfare. In short, these findings compelled me to look beyond traditional power-over paradigms in which the narrowed focus on center-margin, haves-have not's bifurcations had distorted my view of the varied and critical interactions in which the context itself is created and maintained by multiple actors in context beyond those with roles of organizationally legitimated roles of authority. I found the birth parent experiences illuminating precisely because of the way birth parent leaders placed themselves in the



middle of a power-laden system without the traditionally sanctioned vestiges of power or authority of other actors within the child welfare context with profound impact.

Rather than attempting to engage in discussions about power directly, by and large birth parent leaders defined themselves without “power” per se, but understood that inspiration, not compliance, was potentially the greatest resource available to them as leader-partners in child welfare. Simply put, their inspirational life stories and inspired way of being opened doors and windows of opportunity that authority, position, or education could not.

Our stories are what gives us credibility at the table to open those doors... It’s just like somebody’s BA degree or MA degree – their expertise gives them credibility. When we come to the table now ... we are equal players at the table... And our story is what gives us credibility for the answers that we reply to and the answers that [agency professionals] seek from us” (Debbie Conway, personal communication, May 12, 2010).

This perspective is consistent with Senge’s definition of leadership, “the capacity of a human community...to bring forth new realities” (1999, p. 78). The very presence of these birth parent leaders alongside social workers, attorneys general, judges, public defenders, service providers and others rattles beliefs and pervasive myths about what birth parents with certain histories, i.e., lengthy history of substance abuse, are capable of. As Debbie’s comment suggests, the credibility of their experience can create the impetus for generative dialogue in which participants are fully and equitably engaged in co-leading the process (Fletcher & Käufer, 2003). Far from making questions about who determines what policies are written, with what implications for whom, and on whom they are enforced irrelevant, I found that a social constructivist stance furthered my exploratory and critical analysis to identify alternative interchanges and interactions

through which discursive interruptions to norms can occur resulting in more inclusive, collaborative, and relational possibilities.

**Gender, race, and other –isms.** Disparities along gender, race, and class are well-documented within the child welfare literature (Brown, 2006; Casey-CSSP Alliance for Racial Equity, 2006; Scourfield, 2001; McPhatter & Ganaway, 2003; Swift, 1995; and Zajac, 2008). The binding impact of overarching grand narratives on race, gender, and class have resulted in normative discourses which are reflected throughout the child welfare system's policy, programming, and day-to-day practice (Mizrahi et al., 2009; Zajac, 2008). Though I expected these narratives to be present in my discussions with the birth parent leaders, I was not sure how these larger narratives would surface in the reflective dialogue about the journey from clienthood to leadership.

I assumed that racialized and gendered experiences would be most pronounced within the journey through clienthood. I was not clear at all as to how these might get expressed within the participants reflections on their transformative journey; were the questions about personal leadership and transformation somehow transcendent or did these experiences create a nuanced understanding of the birth parent's self concept that influenced an empowered self-consciousness in relation to normative discourses about race, gender, and class? What did the intersections between the evolving scripts about self-identity and the larger narratives about race, gender, and class look like for these leaders? Further, could my study even contribute to the broader discussions of race and gender and not get lost in a forest of other concepts and theory on race and gender? Above all of these questions about critical theory and research focus, I was most concerned that I manage my own biases, assumptions, and beliefs in ways that allowed

me to maintain a bubble around my thoughts and opinions so as not to muddle the reflections of the participants. I entered the inquiry and the lives and memories of the birth parent leaders with many questions and great enthusiasm about this.

Ultimately, my methodological compass was a sustained commitment to prioritize the voice and experience of the participants rather than my own researcher preoccupations. That said, given the long-standing and continued focus within child welfare on disproportionality and disparity my study's findings warrant some elaboration in relation to this larger discourse.

Gender played out with an interesting twist, I believe, because of the lone father birth parent leader in the study. Dave Mason spoke candidly about the gender bias he'd experienced in child welfare that favors mothers and disappears fathers. In his current role as a Parent Partner, he recounted numerous experiences of fathers "not getting a fair shake" in child welfare compared to mothers. Indeed, one of the first obstacles within child welfare is the requirement to establish legal paternity (Malm, 2002) before even being included in the case record which is required to receive services.

The exclusion of fathers within child welfare (Merkel-Holguin, 2003) seems the backside of long-standing gender bias based on widely accepted notions that mothers are natural nurturers and thereby well-suited for parenting (Hays, 1996). Fathers, within this dated social construction of parenthood are best suited to responsibilities outside the home that do not require nurturing, caretaking, and other qualities deemed central to parenting. It is only recently that child- and family-serving systems have change long-standing policies and practices that have created a service system that, in effect, excludes fathers (Merkel-Holguin, 2003).

Dave Mason's experiences as a husband and father that wanted to co-parent his children but feeling marginalized by the system made a deep imprint on his leadership map. The impact of watching a courtroom full of professionals give his wife a standing ovation while barely acknowledging his presence on the date their case was vacated set a direction for the vision of what he wanted to do and how he wanted to help other fathers. Mentoring parents, particularly dads, is central to his leadership work in child welfare. "So, when I got out of this, it was always in my mind, 'Man I wish I could start up a program that I could go and support some of these parents, especially dads. I mean this is something that was crossing my thoughts ever since I got out of child welfare. I start out like this, all dads wanna raise their kids'" (Dave Mason, personal communication, March 3, 2010).

One of the most interesting findings in the study was the way some of the participants spoke about race in our discussions about the transformative journey from clienthood to leadership. As stated previously, I had my own questions about whether the study's focus on the transformative journey would blur or eclipse a discussion about race. Upon further reflection I have come to believe that I had wrongly dichotomized my thinking as either the transformative journey or race. I had not seen this compartmentalization in the field, and as such this all or nothing thinking prevented me from exploring in depth while in the field how birth parent leaders in the study perceived racialized experiences as an integrated part of their transformative journey. In addition to researcher reflections on discussion with the birth parent leader participants, there is also the impact of the researcher on the discussions about race within the study.

The issue of race surfaced on the periphery of conversations with the leader participants of color and largely was absent in my discussions with the other birth parent leaders. However, what I found interesting was my initial blindness to the impact I may have had on the presence or absence of a discussion about race with the birth parent leaders in the study. For example, as an African-American woman did my own assumptions about the racialized and gendered experience of being the “first” or “only” overshadow opportunities for deeper probing into relevant racialized aspects of the transformative journey from clienthood to leadership. Conversely, might there have been certain assumptions made on the part of the participants, that I understood the racialized, gendered dynamics impacting African-American women and therefore it didn’t bear elaboration on their part. Or, were issues of race overlooked by the white participants because it may be considered an unsafe or uncomfortable topic?

One conversation stands out for me on this point. LaShaunda Harris noted that when she was hired in her current role, she laughed with her new supervisor, “oh, y’all picked the black girl this time” (LaShaunda Harris, personal communication, October 22, 2010). We both shared a good laugh, understanding intuitively the experience of being the “only” one or the first. However, as a researcher LaShaunda’s comment provided an opening, an opportunity for further exploration into a nuanced aspect of her transformative journey that was missed in lieu of what I assumed was a common life experience between African-American women. This experience provided an important lesson as a novice researcher-maintaining an unwavering focus on the purpose of the study. This doesn’t mean to become inflexible or robotic, but within the methodological

parameters of a portraiture method sustained attention on the research purpose throughout the ebbs and directions of the dialogue is a necessary skill and learned art.

The gender and racial nuances here would make for a fascinating follow-up leadership study, particularly on the development of leadership self-concept. For example, only half of the women in the study identified themselves as leaders unequivocally when I asked if they thought of themselves as leaders, and only one of these African-American. Dave defined himself as a leader right away. I would be curious to see how leader self-concept emerges with more birth parent leaders of color, mother and fathers. .

I was surprised that except for two instances, the mothers in the study didn't speak of the system's focus on mothers as the legal parent rather than the fathers. Instead, I found the redemptive manner in which mothers spoke of the "...privilege of being able to raise my kids when it didn't look like I would be able to..." (Cheryl Barrett, personal communication, March 4, 2010). Far from a discussion about unfair or uneven scrutiny on mothers, the majority of the birth mothers in this study were more focused on maintaining their parental rights, being able to create a healthy, stable, and loving home for their children, and assist other parents in doing the same. Or, if their parental rights had been relinquished or terminated the focus turned to improving their life circumstance so that when their children did begin searching they would be the best parent and person possible.

However, I believe that the pertinent question here is how do these grand narratives impact or interrupt the leadership awareness and expression of birth parents leaders? To that end, I am not sure that I have a bright light to shine on this nuanced

aspect of the journey. What I can offer is that the birth parent leader participants in my study have become masterful at integrating crucial elements of their experiences to inspire others, who like them, find themselves on a very dark road. Meaning, birth parent leaders have learned to integrate these cultural lessons as a part of their leadership map. Despite my best thinking, we would do well to inquire with them, prioritizing their voices, into such a dialogue specifically focused on the intersections of race, gender, and leadership as birth parents within child welfare. The insights of birth parents of color, mothers as well as fathers, may very well illuminate systemic and day-to-day practice barriers that maintain the overrepresentation of families of color that have been unacknowledged and unexplored heretofore.

### **Chapter Summary**

In this Chapter I have provided an interpretive summary of the narrative portrayals of the transformative journey from clienthood to birth parent leadership in child welfare in answer to my guiding research question: what does the transformative journey from clienthood to birth parent leadership look like from the perspectives of birth parent leaders in child welfare. Drawing on the metaphorical frame of the transformative journey (Metzner, 2010) as the conceptual scaffolding, I presented a description of the transformative experience grounded in metaphor and life-world experience.

The summative essay highlights the dynamic interplay between individual and contextual dimensions that support the emergence of the on-going partnership of birth parents within child welfare systems as active partners. Consequently, the study presses beyond the existing literature about birth parents in child welfare from within the consumer or customer involvement orientation to include discussions about their

emerging roles as leaders and partners. I have incorporated Senge's (1999) definition as a theoretical anchor to inform my interpretation and maintain a bridge that maintains the connection between the focus of the study as an inquiry into leadership with the life-world experience of the birth parent leader participants. Having presented a coherent interpretation of what these findings mean in light of my research questions and a critical analysis of key concepts from the literature presented in the review of the literature, I now turn to a discussion of the implications of the study.



## **Chapter VI: Implications and the Continued Development of New Knowledge of Birth Parent Leadership**

In this final chapter, I discuss implications, present limitations, and provide recommendations for future research to continue contributing to the development of knowledge in this emerging and exciting area of inquiry.

### **Leadership and Change.**

My use of Senge's definition of leadership, "the capacity of a human community – people living and working together – to bring forth new realities" (1999, p.78) is reflected in the leadership of the birth parents participants in this dissertation research. Further, the portraits reveal the nuanced contours of the journey through clienthood and the lifelong commitment to service that marked each birth parent leaders experience. However, though I am still inspired by Senge's definition of leadership, I must agree with Debbie Conway that "...there is more to it than that" (personal communication, March 12, 2010). In particular, there are two integral themes that maintain a dynamic tension in birth parent leadership as presented in this study: (1) the internal focus and discipline needed to prepare one for leadership participation and (2) the shared external processes through which leadership flows.

Embedded within Senge's (1999) definition is the awareness that if leadership is the extant capacity within community then part of the work of "leaders" is to attend to the practices that would allow one to be a conduit through which leadership can flow. The narrative portrayals of the transformative journey of birth parents and their leadership expressions are illustrative examples of the manner in which they kept their own inner context purposeful, focused, and unwaveringly optimistic. Purposeful service motivated

by love is a clear life commitment for all of the birth parent leaders I spoke with, “it’s not about the money, it’s who we are” (Dave Mason, personal communication, March 6, 2010). Fritz has called this level of commitment as “fundamental choice” (1989, p. 188).

He describes it as committing oneself to “...a basic life orientation or a basic state of being” (Fritz, 1989, p. 188). However, more compelling than the definition itself is his further elaboration on its function in the lives of the committed.

When you make a fundamental choice, convenience and comfort are not ever at issue, for you always take action based on what is consistent with your fundamental choice. Once you make a fundamental choice, and entirely new basis for dealing with reality becomes available. The meaning of circumstances often shifts because of a fundamental choice. You begin to see how circumstances, no matter what they may be can work toward fulfillment of your fundamental choice. (p. 191)

Fundamental choice, in my view, must be intimately connected to the individual leader’s sensibility and responsibility within the communal capacity for leadership as Senge describes. Within the leadership literature, though there is considerable attention paid to the personal development of the leader (Cashman, 1998; Kouzes & Posner, 1995; Oakley & Krug, 1999). However, the preponderance of the leadership literature is still situated within hierarchical notions of leading that makes primary conceptualizations of the leader-follower dyad that is contextualized within hierarchical management structures. This literature continues to disproportionately place the generative fuel for making change within the leader’s position or authority. Whether by inspiration or manipulation, the buck stops with “the” leader. However, even with the promise of shared and relational leadership paradigms represent emerging areas of theoretical and practice significance. Even within these emergent genres, there seems to be only a minor portion that sheds a light on the practices that “prepare the vessel.”

However, Senge's (1999) definition of leadership reflects the interplay between the internal and the external. Another constellation of processes must rest upon the foundation of fundamental choice for leadership to move and flow. I would suggest that collaboration is such a tool. Collaboration is essential for birth parent leaders within child welfare. For birth parents to establish themselves as contributing members of a community for intended change within child welfare, a social context in which they are outside of the legitimized power structures, necessitates the ability and skills to collaborate with the multiple actors across the varied agencies and personnel that constitute this dynamic system. Collaboration is not a luxury, but a requirement in their day-to-day leadership practice.

Cheryl Barrett described herself as having "no power." However, her ability to contribute to the overall success of families served by the child welfare agency in real and practical ways are clear examples of leadership as described by Senge (1999), i.e., helping a family learn to use the public transformation system which makes it possible for them to fulfill the requirements of their case plan or be prepared for court appearances, establish trust with professionals within the child welfare system, trust that becomes the breeding ground for future partnerships. These are the kinds of new realities that birth parent leaders bring about in concert with others in the child welfare context. Collaboration becomes the conduit through which birth parent leadership flows. For birth parents in this study collaborative partnerships are an essential element of their leadership.

I believe the contribution of this study is that it sheds a light on the crucial interstices of the practices and discipline that keep the channel open while continuing to

hone one's ability to operate within and maintain spaces of generative dialogue necessary for new knowledge and innovation to emerge within a shared, organizational context. Further, the study identifies as a viable subject of study nuanced ways in which power is expressed, shared, understood, etc. within organizations that have the chronic disproportionate distributions of power throughout the system such as child welfare by leaders that have a fundamental choice orientation. For example, I was struck by the acknowledgement, almost declaration, of powerlessness within the child welfare relational hierarchy set up between social workers and clients. "The social worker is the captain of the ship" or "I'll be the first to tell you I have no power ok." However, this was often stated as a minor fact, like yesterday's weather. Instead, the leadership of the birth parents I spoke was wrapped up in their ability to inspire hope, be a voice, and inform and creatively problem solve, and for that they had all the credibility, legitimacy, knowledge (or access to it), and know-how required. In short, my study raises the question of how leadership studies can begin to consistently with issues of power within relational leadership paradigms.

### **Child Welfare**

I believe the study has implications for child welfare also. There is a considerable and growing knowledge base on strategies for the meaningful involvement of birth parents across the spectrum of services within the child welfare system, from child abuse prevention and family support (National Council on Crime and Delinquency, 2007; Jennings, 2002), child protection (Anthony et al., 2009), and even court improvement (Boyd Rauber, 2009, 2010). However, there is little research on the emerging role of birth parents as collaborative partners and leaders in child welfare. The portraits in this

study contribute to the growing knowledge base about birth parent leadership from a relational, social constructivist paradigm which, I believe, is especially significant for public child welfare agencies interested in initiating or sustaining programs or policies that include birth parents in these innovative, collaborative ways.

An important point of clarification about the study is to remember that though the research questions and findings were focused on the transformative journey from clienthood to leadership as experienced by the birth parent participants, their portraits contain valuable knowledge about the change process that might be of particular import to child welfare system practitioners, particularly as related to change in parents struggling with multiple issues. In my discussions with the birth parent leader participants, all were careful to mention the importance of their example to other system partners. For example, birth parent leaders regularly reminded social workers, attorneys, and other practitioners that they were not the exception but rather a living demonstration of what the right supports and services could do. Each was mindful that they sit at the system tables now representing the possibility of what other birth parents can do with the necessary supports in place (Debbie Conway, personal communication, March 2010). It is also important to remember that though these narratives reflect clienthood experiences, they are based on birth parent leaders that are no longer clients and as such whatever relevant insights on the change process that can be gleaned from this study should take into account that the reflective experiences of the birth parent leader participants might in fact differ from birth parents presently involved as clients.

The value of the study is precisely in the illumination of crucial points of intersection of different perspectives and experiences that have resulted in the creation of

knowledge and innovative practice (Gergen, 2009). Within the narrative portrayals of the birth parent leaders are insights about how child welfare agencies can create organizational cultures that invite the knowledge, wisdom, voice, and spirit of birth parent leaders into the dialogue that is shaping child welfare. I hope this study will generate opportunities for discussion about the leadership potential of birth parents as discussed here. As important, I hope that child welfare agencies begin to consider seriously models of relational leadership that have the possibility for greater inclusion and partnership amongst the varied system partners within the child welfare context.

### **Limitations of the Study and Recommendations for Further Research**

I began this study with the intent to illuminate the essential dimensions of the transformative journey from clienthood to leadership using the methodological lens of portraiture. Portraiture seemed a fitting methodological approach to the subject of inquiry given the depth and power of these life stories and my interest in them.

Portraiture is a methodology designed to nestle into the rich details of place, historical specificity, personal experience, and the unexpected generosity of spirit encountered in a authentic sustained interaction about another's life experience. From all this, the portraitist renders a narrative portrayal of the richness, texture, the jagged edges and smooth contours of a life in motion within a social context (Lawrence-Lightfoot & Hoffman Davis, 1997).

The methodological intent for the study was not correspondence but coherence in my narrative representations of the lived experiences of birth parent leaders in child welfare (Piantanida & Garman, 2009). As such a primary limitation of the study was the number of participants. More than once during the field observation and information

gathering phase of the project, I wondered if I had not jeopardized my ability to “go deep” with a mixed agenda. Had my own internalized notions of “more is more” impaired my ability, particularly as a novice portraitist, to grasp the level of detail portraiture requires? Though the portraits do provide sources of light on the phenomenon of the journey from clienthood to leadership. To do again, I would follow the good advices of my dissertation chair, contain my enthusiasm, and reduce the number of participants and select only one geographic location or those closer in proximity rather than multiple sites across the country. I would also be more strategic about including a representative number of birth parent leaders of color, mothers and fathers, to further expand our knowledge about the complex intersections of race, gender, and birth parent leadership within child welfare, i.e., minimally fifty-percent parents of color.

Ultimately, the narrative portrayals revealed as much about the intersection of personal transformation and leadership emergence as the importance of the relational context in which birth parent leadership is expressed. As such, the study and its findings suggest a few interesting and timely areas for further study:

**Birth parent leaders that enter child welfare for reasons other than substance abuse, e.g., domestic violence.** The intensely personal nature of portraiture, I believe, would reveal valuable insights into the nature of birth parent leadership for parents with other life altering issues. As stated previously, the participants in this study, identified through snowball sample, all entered child welfare with significant substance abuse histories, and were utilizing the Alcoholics Anonymous/Narcotics Anonymous 12-step program in their recovery. Though estimates of substance affected families in child welfare hover around 50%-80%, there are often significant, complex circumstances and

challenges that bring families and their children into the care of the child welfare system (Boyd Rauber, 2010; Johnson & Sullivan, 2008; Russell, Harris, & Gockel, 2008). There is so much more to learn from birth parents as leaders within child welfare.

**A portraiture study with fathers.** One father participated in this study. Father engagement is an issue that is gaining considerable attention within child welfare (Malm, 2002). Identifying fathers to discuss their experiences within a system that ostensibly doesn't see them would make a timely and valuable contribution to the field.

**A portraiture study of birth parent leadership with parents that had relinquished or had their parental rights terminated.** This study had three participants who had experienced relinquishment or had their parental rights terminated. Outside of these three, one birth parent leader didn't want to even "be a part of that conversation" and several others willingly assisted birth parents that wanted to relinquish but would not hire a parent to mentor others if they've relinquished or had their rights terminated. I believe a study with birth parent leaders with this unique perspective to discuss the nuances of their experience and its imprint on their leadership would give voice and form to a rarely explored topic.

Though there are several methodological approaches that could be of enormous value to the areas for future research I have articulated above, I think portraiture would be of great value within leadership studies broadly and in child welfare more specifically. Portraiture promotes a balance between researcher scrutiny and a relational accountability with the research participants. These two essential elements, researcher scrutiny and relational accountability, become the basis for mutuality throughout the research process. Portraiture invites the researcher to enter the world of the participant as learner rather



than expert, thereby creating valuable and important opportunities for the participant to teach, guide, and lead the exploration of the phenomenon as she or he has experienced it. The space between researcher and participant becomes one in which the research endeavor is shared by the two mutually as both step into and out of the role of teacher and learner.

The shared space within portraiture is an invaluable tool for researchers and participants as it reminds the researcher to tread lightly, respectfully while remaining unwaveringly focused on the purpose of the study but not forsaking the dignity and wisdom of the participants. Likewise, participants are asked and encouraged to engage the research exploration drawing on the unique nuances of their experience to lead and illuminate the way. In research studies like this one where participants are rarely acknowledged as teachers, leaders, or experts in their context, portraiture's focus on mutual engagement and researcher-as-learner are of great value to the field as they expand the role, responsibilities, and boundaries of traditional researcher-focused paradigms in ways that invite new levels of participant engagement and partnership in knowledge development. That said, it is important for novice portraitists to know that the method can take the researcher into unexpected terrain.

Portraiture is a methodology of intimacy. It requires a willingness and ability to see not just the person holistically but also the context that has influenced the phenomenon that is the subject of the portrait study. Portraiture seeks to go beyond the general to explore the hidden, at times, forgotten spaces within the recesses of lived experience and memory, and pushes even further demanding that the participant engage this inner journey accompanied by a researcher (in this study, a novice brandishing a

notepad and recorder!) The opportunity to create and maintain this level of connection within the context of a research endeavor was one of the things that initially drew me to the method. However, a portraiture study on the transformative journey from clienthood to birth parent leadership required that I negotiate both organizational and interpersonal boundaries throughout the inquiry.

Conducting research within child welfare agencies necessitates clearly articulated protocols that described the research I wanted to do, who would be involved, and how the findings would be used. The organizational concerns for the protections of those involved within the system are necessary and appropriate safeguards intended to ensure the safety of the participants as well as the public child welfare agency. In my study, with the focus on birth parent leaders that were whose cases were closed but still a part of the system as collaborative partners was unique. One of the strategies that I found especially useful for gaining access to the day-to-day activities of the birth parent leaders was that I identified a person to serve as an institutional guide that would facilitate the internal movement of my research request to the appropriate people for approval. More importantly, this institutional guide served as my sponsor within the agency that assisted me with everything from scheduling interviews and securing conference rooms to helping me understand the organizational climate and culture. The institutional guide was also instrumental in helping me understand the roles and functions the birth parent leaders were fulfilling in their respective public child welfare agencies. The institutional guides also provided some perspective about the value and impact of the birth parent leaders' work within the agency and community. For example, in Contra Costa, it was extremely valuable to have the Family Engagement Unit Supervisor, Judi Knittel, assist me in this

capacity. As a respected member of the agency and 30-year history as a social worker, Ms. Knittel's support was an invaluable resource for the study.

Another area of concern in the design of the study was the nature and sensitivity of the study. The portraits reveal a depth of emotional suffering and pain that each of the birth parent leader participants had to re-engage in order for me to grasp their unique journey. Therefore, I felt it was important to provide more than just a signed consent form that would serve my purposes for collecting information. To that end, I included contact information for local mental health service providers to the participants along with the consent form.. Though it felt awkward and intrusive, I asked explicitly that the participants identify people within their current support system that could be called upon prior to beginning the study if they needed the additional support. I noted in writing and during each interview that they could refuse to answer any question. Most importantly, I attempted to make clear that I understood and would honor their ownership of the stories that I used to craft the portraits. As such, I ask them to be the first to review and comment on their portrait.

The construction of a portrait is always a negotiation in which I, as the portraitist, had to reflect in the most coherent manner I could what I perceived. However, the subject of the portrait is its heart and soul, without whom there can be no portrait. In some cases, it took several discussions, and frankly misunderstandings, to come to a place mutual understanding. At issue for me, as a novice portraitist, was making sure I not only captured the words and phrases accurately but that I was able to embody on the page the spirit and intent of the birth parent leader. Beyond the information gathering tools described in Chapter III, I found that my willingness to repeatedly check-in with

participants, while on-site and during the crafting of the portrait was invaluable to capturing the spirit of the portrait. Open communication and dialogue throughout the inquiry helped me maintain trust and honor the covenant that I established at the beginning of the project, a common misstep among researchers, qualitative and quantitative alike (Mertens, 2009). Lastly, I want to underscore that although the birth parent leader portraits are inspiring and triumphant, I want to caution other researchers to remember the emotional toll the research can take on the participant and the researcher. In retrospect, I am not certain that at the outset of the study I was aware just how much I was asking of the birth parent leaders for their participation in this study. Perhaps, because this is not my lived experience, I may never know but I believe that the values and practices I used in the course of the project maintained a transparency and empathy that were beneficial to the research process.

### **A Concluding Point: The Imprint of this Research on the Researcher**

I have presented my reasoned arguments and thoughtful opinions throughout on these pages. However, I cannot conclude this dissertation without brief reflection on its impact for me as a practitioner-scholar, and how it will inform my own work, now and into the future.

I began this project with a desire to bring the voices of birth parents to the center of a research project about their experience in child welfare, on both sides of the experiential spectrum-clienthood and leadership. This commitment to bring the person to the center did not stop with the research participants. I realized in the process that the research also invited me to the center along with the participants. At different points throughout the research, being drawn to the center was a bit unsettling. I hoped this

research would be a useful contribution to scholars and practitioners in child welfare and leadership studies by prioritizing the voices of birth parent leaders. As the lead researcher, my job was to focus the light on the experiences of the participants while staying safely in the shadows. However, I wasn't completely prepared for those moments where I had to step from behind the notepad and recorder and bring myself to center.

I struggled from word to word at times to write the portraits and implications for research. There I was, just me, and my thoughts about the incredibly inspiring lives shared in the hours of interviews and talking around a kitchen table or two. In the end, I remain awed by the enormous courage it took for the participating women and man to delve into their own shadows for the purposes of this study. I am also now aware of the courage it takes to be a scholar-practitioner of conscience. It is not enough to be a technically competent and relationally accountable researcher. Though these qualities are essential, I discovered that I must be equally courageous. By courage I mean my work was not only to bring the participant voices to forward, but also to not obstruct or silence my own authentic voice. When I began the study, I was committed to having those on the margins be in the spotlight. However, I had not recognized that I had not integrated myself, my voice, into the larger purpose of the study. At the conclusion of the study, I recognize one of the many gifts of the transformative journey from practitioner to scholar-practitioner of conscience, oddly enough, has been finding my own voice.

In the course of the research I found that there were places I as the researcher preferred the standing out of sight, behind notepad. However, in all research at some point the researcher must come forward and provide her own interpretations,

contributions, ideas, and opinions. I was not sure I could capture the depth and power of the birth parent leader experiences compellingly and coherently. One particular experience stands out related to this point. At the conclusion of my last individual interview with Brenda Lopez, I thanked her for sharing her life and memories with me during my visits, and just as I was about to leave she said one simple sentence that made a indelible impression on me as a scholar-practitioner of conscience. She gave me a hug and said “I trust you with them.” I thought about that on the lengthy drive to the airport that night. I felt at that moment the weight and responsibility of being a scholar-practitioner of conscience; that is, to be aware that in the process of conducting research I was asking for the permission and pardon to venture into and take away pieces of people’s lives for my own purposes. Brenda’s comment made real for me the covenantal relationship in research in those five words.

### **Chapter Summary**

In this chapter, I have set forth my thoughts on the implications of this study within the broader context of leadership and change as well as child welfare. I have suggested that the findings of the study reveal as much about the personal journey of transformation as it does the importance of the web of relationships in which birth parent are enmeshed. The study is compelling in that the findings provide rich, lifeworld examples of the intersections between the individual change and relational leadership. I have also discussed my thoughts on “fundamental choice” leadership and other contributions to the literature. I concluded the chapter with a list of recommendations for further inquiry into the phenomenon of birth parent leadership in child welfare. Having presented implications for the study, possibilities for how the study might contribute to

the leadership literature, and ideas for continuing to develop new knowledge in the emerging area of study, I now turn to my final conclusion in the study-a self hermeneutic describing my own transformative journey as a result of the inquiry.

## Chapter VII: Epilogue

### Learning to See in the Light

I began this inquiry with the hope of illuminating the transformative experience of going from clienthood to leadership as expressed by the nine birth parent leader participants in the study. I set forth an interpretive analysis of the findings that illustrates the experience within the metaphor of the transformational journey, and in so doing, hopefully I have sufficiently answered the two questions that guided the inquiry: (1) what does the experience from clienthood to leadership look like in the lives of birth parent leaders in child welfare and (2) what does birth parent leadership require from the birth parents and the child welfare agency. The research, findings, interpretation, analysis and implications being complete, I now turn to a discussion that will bring the research full circle by returning to the epistemological and ontological roots and soil of the study.

The epistemological roots of my research are grounded in social constructivism. The ontological ground into which these social constructivist roots extend and are nurtured by is a social justice research agenda that explicitly espouses the inherent political nature of all research and posits an agenda for positive social change within the community in which the inquiry takes place. I incorporated Mertens (2009) work on the transformative paradigm as a broader framework in which to situate my methodological approach (Figure 3.1). However, I have not yet elaborated on the contribution of these findings to research that seeks to alleviate suffering and oppression. The essential question at present is what contributions can my research make to the ongoing discourse on anti-oppressive practice, a social justice research agenda, and the long-standing body of activist scholarship?



I believe that the main contribution of this portraiture study to the on-going discourses on a social justice research agenda, anti-oppressive practice, and activist scholarship is that it embodies a wholistic, compassionate, and integrated picture of a healing methodology (Dillard, 2008). Dillard (2008) describes a healing methodology as the "...practices/pedagogies that explicitly engage and enact the cultural knowledge, historical and traditional wisdom, politics, and ever present spiritualities ... Healing methodology ... must also engage and change that which it encounters: *It must involve action*" (Dillard, 2008, p. 286). In keeping with the activist praxis of an explicit social justice research agenda, healing methodologies are not simply internal but they embody a dialectic between inner healing and communal action/service. The birth parent leader narratives contain within them refreshing depictions and perspectives on power and empowerment that are based first on one's ability and opportunity for deep change and transformative healing that become the foundation for action. I believe that these narratives challenge the embedded adversarial dichotomies that are deeply set within the theoretical stances of extant social justice paradigms (Gutierrez, 2008).

The birth parent leader portraits reflect the possibility of working within a social system without a recognized power source, and establishing an entirely different basis for leadership, namely inspiration. Cheryl Barrett exclaimed on more than one occasion that she "...had no power" (personal communication, March 3, 2010). However, Cheryl realized that she did have love, hope, and authenticity in abundance, and with these she moved mountains of despair and ignorance. Likewise, I believe these portraits may help to expand the dialogue among activist scholars and researchers to include methodologies

that contain within them a love principle or ethic that is infused throughout research process.

In this context, "...love is a political principle through which we struggle to create mutually life-enhancing opportunities for all people" (Darder and Mirón as cited in Denzin & Lincoln, 2008, p. 3). It was this principal I saw expressed in Sherry Tomlinson's comment that there could be no more "us versus them" (personal communication, August 21, 2009). The example of the birth parent leaders does not negate the presence of bias or practices of marginalization within the child welfare system. However, birth parent leaders repeatedly spoke of the important balance between speaking the truth of their experience, the good and bad, while also having the skill and competence that allowed them to return to the table repeatedly as empowered, self-possessed and self-sanctioned partners able to serve and lead in a way that invites the collaboration and leadership of others in the context.

Beyond the practical and theoretical implications of this research (articulated in the previous chapter), I remain excited by the possibility of how these findings may contribute to the on-going dialogue about means of accomplishing the ends of a social justice research agenda, anti-oppressive practice, and activist scholarship that aim to alleviate suffering and promote healing, empowerment, and reciprocity within self and community.

### **A Final Note**

"The metaphor for phenomenology... is shedding light" (C. Kenny, personal communication, July 9, 2010). A single source of light emphasizes complexity, texture, contrast, and in so doing can illuminate certain aspects of a composition while masking

others. How the light is directed fundamentally impacts the image as a whole, what we 'see.' The use of light creates the mood and texture of the whole. There is a special gratification that comes from looking at a piece from multiple angles; discovering something new. In this way the observer engages the artist in a dialogue about the piece; looking, probing, seeking something unseen, unrecognized, or unnoticed from the previous viewpoint or line of sight. The purpose of this portraiture study on the leadership journey of birth parents within child welfare was intended to do the same, shine a light on a previously under-explored topic in the shadows of the professional's discourse about birth parents.

The emergent theme in each narrative portrayal was intended to move the light, casting a different source of illumination so that we might see something else, previously undiscovered in the phenomenon of the transformative journey from clienthood to birth parent leadership. The study has benefitted from multiple sources of illumination; reflection on practice-based experiences within child welfare agencies, review of multiple disciplinary theories within and beyond leadership studies, and, most importantly, the insights and reflections of birth parent leaders in child welfare.

Each emergent theme serves as a source of illumination that yields a line of sight into the nuanced and diverse nature of the leadership of birth parents in the contextualized lifeworld where they have situated themselves as empowered, contributing partners rather than refugees on the margins. It is in standing back and seeing each of the textures, colors, strokes on the canvas framed that we can glimpse first and then to bring ourselves into the composition. In it we see the essence of something transcendent,

extradordinary, and at times utterly familiar. At times we are graced to see ourselves 'out there.'

Thank you Angela, Kimberly, LaShaunda, Dave, Brenda, Debbie, Sherry, Mary, and Cheryl for bringing the power and beauty of leadership so clearly into view.

## APPENDIX

## **Appendix A: Informed Consent/Letter of Invitation**

### **Informed Consent/Letter of Invitation**

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Principle Investigator: Nicole R. Bossard, MA, CYT  
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Washington, DC 20002-6321  
Ph: (202) 236-6526 Fax: (202) 544-1832  
Email: [nbossard@antioch.edu](mailto:nbossard@antioch.edu)

Research Title: Portraits of Change: The Experience of Former Agency Involved Parents as Leaders in Child Welfare

Date:

Dear \_\_\_\_\_,

My name is Nicole Bossard, and I am a doctoral candidate in the Ph.D. in Leadership and Change at Antioch University. You are invited to participate in a research study on parent leaders in child welfare systems reform I am conducting as part of my doctoral dissertation requirements. The purpose of my study is to explore the experience of former service recipients currently involved in child welfare from a leadership perspective rather than a client-focused lens through written narratives about them that may inform future systems reform within a child welfare context. Though there is no shortage of professional literature (practice and research literature) on engaging parents in their case plans, there is relatively little information about the experiences of parents, especially birth parents, as leaders and system partners involved child welfare. This absence is especially noticeable when you look for accounts from parent leaders in their own voice. Instead, I would like to explore how parent leaders view their past experiences in child welfare, current involvement in child welfare from a leadership perspective, what factors facilitate and/or impede their involvement as collaborative leaders in child welfare, what sustains their involvement, and what wisdom they have to share with other system partners about the value and role of parents in child welfare. Your participation in this study is completely voluntary and you may withdraw from the study at any time without penalty.

I would like to provide you with more information about how I plan to conduct the study. Your participation will involve:

- (1) completing a biographical questionnaire
- (2) participating in one on-site, in-depth interview and follow-up conversations for clarification;
- (3) participating in one focus group with other parent leaders;
- (4) completing two reflective leadership exercises;
- (5) sharing with me any materials that would help me to understand your work, like photographs, news articles, diary entries, digital stories, etc. if you so choose; and
- (6) participating in the review and analysis of study results and development of recommendations for the field (optional).

This is a collaborative research project, and in collaborative research the participants and researcher have a more equitable relationship than other research approaches. The primary difference is that as the research facilitator, I recognize that the “data” belongs to you. Our conversations are the data that will be gathered and these conversations are your life stories and experiences. My responsibility is to ensure that there are ample opportunities for you to comment on the research process and products, and to actually engage you as a partner in the project. My job then is to keep you in the loop, and provide copies of transcripts and any interpretations of them to you for review. I also invite you to comment on any common themes or patterns that float to the surface in the interpretation process, and hope that you can participate in a virtual roundtable for all the research participants where we will review the study findings and collectively outline implications and recommendations to other child welfare system partners related to the collaborative involvement of parents as leaders in child welfare.

You will have the chance to review transcripts of all our conversations and focus groups. The dissertation study will be read by three committee members, and will be available to the public in its final form. Segments of the dissertation will also be used in scholarly publications and presentations. Requests and invitations to co-present and/or co-author these pieces will be made as opportunities arise. Once the dissertation is completed I will provide you a complimentary copy. All research activities associated with this dissertation study will take place between February and June 2010.

I will strive to maintain measures of confidentiality throughout the course of this research study. You may choose a name (a pseudonym) that we can use to identify you on all materials produced during the study that reflects who you are without naming you directly if you are more comfortable using a made-up name rather than your own. The pseudonym will be used in all phases of the research, in all the records, in all drafts of the dissertation, and any scholarly publications or presentations upon completion of the dissertation study. Your identity will not be revealed in any published form, **UNLESS YOU SPECIFICALLY AUTHORIZE ME TO USE YOUR REAL NAME.** Using your real name is completely up to you, and rather than me making that decision for you, I

leave the choice in your capable hands. If you have any questions about this, my contact information is listed below.

The anticipated risks to you are no greater than those normally encountered in your current work on parent involvement within the child welfare system. However, I have identified contacts for community-based mental health providers in your area should you want that additional support (see attached).

This study will be beneficial to parent leaders who have yet to recognize their own leadership potential. The portraiture study will benefit other child welfare system partners by giving voice to the leadership competency of parents in transforming the face, form, and function of the child welfare system. I also hope that this study will benefit you. Opportunities for deep reflection are often few and far between in our very full schedules. A chance to reflect on your life and collaborative work from a leadership perspective, while taking stock of the significant people, events, and lessons along your journey can prove immensely valuable as you plot your course for the future. And, I do not take it lightly that, if you accept this invitation to participate, you are entrusting me, as a collaborative partner and researcher, with your story. I will honor that trust professionally and personally by maintaining a spirit of authenticity, transparency, and collaborative partnership throughout all the phases of the research study.

Once again, your participation in this study is completely voluntary, and you can withdraw at any time without penalty. ***If you agree to participate in this study, please complete and sign both copies of the attached consent forms.*** Return one to me and keep one for your records. Again, if you have any questions about the information contained in this letter or the consent forms, don't hesitate to contact me at the number below.

If you have any questions regarding this study, you can contact me at (202) 236-6526 or by email [nbossard@antioch.edu](mailto:nbossard@antioch.edu). If you have questions regarding your rights as a research participant, you may contact, Dr. Lisa Kreeger ([lkreeger@antioch.edu](mailto:lkreeger@antioch.edu) or 937-319-6144), Chair, Institutional Review Board, Antioch University Ph.D. and Leadership and Change Program. Please reference the Portraits of Change study.

I hope that you will take part in this study, and that you will enjoy the chance to reflect on your leadership individually, as well as with other parent leaders. I look forward to our first conversation and the learning journey that follows.

Warmly,

Nicole Bossard, MA  
Doctoral Candidate



***Community Based Mental Health Provider Contact Information***

For Contra Costa County (CA) participants, please call the following to find community-based mental health providers in your local neighborhood:

Contra Costa County Mental Health Provider Network  
(925) 957-5122

***Community Based Mental Health Provider Contact Information***

For Washington state participants, please contact the following to find community-based mental health providers in your area:

Thurston County, WA –  
Behavioral Health Resources  
3857 Martin Way East  
Olympia, WA 98506  
800-825-4820 or 360-704-7170  
[www.bhr.org](http://www.bhr.org)

Pierce County, WA –  
OptumHealth  
3315 South 23<sup>rd</sup> Street, Suite 310  
Tacoma, WA 98405  
866-673-6256 or 253-292-4200  
[www.optumhealthpiercersn.com/index.html](http://www.optumhealthpiercersn.com/index.html)  
Monday – Friday: 8:00AM – 6:00PM

King County, WA –  
King County Mental Health Plan  
800-790-8049  
<http://www.kingcounty.gov/healthServices/MentalHealth/Services/Outpatient.aspx>  
[x](#)

Yakima, WA –  
Greater Columbia Behavioral Health Regional Support Network  
101 N. Edison Street  
Kennewick, WA 99336-1958  
800-795-9296 or 509-735-8681  
<http://www.dshs.wa.gov/mentalhealth/gcbh.shtml>

## Appendix B: Participant Consent/Use of Psuedonym Form

Antioch University  
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 Washington, DC 20002-6321  
 Ph: (202) 236-6526 Fax: (202) 544-1832  
 Email: [nbossard@antioch.edu](mailto:nbossard@antioch.edu)

Research Title: Portraits of Change: The Experience of Former Agency Involved Parents  
 as Leaders in Child Welfare

1. I have been informed about the procedures for participation in the study as detailed in the informed consent/letter of invitation.

YES \_\_\_\_\_ (please initial)

2. I am willing to participate in the research study entitled Portraits of Change: The Experience of Former Agency Involved Parents in Child Welfare

YES \_\_\_\_\_ (please initial)

3. I understand the focus group interviews will be audio and video recorded. I am willing to be recorded via audio and video recording.

YES \_\_\_\_\_ (please initial) **-OR-**

NO \_\_\_\_\_ (please initial). If NO to Item 3, go to Item 3A.

3A. I am willing to be audio recorded only.

YES \_\_\_\_\_ (please initial)

4. I understand that this research, in whole or part, may be used for future scholarly publications and presentations, and that my confidentiality will be maintained as described in the Letter of Invitation and this Consent Form throughout all publications and presentations.

YES \_\_\_\_\_ (please initial)

5. I would like the researcher to use my Real Name (provide real name as you want it to appear in Item 5A. If you prefer a pseudonym, skip to 5B).

5A. YES (please circle here, if yes).  
If yes, provide name here

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5B. NO (please circle here, if no). I would like the research facilitator to use the **pseudonym** I've provided below on all materials associated with the study.

I would like the research facilitator, Nicole R. Bossard, to use the following pseudonym on all materials associated with the study, e.g., the dissertation as well as other scholarly publications or presentations that may follow.

Pseudonym:

---

Participant Name (print):

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Participant Signature:

---

Date: \_\_\_\_\_

Once again, your participation in this study is completely voluntary, and you can withdraw at any time without penalty.

If you have any questions regarding this study, you can contact me at (202) 236-6526 or [nbossard@antioch.edu](mailto:nbossard@antioch.edu). If you have questions regarding your rights as a research participant, you may contact, Dr. Lisa Kreeger ([lkreeger@antioch.edu](mailto:lkreeger@antioch.edu) or 937-319-6144), Chair, Institutional Review Board, Antioch University Ph.D. and Leadership and Change Program.

PLEASE SIGN AND DATE BOTH COPIES OF THIS INFORMED CONSENT FORM.  
RETURN ONE COPY TO ME, AND KEEP THE OTHER COPY FOR YOUR  
RECORDS.

## Appendix C: Biographical questionnaire

### Biographical questionnaire

Antioch University  
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Ph: (202) 236-6526 Fax: (202) 544-1832  
Email: [nbossard@antioch.edu](mailto:nbossard@antioch.edu)

Research Title: Portraits of Change: The Experience of Former Agency Involved Parents  
as Leaders in Child Welfare

### I. Introductory Information:

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Street Address; \_\_\_\_\_

City \_\_\_\_\_ ST \_\_\_\_\_ Postal Code \_\_\_\_\_

Are you a parent (circle all that apply)?

Birth parent.

Foster/resource parent.

Adoptive parent.

Comment:

1. Please describe the kind of work you do on child welfare issues, paid or volunteer, e.g., supporting other parents with open cases, training social workers on parent involvement, etc.?

[illegible]

2. How long have you been doing work on parent involvement in child welfare?

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3. What motivated you to begin working on parent involvement issues in child welfare, i.e. personal experience, invitation from another parent or an agency person, etc. Please provide descriptions and examples from your life experience.

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4. What sustains you in your work on parent involvement in child welfare? Why do you keep coming back to it?

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5. What do you hope will result from your work on parent involvement in child welfare?

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6. How would you describe the impact of your work on parent involvement in child welfare?

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7. What motivated you to participate in this research study on parent involvement in child welfare?

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8. What do you hope to take away from participating in this research study?

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## **Appendix D: Past as Prologue Exercise**

### **Past as Prologue Exercise**

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Research Title: Portraits of Change: The Experience of Former Agency Involved Parents  
as Leaders in Child Welfare

*The Past  
as  
Prologue*

## **The Lifeline of a Leader**

### **Introduction:**

*“The undiscovered self is an unexpected resource. Self-knowledge is empowering.”*

*“It (telling stories) is a way of making our lives available to others . . . We need to look at multiple lives to test and shape our own.”*

*“I have become aware that the portions of these life histories that interest me most are the echoes from one life to another, the recurrent common themes . . . I believe in the need for multiple models, so that it is possible to weave something new from many different threads.”*

Mary Catherine Bateson, *Composing a Life*

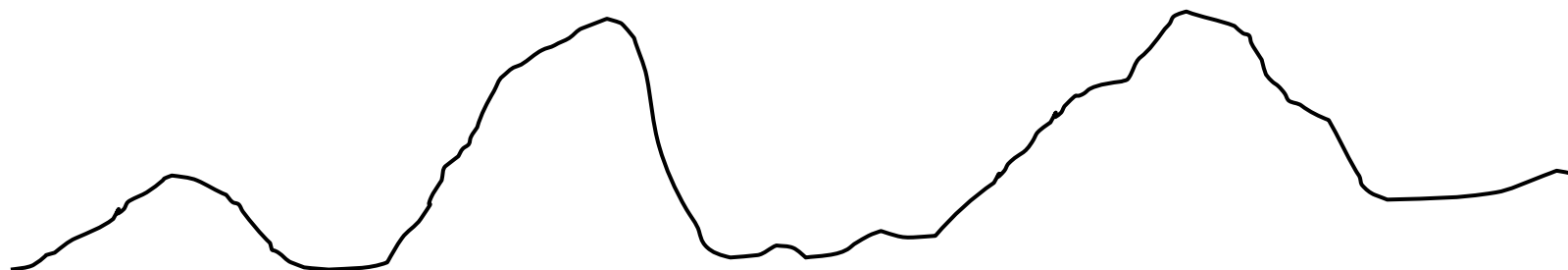
### **Overview:**

The purpose of this assignment is two-fold. First, I want you to record your personal history of involvement with child welfare, as a former service recipient and now as a leader-partner in child welfare. Second, I want you to examine your history for the threads that tie it together and give it coherence – the common themes and what’s made your life a work of art; that have made it make sense. Here is how I would like you to do this during the next 30 or so minutes:

1. On the blank page that follows draw your “lifeline”. Start with your first encounter with the child welfare system and stop at the present moment.
2. Draw your lifeline as a series of peaks and valleys over time with the peaks representing the high points and the valleys the low points. Make the heights and depths accurate relative to each other.
3. Next to each peak and valley write a word or two that identifies the experience. Then identify, if possible, the following:
  - a. the catalyst or spark for the peak or valley experience or change. Note friends, mentors, teachers and others and what they did that helped you through the experience;
  - b. the transformations or changes in your life that occurred as a result of the peak or valley experience or change, e.g., work situations, relationships with significant others, lifestyle, guiding principles and values, ways of “being”, and so on.
  - c. The transformations or changes in your conception of yourself as a leader as a result of peak or valley experience.

4. Identify the threads that tie your life experience on the leader lifeline together and give it coherence – the common themes and what's made your life a work of art; those things that made your experience in child welfare make sense. Note the following:
  - a. themes, patterns, and important strengths that emerge;
  - b. the underlying convictions that have held steady;
  - c. thoughts about your purpose, passion or calling that emerged;
  - d. any special insights from the exercise.
5. How do you feel about what you see?

*The Past as Prologue: My Personal Lifeline*



## **Appendix E: Personal Leader Vision Exercise**

### **Personal Leader Vision Exercise**

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Research Title: Portraits of Change: The Experience of Former Agency Involved Parents  
as Leaders in Child Welfare

***Personal Leader  
Vision***

## **Personal Leader Vision**

### **Introduction:**

*“Personal mastery goes beyond competence and skills, though it is grounded in competence and skills. It goes beyond spiritual unfolding or opening, although it requires spiritual growth. It means approaching one’s life as a creative work, living life from a creative as opposed to reactive viewpoint.*

*When personal mastery becomes a discipline – an activity we integrate into our lives – it embodies two underlying movements. The first is continually clarifying what is important to us. We often spend so much time coping with problems along our path that we forget why we are on that path in the first place. The result is that we only have a dim, or even inaccurate, view of what’s really important to us.*

*The second is continually learning how to see current reality more clearly. We’ve all known people entangled in counterproductive relationships, who remain stuck because they keep pretending everything is alright. Or we have been in meetings where everyone says, ‘we’re on course relative to our plan,’ yet an honest look at current reality would show otherwise. In moving toward a desired destination, it is vital to know where you are now.”*

Peter Senge, *The Fifth Discipline*

### **Overview:**

The purpose of this assignment is to help you explore your own personal purpose and vision based on the discoveries from “*The Past as Prologue*” exercise. Please take a moment to look over these questions about personal vision:

- What is it that you really care about as a parent leader in child welfare? What is your deepest purpose or passion for this work? What called you to it and keeps you here?
  - What is it you really want to accomplish in your work in child welfare?
  - How would your life and the lives of those you live and work with be different as a result of these accomplishments?
1. Personal vision comes from within. It is intuitive not rational. It is a reflection of our deepest purpose, passion or calling. I would like you to begin with a reflective exercise. Using the statements below (see Item 3) as guides, imagine a time in the future. Picture the answers to these questions as if you had accomplished all that you wanted.
  2. Take a few minutes by yourself to outline your vision. Use pictures, metaphors and symbols to describe your vision. Use whatever brings your vision alive for

- you. Find or create a symbol for your vision that will help make your vision more concrete and understandable to others.
3. Given the challenges you face in the child welfare arena, your current knowledge and experience, and your awareness of your deepest personal desires, outline a conception of yourself as a leader that would help address these challenges and help you realize your personal vision.
    - a. What I care about
    - b. What I do as a leader
    - c. How I will get there
  4. Write a brief summary of your personal vision and conception of self as a leader that you can present in two to three minutes.
  5. Share your vision. You will be invited to share your personal vision and conception of self as a leader before we begin the focus group.



## **Appendix F: Individual Interview Guide**

The interview guide is based on the research questions with probes included for each question. Individual interview texts were analyzed for common themes.

- Research Inquiry - The experience of being a former service recipient currently involved in child welfare systems improvement and systems change activities

### Interview questions

What was your first encounter with the child welfare system?

How did your involvement with the child welfare system impact you, specifically how you thought about yourself?

How are you working with the child welfare system now?

What motivated you to get involved with other parents in the child welfare system once your case was closed?

How has your involvement in system reform impacted you, specifically how you think about yourself?

Do you see your work impacting power dynamics between system professionals and birth parents? Do you think your work will shift perceptions about birth parents currently involved in child welfare?

Is that something you hope will result from your work?

Before you started working with parents, had you considered yourself a leader? Do you see yourself as a leader now?

Would you describe the work that you do as leadership? How would you describe yourself, your leader-self, i.e., a collaborative partner, servant, radical rebel, social/community activist, advocate, etc.?

How would you describe the impact/value of the work you do on other parents with open cases, other system partners, the community, and people important to you?

How do you see your role as a leader impacting your children?

- Research Inquiry – Facilitators of collaborative involvement of parent leaders in child welfare

As you think about your work with child welfare now, what made your involvement easier, or even possible?

What resources or supports did you draw on?

Were there some inner resources that helped pushed you forward, e.g., inner motivations, spirituality, love for your children, other's confidence in you, etc.?

What were some of the outer resources that you drew on?

Was there a stipend for your involvement, free training, child care or transportation reimbursement, etc?

- Research Inquiry – Impediments to the collaborative involvement of parents as leaders in child welfare

Were there things that made your parent involvement work difficult, i.e., logistics challenges, no reimbursement, negative attitudes of others, etc.?

Did you have any inner barriers to participating in parent involvement work, i.e., a lack of confidence, lack of clarity about your role, felt like you needed to know more, etc.?

- Research Inquiry - Parent leader hopes for what will result from their involvement in child welfare

What's your vision? What do you hope will happen in the future as a result of the contributions your making now?

- Research Inquiry - Sustaining the collaborative involvement of parent leaders

Based on your journey as a former service recipient and now parent leader in child welfare what is needed to achieve the collaborative involvement of parents as collaborative leaders in child welfare? What's needed by the parent leaders themselves? By other system partners?

What is needed to sustain and grow the involvement of parent leaders?

- Research Inquiry - Parent leader wisdom to share with other parent leaders about doing this work; child welfare professionals; policymakers; and researchers.

Reflecting on your own leader journey what wisdom would you share about your parent involvement work with other parent leaders? Child welfare professionals and social work educators? Policymakers? Researchers? If you could speak to these other partners and they were really listening, what would you share.

### **Appendix G: Focus Group Interview Protocol**

The initial focus group interview questions and probes were developed from relevant dimensions drawn from my experience as a consultant in child welfare with a keen interest in the emergence of parents as collaborative leaders in child welfare, and the pilot study findings that have informed the analytic framework (Lawrence-Lightfoot & Hoffmann Davis, 1997) that guided me through the data gathering process. Relevant dimensions, as described by Sara Lawrence-Lightfoot and Jessica Hoffmann Davis, are “...areas of interest or preoccupations [that] are not quixotic or idiosyncratic; they are the result of knowledge and experience. As such, these preoccupations skillfully direct the focus of the inquiry” (1997, p. 113). As the interviews and focus groups progress, identified themes and sub-themes will also inform focus group questions and probes.

#### Relevant Dimensions:

*Answering the call* – what motivated you to do this work? What drew you in?

*A warm welcome, chilly reception, or...* – how did other system partners react to your involvement when you first came on the scene? Has that changed over time? In what way? What’s worked well in terms of parent involvement and leadership in your experience?

*Show me the money* – what about the logistics, reimbursement, employment status, consulting contracts, benefits, etc. Is the system making room for you in this role? How is your program making it work? What’s working well?

*Coming into your own (as leaders)* – Did you think about yourself as a leader when you began this work? What experiences impacted perceptions of yourself as a leader? What helped you make the transition from service recipient to leader in child welfare? Describe interactions with particular people, a unique experience, who/what has and still helps you along this leader journey. What is your personal-leader vision.

*What does the future hold* – What makes parent leadership and parent involvement in child welfare work well? Think about a time when you felt like everything was falling into place. As if, everyone were in “the zone,” what was that experience like. What was happening? What has gotten in the way of parent leadership? What would you like to see in the future of child welfare in terms of parent involvement and leadership?

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