HOW TO USE THE TOOL ROOM FOR PARENTS

A translation of the tool PLACE AUX PARENTS

Guide for a participatory meeting aimed at discussing children's needs

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1 CONTEXT

It is within a collaborative approach involving parents, caseworkers, administrators, and academic researchers that the tool Room for Parents was created. In order to promote the use of the participatory approach and to improve the dialogue between parents and the actors present in the child's life during the IIP / ISP, each dimension of the ecological systems analysis of the child's needs is accompanied by a pictogram and the language used is adapted. Efforts have been made to ensure that the items are described in evocative words for the parents. To this end, four groups, each with 8-12 parents living in a context of neglect or at high-risk, were invited to participate in a focus group. During the meetings, parents proposed simple and representative formulations for every items. The parents' suggestions were integrated so that each item is now accompanied by a pictogram, a simple sentence, as well as concrete examples that represent, among other things, different stages of child development, if needed.

For those who would like to learn more about research related to this guide, the evaluation of the PAPFC2 was conducted by a team of researchers from UQO in close collaboration with the program's coordinators and has led to the development of two research reports. The first focuses on the evaluation of the program's implementation (Bérubé et al., 2012), while the second focuses on impact evaluation (Bérubé et al., 2014). The tool Room for Parents/Place aux Parents, developed as part of this evaluation, has led to a variety of research on parents' perspectives, the benefits of using such a tool (Bérubé et al., 2015), and the caseworkers' perceptions of the needs of families (Bérubé et al., 2017). More research is underway!

¹We use the terms "individualized intervention plan and individualized service plan" or "IIP / ISP" to refer to a meeting during which caseworkers and families (and sometimes other people involved with the child) come together to analyze the child's needs and discuss the actions to be put in place to help meet these needs. The basic idea is to create consistency around families and to invest energy into the implementation of actions. This form of activity may be called by other names in different organizations and regions (e.g., intersectoral or interdisciplinary intervention plan). We will, however, retain the name "IIP / ISP" for the purpose of this guide.

The development of Room for parents is based on that the involvement and participation of families a particular vision of situations of neglect that differs from are essential to gain a better understanding of the individualizing conceptions and expert intervention models. The approach traditionally used to intervene with families in context of neglect is influenced by the medical model (Éthier, Couture, Lacharité and Gagnier, 2000; Firestone, 2009; Lacharité, 2011, 2019). In this context, the caseworker defines the problem and identifies the solution (LeBossé and Dufort, 2001; Mongeau, Asselin, & Roy, 2007). It is therefore from an external perspective that the family situation is assessed and taken care of. This approach inevitably creates an asymmetrical relationship in which the family is being subjected to interventions in a rather passive manner. The parents may feel that they have no power, that their skills are not recognized, and that their ability to define their situation and to think about solutions to improve it are not considered. This leads to a feeling of mistrust in youth protection agencies (Laurin, René, Dallaire, & Ouellet, 2007).

Several criticisms have been made in relation to this type of approach. Among other things, it has been criticized for individualizing social problems - the responsibility for negligence rests solely on the parents and for subordinating the expertise of parents to that of professionals - family situations being fully defined and taken care of by the youth protection services (Lacharité, 2011; Lacharité, Moreau and Moreau, 1999; LeBossé and Dufort, 2001; LeBossé, 1996; Lemay,

Wolock and Horowitz in 1984 denounced the neglect of neglect, insisting that this issue was not well understood and dealt with. They proposed changing the definition of maltreatment to focus on the needs of children. In this way, the focus would be on providing the support and resources needed to meet their needs, rather than investing energy into repairing the perceived deficits in parents, which were then considered as being responsible for the whole situation. More recently, many authors focus on the needs of children in situations of neglect (see Lacharité 2014, Chamberland et al. 2012, Ward & Rose, 2002). This approach changes the way we assess the situation and intervene with families. On one hand, there is a shift from an assessment that focuses on identifying problems to a participatory analysis focused on the child's needs. On the other hand, the deficit-centered intervention is set aside to encourage expertise sharing among actors (parents and caseworkers) who are present around the child. This approach to neglect and the resulting intervention is based on two important principles: 1) the importance of developing an ecological vision of neglect and 2) recognizing

child's situation.

Developed to facilitate child needs analysis meetings as part of the PAPFC2, Room for Parents is consistent with the program's approach. However, the tool is not only useful for this program. It can be used in any situation where a child's needs are at the center

PROACHES

2.1 THE ECOSYSTEMIC APPROACH

The ecosystemic approach is based on the ecology model that helps understand the onset and maintenance of neglect through the interaction and accumulation of various personal, interpersonal and social factors (Tanner & Turney, 2003). Bronfenbrenner (1979) argues that a person's development is influenced by its interactions with its environment. Based on this paradigm, Lacharité, Éthier, and Nolin (2006) present neglect as a double disruption: a disruption of the parent-child relationship (e.g. negativity in the relationship and few interactions) and a disruption of the family-environment relationship. (e.g. isolation, social exclusion of the family). This approach requires consideration of all the systems in which the child evolves in order to understand the child, his/her development, behaviors, etc.

THE ECOSYSTEMIC APPROACH Figure 1 – illustration of the ecological systems theory CHILD'S FAMILY CHILD'S SURROUNDINGS CHILD'S NEIGBORHOOD CHILD'S NEIGBORHOOD SOCIETAL VALUES AND STANDARS

ILLUSTRATION: UNDERSTANDING THE ECOSYSTEMIC APPROACH

Emily has been struggling to function well at school for the past few weeks. She hit the other kids in the play-ground, she has difficulty concentrating during the day, she doesn't talk much, and she doesn't do well in her exams. With her mother's consent, the family's caseworker contacts Christian, Emily's teacher, to invite him to a participatory needs analysis meeting. During the meeting, Christian is asked to talk about how Emily works at school. He talks about how difficult it has been lately. He says Emily is aggressive and she doesn't collaborate. He says he tried everything: he encouraged her, punished her, ignored her... He doesn't know what to do anymore. The mother then began to talk about Emily's father. Christian offers to leave since this information does not concern him. However, the caseworker invites him to stay because she thinks it could enrich his understanding of Emily's behavior. The mother says that Emily's father has been incarcerated for a month and she doesn't know how to talk about it with her daughter. She simply told her that her father was in prison, but she doesn't know how to answer her questions because she finds the subject difficult. She has decided not to tell her anything else. Christian then understands Emily's actions better and sees the impact that the family's situation has on her. During the rest of the meeting, the mother, Christian, and the caseworker discuss the actions they could take to help Emily through this difficult time.

The exosystemic approach allows for a broader understanding of the child's situation and avoids individualizing difficulties. Action targets can then go beyond the child-teacher relationship.

2.1.1 THE ECOSYSTEMIC APPROACH FOR ASSESSING THE NEEDS OF CHILDREN AND THEIR FAMILIES

The ecosystemic analysis of children developmental needs is based on a theoretical approach that combines developmental and ecological theories. This framework was derived from the work of the UK Department of Health (Department of Health, 2000) and has been adopted in Canada to structure the response to children with protection needs. Among others, this framework has been used in the work of Looking After Children (Kufeldt et al., 2000), SOCEN (Lemay & Ghazal, 2009), and AIDES (Chamberland et al., 2012). For the sake of consistency, we will use the expression "Framework for the Analysis of Children Needs", a term very close to the one developed by the UK Department of Health, and now widely used in Quebec, mostly thank to the work by the AIDES team (Chamberland et al., 2015; Léveillé & Chamberland, 2010). The developmental model states, on one hand, that it is necessary to take into account the achievements specific to each age period in order to properly assess the needs and potential of each child. On the other hand, it takes into consideration a set of personal, familial, and social factors to explain the child's current situation. Gray (2002) presents four main principles on which this framework is based. The analysis of the child's needs should:

BE CHILD— CENTERED

BE DESIGNED IN A WAY
THAT THE DIFFERENT
ACTORS AROUND OF
THE CHILD (E.G. PARENTS,
FAMILY, CASEWORKERS)
WORK TOGETHER TO MEET
THE CHILD'S NEEDS

RELY ON AN ECOLOGICAL UNDERSTANDING OF CHILD DEVELOPMENT

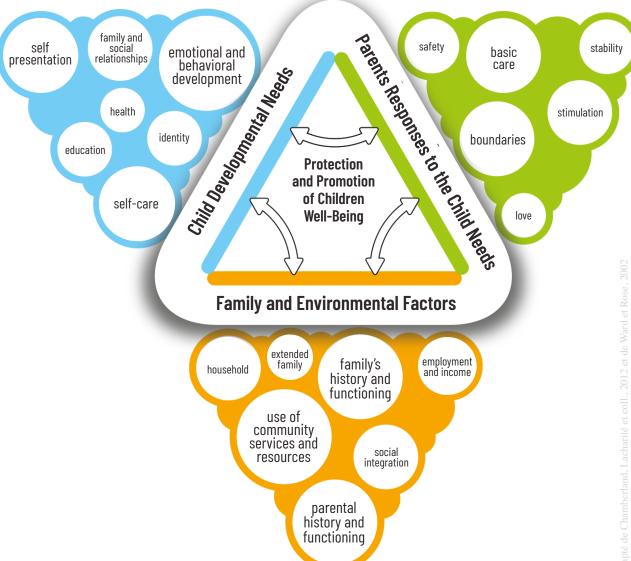
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BE SEEN AS AN ONGOING PROCESS IN WHICH OTHER ACTIONS ARE ARTICULATED (E.G. DIFFERENT DIRECT SERVICES TO THE CHILD AND HIS/HFR FAMILY).

The Framework for the Analysis of Children Needs is illustrated by the shape of a triangle. On the left side are the child's developmental needs; on the right side are the adults' responses to the child's needs. At the base of the triangle are family and environmental factors. Appendix 1 provides a definition of each dimension of the model.

dapté de Chamberland, Lacharité et coll., 2012 et de Ward et Rose, 2002 rré du document PAPFC²: Le guide de programme ◎ 2014 Carl Lacharité

Figure 2 – The Framework for the Analysis of Children Needs



EXCERPT FROM THE PAPFC² PROGRAM GUIDE

This ecological systems framework posits that a child's well-being is the result of the interaction between the developmental needs that he/she experiences at each period of his/her life, the ability of the adults in his/her immediate environment (especially his/her parental figures) to perceive and respond to each of these needs in a socially appropriate manner, and the quality of the environment that provides the child and adults with the necessary resources to facilitate this relationship. (Lacharité, 2014, pp.31-32)

The participatory approach is part of a logic of increasing the empowerment of families. It requires recognition of the experiential expertise of families and involves the sharing of power between the caseworker and the family (Laurin, et al., 2007). It is, therefore, the complementarity of the professional skills of the caseworker and the experiential skills of the parents that enables a sensitive, informed, and comprehensive analysis of the child's needs (Holcomb-McCoy and Bryan, 2010; LeBossé and Dufort, 2001; Lemay, 2009). It allows parents to have their say so that several points of view are shared and problems, needs, and interventions are defined and co-constructed in a dynamic dialogue (Lacharité, 2011; Laurin et al., 2007). To ensure everyone's participation, it is important to recognize that individuals have the skills to solve their problems (Lacharité, Moreau and Moreau, 1999; LeBossé and Dufort, 2001; Lemay, 2009). Lacharité and colleagues (1999) propose five actions to promote the establishment of an effective partnership between the family and the caseworkers (see the self-observation grid for the principles of the participatory approach, Appendix 2):

Allo two-way communication in which professionals do not use theoretical jargon

Focus discussions on child needs and planning for intervention

Support joint decision-making between parents and professionals

EXCERPT FROM THE PAPFC² PROGRAM GUIDE

information

with families

without the vigorous participation of the parents and the child reproduces, in the lives of these people, the obstacles they face in their the family's relationship to its community (Lacharity, 2014, p.33)

The term "assessment" refers to a specialized action, focused on the knowledge and perspective of a professional (social worker, psychologist, doctor, nurse, etc.), aimed at describing the situation of a person (or family) based on specific conceptual frameworks proposing normative benchmarks. In this sense, an evaluation is an act carried out by a competent professional with the aim of providing specialized information on one or more specific aspects of a person's functioning. This person participates in the evaluation as a source of informa-

volves the integration of various perspectives (including that of prohis/her relatives) in order to understand the person's overall situation. ered. Rather, it is the collective building of a portrait of the situation, the partnership in the establishment of priorities, and the co-creation

The application of a participatory approach is based on a particular conception of families. Thus, the caseworker should:

> View neglect as a result of several factors. In other words, develop an ecological vision of neglect;

Consider that parents make a central contribution to understanding their child's needs and their family situation.

The combination of these approaches (ecological, developmental and participatory approaches) supports the importance of holding a dialogue meeting that brings together all the important adults in the child's life. It will determine the direction of the objectives and activities contained in the individualized intervention plan or in the individualized service plan (IIP / ISP). Various tools can be used to facilitate this meeting. The Room for Parents tool, which is the subject of this guide, has been specially developed to facilitate the course of these meetings. Other tools, such as those developed under the AIDE Initiative, can be used during the process of accompanying the child and his/her family (Chamberland et al, 2015).

Figure 3 – Trajectory leading to the implementation of the IIP / ISP

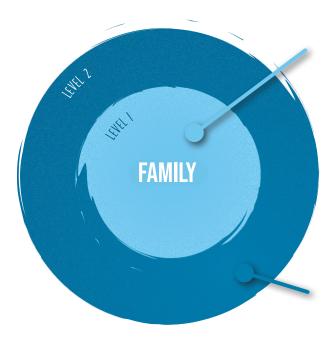


3.

THF FOR PARENTS

3.1 DESCRIPTION OF THE TOOL ROOM FOR PARENTS

Room for Parents is first used to analyze the needs of the child (participatory needs analysis (see figure 4), which then makes it possible to plan the actions to be implemented around the child (participatory action planning - see figure 4).



INTERVENTIONS

Participatory needs analysis

Participatory action planning

Professional follow-up with the family

Direct actions with the child

INTENSIFICATION OF INTERVENTIONS

Actions to further integrate the family in the community

Collective actions

Parent-to-parent support

Integration with organizations in the region

3.1.1 THE TOOL ROOM FOR PARENTS - CASEWORKER'S VERSION

The caseworker's version of the tool consists of 8 sections (see Appendix 3)

General information

Information about the children

Attendance at the dialogue meeting

History of previous services

Inclusion and exclusion factors

Documents to be provided at the dialogue meeting

Comments and signature

Dialogue
with parents
(participatory
analysis of child
and family needs)

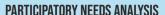
The caseworker's version of the tool is used by the family caseworker who is responsible for the IIP / ISP (Youth Protection Act or Act respecting health services and social services). The family caseworker is the one who is responsible for organizing help around the child's needs (Lacharité, 2014). He/she must first identify on the form whether the dialogue meeting is a participatory analysis of child and family needs (main interventions), an intensification of interventions or a Re-analysis of the child's needs (see Figure 5).

Figure 5 – Identification of the type of analysis

PLACE AUX PARENTS

3.1.2 CASEWORKER'S VERSION

Participatory needs analysis. Dialogue meeting taking place with the family and partners.



(main interventions)

The caseworker completes the tool Room for Parents.

INTENSIFICATION OF INTERVENTIONS

(intensification)

The caseworker completes the tool Room for Parents prior to the dialogue meeting.

He/she then uses it during the dialogue with parents and partners.

RE-ANALYSIS OF THE CHILD'S NEEDS DURING THE DIALOGUE MEETING

(following the intensification of interventions)

The caseworker completes the tool Room for Parents once again before the dialogue meeting.

He/she then uses it during the dialogue with parents and partners.

Paricipatory need analysis. Main interventions.

This dialogue has to take place when a family is in the early stages of the process. The meeting aims to analyze the child's needs in order to plan a series of actions to support the child and his/her family (1st level intervention in the description of activities - see page 14). The needs analysis can be done with partners or alone with the family for a first step leading to the production of an IIP / ISP. This meeting may take place at the family home.

Intensification of interventions.

This dialogue takes place if the first level of intervention is not sufficient and therefore needs to be intensified (2nd level of intervention in the description of activities - see Figure 4).

Re-analysis of the child's needs.

This dialogue occurs in the event of a second (or subsequent) analysis of the child's needs.

1.2 THE TOOL ROOM FOR PARENTS - PARENT'S VERSION

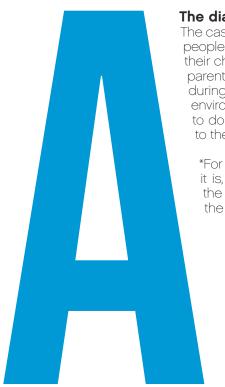
The tool Room for Parents – parent's version - corresponds to section 8 of the caseworker's version. During the dialogue meeting, the parent's version (see Appendix 4) is given to parents as well as the invited partners (e.g., grandparents, friend, child's occupational therapist, community organization's members, paraprofessional).

4. PREPARATION FOR THE DIALOGUE MEETING

In this section, we focus on how to approach and explain the dialogue meeting to the parents. It may also be necessary to prepare the other caseworkers who aren't always familiar with this way of conducting an analysis and planning actions for IIP/ISP. In this regard, it is important to note that meetings are always held in the presence of the family in a transparent manner: the caseworkers do not meet beforehand to do a pre-evaluation. Training on intervention approaches and codevelopment meetings between caseworkers may precede the dialogue meetings (see principles of appropriation and qualifying reflection in the PAPFC² guide pp.7-11; Lacharité, 2014).

4.1 THE CASEWORKER'S RESPONSABILITIES

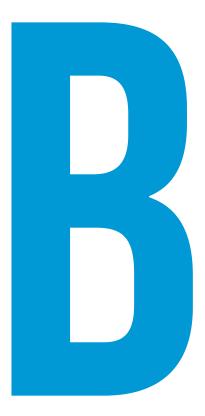
4.1.1 INFORM AND PREPARE PARENTS FOR THE DIALOGUE MEETING



The dialogue meeting

The caseworker explains to parents that this meeting with significant people will be used to identify and analyze together the needs of their child. The caseworker can present the tool Place aux parents – parent's version for them to see which elements will be addressed during the meeting (child needs, responses by adults in the child's environment, family, and environmental factors). If the parent wishes to do so, he/she may begin to reflect on the items in the tool prior to the meeting.

*For the sake of transparency, if the Youth Protection Act is involved, it is, of course, necessary to inform the parent that the content of the voluntary agreement or court order will be addressed during the meeting.



Choosing who will attend the meeting (e.g., child, extended family, friends, community and institutional caseworkers). It is important to target the significant people who will be involved in the process. To get an overview of the important people in the child's entourage, it is suggested to use the diagram "People around my child" (Appendix 5) or the "My entourage" part of the tool Me, as a parent (Appendix 6; Lavigueur, Coutu, & Dubeau, 2008). Once the portrait has been drawn, parents can consider who to invite. Depending on parents' level of comfort, the invitations can be made in different ways, e.g., :

- a. Parents send the invitations themselves;
- Parents are accompanied by the caseworker to issue the invitations;
- c. The caseworker sends the invitations according to the choices of the parents.

Once the individuals are selected, the family's caseworker must complete and sign the Authorization Form to provide information to the parents.

Choosing where the meeting will take place. The family's caseworker must identify where the meeting will take place and book the location. A neutral location (e.g., community organization) is preferred. The caseworker must check with the parents if they have access to transportation. If this is a problem, it is necessary to explore possible solutions with the parents (e.g. accompaniment by the caseworker, bus, etc.).

*If the relationship between the two parents is difficult (e.g., they are unable to discuss together), two separate dialogue meetings should be scheduled.



ILLUSTRATION: PREPARATION FOR THE MEETING

The family's caseworker comes to the family's home to meet Jérémie (2 years old), his mother Jessica and his father Stéphane.

()		MOR	
(0	sev	/VC)I	KΗI

"We know it's not always easy with Jérémie so we'll look together to see how we can this meeting, you, me, and other people important in Jérémie's life will share views on

Caseworker "Absolutely! What do you think if we also invite Chantal, the speech therapist?"

to write a document called a service plan. I will show you the document afterward to make sure its content is consistent with what we said."



By preparing the parents, they are not surprised by what will happen at the dialogue meeting. The caseworker must show them that their opinion will be considered as much as the caseworkers'. The participatory approach is used throughout the process, especially in selecting who will attend the meeting.

4.1.2 FILL OUT THE TOOL ROOM FOR PARENTS - CASEWORKER'S VERSION BEFORE THE MEETING

The family's caseworker completes all sections of Room for Parents - caseworker's version in preparation of the first dialogue meeting. He/she fills out a document per child.

Figure 6 : section 5 – Attendance at the dialogue meeting

This needs analysis concerns...

NAME OF CHILD	
DATE OF BIRTH	

The family's caseworker completes his/her version in order to perform a first analysis of the situation by completing line "I" from his understanding of the child's needs, the responses of adults in the child's entourage, and family and environmental factors. The other sections, "Parent 1" and "Parent 2" will be completed during the dialogue meeting (see figure 7). If the child is under the Youth Protection Act (YPA), the caseworker must complete the analysis with the content of the voluntary agreement or the court order in mind.

Figure 7 – Caseworker's analysis

P1 \bigcirc		0
P2 \bigcirc		0
	\bigcirc	\bigcirc

It is suggested that the tool Room for Parents – caseworker's version be completed before the dialogue meeting. On one hand, this allows a time to reflect on the situation of the child and his/her family. On the other hand, it allows the caseworker to be more available during the meeting. The caseworker can then lead and listen to the exchanges to gain a better understanding of each person's point of view. However, it would be possible to complete the tool during the meeting if the caseworker prefers.

4.1.3 PREPARE DOCUMENTS AND BRING THEM TO THE DIALOGUE MEETING

The family's caseworker brings the following documents to the dialogue meeting:

	√
Authorization form for the transmission of information	
A copy of the voluntary agreement or court order (if the child is under the Youth Protection Act - YPA)	
Multiple copies of the tool Room for Parents - Parent's Version	
The tool Room for Parents - Caseworker's version (previously completed)	

4.2 It is important to create a climate that promotes egalitarian dialogue. The person who leads the meeting acts as a facilitator. This person may be the caseworker or another worker depending on your service organization.

EXCERPT FROM THE PAPFC² PROGRAM GUIDE

A central aspect of the facilitator's function is to create a context where parents be able to express in a constructive way what they feel and share their experiences. (...) Actions [must] be aimed at getting [parents and partners around the table] to work together". (Lacharité, 2014, p.61)

> Principales of support and effective help in the parent-professional relationship:

- Offering support rather than waiting for parent's requests
- Allow the decision-making process to be controlled by
- Avoid leaving the impression that the parent is abnormal
- Allow parents to feel that they have as much to give as they have to receive (reciprocity)
- to solve elements of the problem
- Enable the parent's active participation in decisions affecting him/her and his/her child
- as being responsible for the changes.

On the logistical side, parents appreciate when there are toys for their children, snacks, and drinks. Pay attention to certain details: for example, where children, parents, family, friends, and caseworkers sit. Avoid having caseworkers sit on one side of the table and the family on the other, as this impedes the establishment of an egalitarian dialogue. Note that this dialogue can also take place at the family's home with the parents and their entourage.

4.2.1 WELCOMING PARENTS AND PARTNERS

It is essential to pay attention to the child and his/her parents from the beginning. They must feel that their presence is essential to this meeting. Participants can be introduced by going around the table.

ILLUSTRATION: WELCOMING A FAMILY

The caseworker approaches the family warmly by greeting the child and the parents in particular.

Caseworker "What would you say if we go around the table to introduce ourselves?"

The caseworker asks the parents to introduce themselves.

"My name is Julie, I'm Oly's mother, who is 6 years old."

The caseworker goes on to ask the other parent to introduce himself.

My name is Mathieu, I'm Oly's father, and Mathie

Caseworker "Yes Mathieu, I understand, we are here to find ways to help you! We're going to finish the roundtable introduction and we're going to look at Oly's needs. Oly, how old are you?"

"I'm 6 years old and I want to play with the little toys." Uly

Caseworker "No problem you can take them"

The caseworker continues the roundtable by asking other caseworkers to introduce themselves.



A warm welcome in which the family is first put forward makes it possible to focus immediately on each of its members. The roundtable lets everyone know who is present. The establishment of a relaxed atmosphere (by choosing a neutral location, the presence of toys and snacks, humor, etc.) promotes openness to others and listening to everyone's point of view.

4.2.2 EXPLAINING MEETING PROCEDURES

The facilitator explains that the purpose of the dialogue meeting is to develop a more complete understanding of the situation, by taking into account the views of several actors.

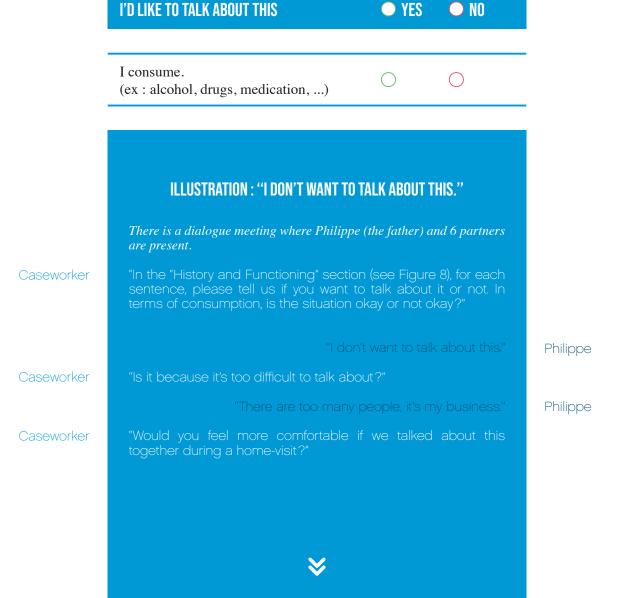
The caseworker then presents the tool to all partners. This dialogue will result in the identification of the needs of the child and his/her family as well as a discussion on the objectives and the means to be put in place to help the family (IIP / ISP).

As mentioned during the preparation meeting, when the Youth Protection Act (YPA) is involved, it is recommended to ask parents if their measures are voluntary (e.g. "Did you sign a paper?") or judicial (e.g. "Have you been in front of the judge?") at the beginning of the dialogue. It is important that parents understand their measures in order to take ownership of their process.

5 DIALOGUE

It is necessary to remind parents that the purpose of Room for Parents is to establish a dialogue and that it should not be used as a checklist. It is therefore not necessary to ask each question in order. You can navigate between the pages according to what is being discussed by the parents and the different partners. In accordance with the participatory approach, the parent has the choice to address each item in each of the sections as part of this meeting.

Figure 8 – Parent's choice over some items for discussion



In this situation, the court order states that the father must follow up on substance abuse. The parent and the caseworker can discuss this aspect during an individual follow-up meeting.

Leaving it up to the parent to address certain items during the dialogue meetings can highlight discomfort with certain aspects. The reasons for his refusal can then be explored is it because:

- 1) It is too painful for him;
- 2) He hasn't gotten there in his personal journey
- 3) He wishes to protect his family situation;
- 4) ...

The caseworker will then be able to discuss this with him in an individual meeting, if necessary.

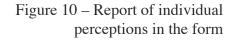
During the dialogue, each parent checks off their response on the tool Room for Parents - parent's version, based on their perceptions and understanding.

Figure 9 – Individual perceptions of the family situation

CONCERN



The family's caseworker writes the answers of both parents in the following lines of his/her document: parent 1 and parent 2.



>>	P1 \bigcirc	\bigcirc	0
≫ P2○ C ○	P2	\bigcirc	0
	$\mathbf{C} \bigcirc$	\circ	0

During the meeting, the constant dialogue between parents and partners helps to identify the perspectives (strength or concern) of all participants regarding each of the items. The dialogue is always held on the basis of egalitarianism. Thus, the caseworker's perception does not take precedence over that of the parents. If the answers differ from one actor to another, it is important to discuss the different points of view. The goal is not to convince anyone his/her perception is not right. Rather, it is to allow parents and caseworkers to express themselves, even if there are differences of opinion or belief, and to put all points of view in common to better understand the situation. The facilitator should not seek to obtain a consensus. Rather, he/she should allow participants to explore the situation and the reasons, for instance, that lead the parent to write a strength in a place where he/she or another caseworker would have written a concern (e.g., Explain to me why you find that it's a strength? I, personally, am worried because...).

Figure 11 – Different Perceptions

THE CHILD IS CLEVER (E.G. TO PICK UP SMALL OBJECTS, HOLD A PENCIL, CUT, DRAW, PLAY WITH LEGO, ...).

ILLUSTRATION: AN EGALITARIAN DIALOGUE

Dialogue meeting between Sophie (the mother), the caseworker, and a psychoeducator.

Caseworker

"Is it a strength (in green) or we are a little concerned (in yellow) or very concerned (in red)?"

"This is a strength in Simon, he's good, I'm not concerned at all." Sophie

Psychoeducator

"I am very worried, I'd say red."

Caseworker

"We all have our opinions and that's okay. The important thing is to understand each other's point of view. What makes you Sophie, not worry, and what makes Nancy so worried?"



Keeping in mind that each point of view is worth hearing and considering, we set the stage for an open exchange in which we can understand why the other person does not have the same perception of the situation as we do. This also enriches parental experience and understanding.

If the child is able to participate in the dialogue about his/her needs, it is important to include him/her in the discussion. The child's point of view is crucial in the analysis of his/her own needs.

ILLUSTRATION: THE CHILD'S POINT OF VIEW

Dialogue meeting with Manuel (10 years old), his mother Samantha, Pierre (Samantha's spouse), the family's caseworker, and a community organization worker.

MANUEL PLAYS WITH LEGOS, WHILE THE ADULTS DISCUSS THE HOMEWORK PERIOD.

"It's always difficult to do homework with Manuel.

Pierre

Samantha

"I do my best, he is good at math, but French is really hard."

Community organization worker

"When do you do homework with Manuel?"

"I always have to do homework when I get home from school I never have time to go out and play with my friends, and I'm hungry when I get home.

Manue

Caseworker

"Okay, do you think there's a better time than when you're back from school? What do you propose?"

Manual

Caseworker

"Samantha and Peter, what do you think?"

Samantha

"Yes, but you don't understand, when he comes back from school the dinner isn't ready..."



Taking the child's point of view into account provides additional insight into his/her needs. In this situation, the child's words help guide the discussion and explain what makes it harder for him to do his homework. Perhaps the dialogue that follows will lead to a solution that is satisfactory to all.

To facilitate the writing of the IIP / ISP, the objectives and the means are formulated as the dialogue evolves. The people who can best accompany the child and his/her family in each action are also identified during the exchange.

At the end of the meeting, as agendas fill up quickly, it is suggested that a meeting of re-analysis of the child's needs be planned immediately.

We suggest the self-observation grid for the principles of the participatory approach (Appendix 2)

6

FOLLOWING THE DIALOGUE MEETING

6.1 THE CASEWORKER'S ACTIONS AFTER THE DIALOGUE

6.2 RE-ANALYSIS OF THE CHILD'S NEEDS

Taking into account the exchanges and discussions that took place during the dialogue meeting, the caseworker (YPA or ARHSSS) writes the IIP / ISP. He/she then gives the IIP / ISP to the parents and discusses it with them. The parents sign it if they agree with its content.

Normally, a re-analysis meeting is scheduled during the initial dialogue meeting. It is suggested to review the situation every six months. However, if there are changes in the situation of the child and his/her family, the meeting may take place at any time. It is recommended to review the situation every three months if children are placed outside the family. For each re-analysis, the caseworker must complete again Room for Parents - caseworker's version before the meeting, taking into account the elements contained in the last IIP / ISP, the evolution of the family, and additional information on the family's current situation.

The dialogue can be initiated from the elements that were raised at the last dialogue meeting. The same process of participatory needs analysis is repeated.

ILLUSTRATION: EGALITARIAN RE-ANALYSIS OF THE CHILD'S NEEDS

Caseworker

"We're going to go over Simon's needs and your family's needs like we did last time. The goal is to explore what improvements you see, if there are any new needs, and how we can help you with that."

"Oh, yeah, I liked that last time, and everyone did their part like we agreed."

Sophie

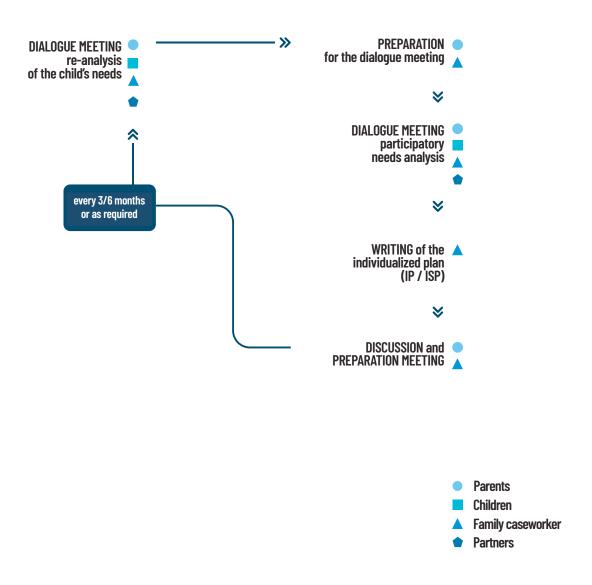
Caseworker

"I filled out my part of Room for Parents in my office, because it's easier for me to pay attention to what you say if it's already done. Otherwise, I'd feel like I have too much to do... I also looked at whether we had all done our jobs with the service plan. We're pretty good... Now we're going to look at where we're at today to help Simon and his family."

Maria Maria

The re-analysis of the child's needs makes it possible to become aware of any changes and to observe the evolution of the family situation. It is also an opportunity to highlight everyone's efforts and to readjusts interventions according to the changes observed.

Figure 12 – Child participatory needs analysis path



^{*}From the PAPFC² training material: Familiarisation avec l'utilisation de l'outil

[«]Place aux parents» dans un contexte de dialogue © 2015 Josée Caron and Line Couvillon

FEEDBACK FROM PARENTS AND CASEWORKERS

Interviews were conducted with 54 parents and 8 case-workers who experienced an animated dialogue meeting using Room for Parents. Here are a few verbatim excerpts that illustrate their point of view on what using the tool in a service plan meeting can lead to. (From the impact evaluation of PAPFC, Bérubé et al. 2014)

"EVEN I (SPOKE UP). ...IT
WASN'T LIKE THE OTHER
TIMES. THE OTHER TIMES I
FELT STUCK."

Noémie - Parent

MAKE ROOM FOR THE PARENTS

"WE GIVE THEM A LOT OF SPACE, AND THAT'S IMPORTANT, IN THE END, IT'S WITH THEM THAT WE'RE GOING TO WORK. IF WE DON'T LISTEN TO THEM, WE CAN'T HELP THEM. I HAVE THE IMPRESSION THAT THEY FEEL LIKE THEY ARE BEING LISTENED TO."

Monique - Intervenante

"THE IIP / ISP IS EVERYONE'S RIGHT TO SPEAK, EVERYONE HAS THE RIGHT TO THEIR OPINION."

Sophie - Parent

"I THINK IT'S MORE OF A TOOL OR PARENTS TO BE ABLE TO EXPRESS THEMSELVES."

Caroline - Parent

"WE TRIED TO FIND SOLUTIONS FOR (JÉRÉMIE)...
IT WAS (JÉRÉMIE) WHO WAS AT THE CENTER
OF THE DISCUSSIONS."

Karine - Parent

PROMOTES CHILD-CENTERED DISCUSSIONS

INCREASES PARENT'S EMPOWERMENT

"WE'RE GIVING ROOM TO
PARENTS, POWER YOU KNOW,
POWER TO PARENTS. THEY
NEED TO BE INVOLVED IN
THE DECISIONS."

Josée - Caseworkei

"I FELT EMPOWERED... IT WAS A POINT THAT I HAD IDENTIFIED. ... I HAD THE POWER COMPLETELY, THE POWER TO BE ABLE TO CHANGE THINGS BECAUSE I MEAN, OKAY, I HAVE TO WORK ON THAT."

Annie – Paren

IDENTIFIES FAMILY STRENGHTS

"WHAT I LIKED ABOUT IT WAS THE GOOD COMMENTS. BECAUSE IT'S RARE IN LIFE TO BE COMPLIMENTED. YOU KNOW, THEY TOLD ME: LOOK, YOU'VE WORKED HARD ON SOME THINGS AND IT'S GETTING BETTER."

Maryse - Parent

"THE NICE COMMENTS. THE WAY THEY REALLY NOTICE THE PROGRESS OF PEOPLE AND...YOU KNOW, I FIND THAT, YOU KNOW, WE FOCUS A LOT ON THE POSITIVE."

Claudie - Parent

"WHEN WE HAVE THIS TOOL, WE SPEND AS MUCH TIME ON WHAT DOES NOT CONCERN US AS ON WHAT CONCERNS US. WHEREAS WHEN WE DO NOT HAVE THIS TOOL, WE CERTAINLY GO TO THE POINT OF CONCERN. WE OFTEN HAVE LESS OF A REFLEX TO LOOK AT EVERYTHING THAT IS GOING WELL."

Line - Caseworker

"AND WE COME TO REALIZE THAT BY ASKING CERTAIN QUESTIONS, WELL, MY GOD, SHE'S REALLY ISOLATED, THIS WOMAN [...] SO THIS TOOL IS ALL ABOUT SMALL QUESTIONS: OH MY GOD, I WOULD NEVER HAVE ASKED THAT QUESTION. AND THEN, OOPS, WE HAVE AN ANSWER AND WE REALIZE THAT: HEY! SHE NEEDS SUPPORT AND I WOULDN'T HAVE KNOWN IF I HADN'T USED THIS CANVAS."

Isabelle - Caseworker

PROVIDES AN EVOLOGICAL UNDERSTANDING

"WE REALLY COVER EVERYTHING WITH THIS. (...) YOU SEE THAT THERE ARE NEGATIVE POINTS, BUT YOU ALSO SEE THROUGH THEM THAT THERE ARE POSITIVE POINTS."

Rarah - Parent

"I THOUGHT IT WAS REALLY, LIKE, MORE DETAILED, YOU KNOW. (...) I DIDN'T HAVE TO REMEMBER EVERYTHING BECAUSE IT REALLY COVERED EVERYTHING." "EVERYBODY HEARS THE Same things and I think it helps a lot."

Aïcha - Parent

"IT'S GOING TO BE EXTRAORDINARY BECAUSE, I WOULD HAVE LIKED TO HAVE
THAT IN THE PAST WITH THE YOUTH CENTERS BECAUSE [WITHOUT IT] THEY
BRING A POINT AND YOU CAN'T ARGUE."

Julie - Caseworker

PROMOTES OPEN DISCUSSION BETWEEN PARENTS AND PARTNERS

"IF, FOR EXAMPLE, THE DYP (DPJ) DISAGREES WITH WHAT YOU'RE SAYING, WELL AT LEAST IT'S TIME TO SAY: YEAH, OKAY, YOU FIND THAT MY CHILD DOESN'T EAT ENOUGH FRUITS AND VEGETABLES, WHATEVER, WELL, THAT'S BECAUSE LOOK, LIKE, HE DOESN'T WANT TO OR I CAN'T FORCE HIM OR WHATEVER, YOU KNOW, I CAN'T PUT IT IN HIS MOUTH. SO THAT'S WHERE YOU GIVE YOUR OPINION."

Maxime - Parent

"WE'LL SAY IT ONCE AND YOU KNOW, AT LEAST WE ALL AGREE ON THE SAME THINGS, THERE WON'T BE THE PHONE GAME THERE, YOU KNOW. BUT I PUT IT LIKE THAT AND THE OTHER ONE WILL SAY, THAT'S NOT HOW I UNDERSTOOD IT."

Caroline - Caseworker

"WE BREAK DOWN BARRIERS BECAUSE OFTEN, WELL, WE'RE GOING TO BE HONEST, THE YOUTH CENTERS ARE SEEN AS WE APPLY THE LAW, WE'RE STRICT [...]. THE DISCUSSION LEADS US TO REMOVE SOME OF THAT AND TO GO FURTHER [...]. BUT I THINK THAT, OVERALL, PARENTS COME OUT OF THIS WITH OK I AM A PERSON ABOVE ALL WHO LIVES WITH PROBLEMS AND I AM NOT A PROBLEM."

Stéphanie - Caseworker

HELPS CREATE A RELAXED, LESS STRESSFUL ATMOSPHERE

"AND GIVEN THAT IT'S A DIALOGUE, IT ALLOWS US
TO EXPRESS OUR OPINIONS, WITHOUT NECESSARILY
WANTING TO BE RIGHT OR BEING ABLE OR WANTING
TO SELL WHY I SAY THIS OR ANYTHING. IT'S NOT
CONFRONTATIONAL. NOT FOR THE PARENT, NOT FOR
THE CASEWORKER, AND NOT FOR THE WORLD AROUND
US. (...) IN THIS ATMOSPHERE, WE FORGET ABOUT THE
YOUTH CENTER STRUCTURE, THE CSSS STRUCTURE, THE
COMMUNITY STRUCTURE SO THAT EVERYONE CAN COME
TOGETHER FOR THE WELL-BEING OF THE CHILD AND THE
FAMILY."

Pierre - Caseworker

"IF I HAD ANYTHING TO SAY, I WOULD SAY IT. EVERYONE SUPPORTED ME AND THEY WOULD ADD [INFORMATION]."

Steve - Parent

FACILITATES THE UNDERSTANDING AND WRITING OF THE INTERVENTION PLAN

"THE INTERVENTION PLAN IS EASIER TO COMPLETE
AFTERWARD, UH ... KNOWING WHERE I'M GOING WITH
THESE CLIENTS AND BEING ABLE TO BRING THEM BACK
TO THE GOALS THEY HAD SET FOR THEMSELVES."

Chantale - Caseworker

"THEY GIVE YOU THE
SERVICE PLAN, YOU BRING
IT WITH YOU, YOU KNOW.
BEFORE, THEY GAVE YOU A
COPY OF THE COURT CASE
AND THEN FIGURE OUT WHAT
YOU NEED TO DO."

Anik - Parent

"EVERYONE WAS GREAT. THEY'VE
EXPLAINED EVERYTHING FROM
A TO Z. ... WHEN THEY TOOK
OUT 100-DOLLAR WORDS
FROM DICTIONARIES, EVEN MY
CASEWORKER SAID, "WHAT'S
THAT WORD?" ...THEY EXPLAINED
EVERYTHING."

Suzie - Parent

GONGLUSION

This guide describes how to use the Room for Parents, a tool designed to enable a participatory needs analysis and the responses to these needs, based on existing family and environmental factors. The tool is based on an ecosystemic approach, which suggests that an overview of the context in which children and families live is necessary to understand their situation and to better decide on intervention targets. Using a participatory approach, the tool allows parents to make a central contribution in analyzing their child's needs. Room for Parents helps to enrich the evaluation reports that caseworkers are required to prepare. It also makes it easier to prioritize and write the objectives that must be included in the intervention plan or the individualized service plan.

The ecosystemic and participatory approaches, supported by the use of this flexible tool, encourages parents to develop a sense of empowerment in their family situation. The tool allows the recognition of parents' skills, encourages discussion between the different actors involved around the child, and values the expression of each person's point of view. It gives parents the opportunity to express themselves on subjects that are meaningful to them. In addition, the tool allows discussions to focus on families' strengths rather than on the parent's weaknesses. It facilitates the formulation of objectives whose importance is better understood by the parents while promoting a genuine exchange around the needs of children. It therefore allows the establishment of a more egalitarian relationship between the parent and the caseworker, thus contributing to the creation of a true collaboration between the two parties.

It is important to remain flexible while using Room for Parents, which is primarily intended to support dialogue. Different questions can guide us in the proper use of the tool. For example, "Does it allow us to better understand the child's situation collectively?", "Does everyone seem comfortable with the process?", "Is it necessary to address all the themes in order to fully understand?", "Do all the important actors in the child's life have the opportunity to express themselves?", ...

WE WISH YOU A GOOD DIALOGUE!

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APPENDIX 1



Ecological system analysis of children's developmental needs

(Chamberland, Lacharité, et al., 2012)

Children's developmental needs

Physical well-being

Weight and height are within standards. Genetic factors and medical history (chronic diseases or disabilities). The child receives appropriate health care, such as vaccines. Note the elements affecting health: food, alcohol, drugs, medicine.

health

Cognitive and language development

All opportunities offered: play and interact with others; access to books; acquire skills and develop interests; learn successfully. An adult is interested in his/her educational activities and progress, and shows encouragement and compliments.

Appropriate expression of feelings and psychological health

Development of attachments, ability to adapt to change, response to stressful events; control of emotions, and appropriate actions according to age and circumstances.

Awareness of being distinct from others and of being appreciated

The child's perception of himself/herself: his/her capabilities, image, and individuality. Elements contributing to identity development: self-esteem, ethnicity, religion, age, gender, sense of belonging and acceptance by family, peers, and society.

Ability to show sympathy and compassion

Stable and harmonious relationships with parents, siblings, entourage; ability to make friends of his/her own age and get along with them. The child is encouraged to develop relationships with peers and adults.

Self-perception: appearance, behaviors, flaws, and qualities; impression formed by others

The child's hygiene is correct; he/she is dressed appropriately according to his/her age, gender, culture, and religion. An adult advises him/her on how to present himself/herself according to the circumstances.

Development of autonomy and social skills

Learning daily activities: providing personal care, getting dressed, eating, not putting oneself in danger; emotional independence: opportunities to build trust and learn conflict resolution strategies.

education

emotional and behavioral development

identity

family and social relationships

self-presentation

self-care

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Ecological system analysis of children's developmental needs

(Chamberland, Lacharité, et al., 2012)



Parents' response to the child's needs

Responds to the child's physical needs and provides necessary medical and dental care

Sufficient, nutritious and age-appropriate nutrition. Appropriate clothing; the child receives adequate personal hygiene.

Takes the necessary measures to protect the child from accidents, violence, and abuse, both within and outside the family

Shows safe-play and indicates risks; ensures safe relationships with others (adults and children).

Responds to the emotional needs of the child

The parent values the child and shows love. The parent ensures that the child develops his/her confidence and identity. The parent is sensitive and responsive to his/her needs, shows respect and encourages the child using appropriate actions.

Supports the child's intellectual development, encourages the child, shows approval

The parent participates in the development of the child's potential through his interactions, his ability to answer questions. The parent accompanies the child in his/her activities (games, school, work). Offers opportunities to develop and succeed: monitoring of child's education, appropriate educational methods (realistic expectations, stimulating means, warm atmosphere).

Provides consistent and caring supervision; encourages the child to express emotions and to behave well

The parent serves as a role model through appropriate behavior in terms of emotion regulation and interactions; explains how to resolve conflict; and sets limits.

Provides a stable environment for child development

Attachment links are not disrupted; the parent is consistent, coherent and predictable in how he/she responds to the same behavior; the parent's response evolves according to the child's development; the child has contact with family members or other significant people.

basic care

safety

love and affection

stimulation

boundaries

stability

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(Chamberland, Lacharité et al., 2012)

Family and environmental factors

Strengths and difficulties

Physical illnesses; mental health problems; learning problems; alcohol/drug abuse; domestic violence; childhood abuse; history of violence against children: impact on personal functioning. Influence of the parent's past and current experiences (including the absent parent) on how the child's needs are met.

Composition of the family and nature of relationships between members

Changes in family composition and significant events (heredity, grief, psychosocial factors): impact on each member. Parents' experiences as children in their original family. Family functioning: child custody, access rights. Relationship between each member; impact on the child.

Role of the extended family and significant persons

Presence with the child and parents. Type of support: financial, psychological, advice, practical help; quality (sufficient or not, etc.).

Amenities in the household and immediate environment; impact on the child and family

Potable water, heating, stove, toilet, place to sleep, safety and cleanliness; housing organized according to the age and needs of the child and the people living there.

Family income and financial needs

The family receives all the benefits to which they are entitled; appropriate use of resources; impact of financial difficulties on the child.

Impact on ability to provide care

Impact of the employed family member's work schedule on the relationship with the child.

Neighborhood and community integration; impact on the child and the family

Degree of social integration or isolation of the family; presence of friends; participation in community organizations/activities.

Health services, day care, school, place of worship, transportation, consumer services (grocery store, pharmacy), recreation, first-line and second-line social services, specialized services, community organizations.

Availability, accessibility, and use of resources by family members and influence on the child and family, including members with special needs; quality of the family's relationship with these resources.



Parental history and functioning

Family history and functioning

extended family and significant others

household

income

employment

social integration

community resources and services

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APPENDIX 2

SELF-OBSERVATION GRID FOR THE PRINCIPLES OF THE PARTICIPATORY APPROACH

DIALOGUE MEETING LEADING TO AN IIP / ISP PAPFC²

(1) ACCEPTING THE PARENT AS A TEAM MEMBER

YES	MORE OR LESS	NO	TURN-TALKING
\circ	\circ	0	The parent naturally had his/her turn.
\bigcirc	\bigcirc	\bigcirc	The parent spoke freely about his/her family situation.
0	0	0	All participants had the opportunity to express themselves.
			ABSENCE OF HIERARCHICAL STRUCTURE
0	0	0	The parent was seen as making an important contribution to the understanding of the child's needs.
0	0	0	The views, ideas, or comments of all participants had equal importance.
			OUR ATTITUDES
0	0	0	We perceived the parent as someone who can positively influence the child's development.
\circ	\bigcirc	0	We recognized the parent's various skills.

Inspired by : Lacharité, 2011; Lacharité, 2019; Lacharité, Moreau & Moreau, 1999; Madsen, 2013

Adapted by : Vicky Lafantaisie & Chloé Erickson, revised by : Josée Caron, Line Couvillon, Carl Lacharité et Vicky Lafantésie, 2018

(2) SHARING INFORMATION WITH THE PARENT

YES	MORE OR LESS	NO	REPORT
0	0	0	We have reviewed the situation (improvements, difficulties encountered since the last meeting, etc.).
0	0	0	We outlined the skills demonstrated by the parent in certain situations.
			TRANSPARENCY
0	0	0	TRANSPARENCY We have expressed our views in a transparent manner.
0	0	0	

(3) ABSENCE OF PROFESSIONAL TECHNICAL JARGON

YES	MORE OR LESS	NO	RELATIONSHIP BETWEEN CASEWORKER AND PARENT
\bigcirc	\circ	0	The relationship with the parent was positive.
\circ	0	0	I introduced myself simply, I did not adopt an expert attitude (equal relationship).
			LANGUAGE
\bigcirc	\bigcirc	\bigcirc	I used language that was easily understood by the parent.
0	0	0	We let the parent tell his/her experience in his/her own words (without rephrasing in "technical" terms).
\bigcirc	\circ	0	We illustrated the more complex concepts with examples.
0	0	0	We made sure that the parent understood (e.g., summarize, ask questions to assess comprehension).

Inspired by : Lacharité, 2011; Lacharité, 2019; Lacharité, Moreau & Moreau, 1999; Madsen, 2013

Adapted by : Vicky Lafantaisie & Chloé Erickson, revised by : Josée Caron, Line Couvillon, Carl Lacharité et Vicky Lafantésie, 2018

(4) INTERVENTION PLANNING IS BASED ON THE CHILD'S NEEDS AND THE STRENGTHS OF THE FAMILY

YES	MORE OR LESS	NO	PARENT-CASEWORKER RELATIONSHIP
0	0	0	The dialogue was focused on the child's needs (rather than the parent's deficiencies).
0	0	0	We asked questions to explore, to better understand the situation rather than analyzing it from an institutional perspective.
\bigcirc	\circ	0	The strengths of the family were identified.
			INTERVENTION PLANNING
\bigcirc	\bigcirc	\circ	The parent was actively involved in finding solutions.
0	0	0	The intervention targets selected take into account the family's situation/environment.
\bigcirc	\bigcirc	\bigcirc	The parent's strengths were used to achieve the chosen objectives.
0	\circ	0	The conditions needed to achieve the objectives have been put in place.

(5) SHARED DECISION-MAKING

YES	MORE OR LESS	NO O	NEEDS HAVE BEEN DEFINED The needs were defined in dialogue based on everyone's perception.
			DECISION-MAKING
0	\circ	0	Each of the present actors agreed on the decision (not mandatory).
\circ	0	0	Participants agreed to make certain compromises to reach shared decision-making (not mandatory).
\circ	0	0	There was a dialogue that could have led a participant (worker or parent) to change his/her position.
\circ	0	0	Everyone's opinion was considered in the decision-making process.
			SHARED RESPONSIBILITIES
\circ	0	0	All participants engaged in reflection to identity the means needed to achieve the objectives.
\bigcirc	\circ	\circ	Each participant was involved in the implementation of the IIP / ISP.

APPENDIX 3

Caseworker's version

Dialogue with parents : Participatory analysis of child and family needs

Main intervention

The caseworker completes the tool Room for Parents

Itensification of interventions

The caseworker completes the tool Room for Parents prior to dialogue meeting. Afterwards, the caseworker uses it to dialogue with parents and partners during the meeting

Re-Analysis of Child Needs

The caseworker completes the tool Room for Parents a second time, prior to dialogue meeting. Afterwards, the caseworker uses it to dialogue with parents and partners during the meeting

C	Complete a tool Room for Parents for each children					
	CISSS / CIUSSS LSSSS Youth Protection Act voluntary measure judicialized measure	refe	e of meeting erring worker telephone extension			
1	GENERAL	INFORMATIO	N			
The parent 1 will participate in the program In which sector? municipality, borough, agglomeration, Name of spouse other than the parent 2 In relationship for how long? The spouse will participate in the program Last level of education completed elementary school high school	2(if applicable) ? □ Yes □ No	person	date of birth address zip code telephone file number to contact in f emergency telephone	nknown	Gender	o Women o Men
Family income (in the last year)	99\$ 30,000\$ to 44,999\$	s	u	nknown		o Other
The parent 2 will participate in the program In which sector? municipality, borough, agglomeration, Name of spouse other than the pare In relationship for how long? The spouse will participate in the program	ent 1 (if applicable)	person to co	date of birth address zip code telephone file number ntact in case of emergency telephone			
Last level of education completed by elementary school high school Family income, if different from parent 1 0 to 14, 999\$ 15,000\$ to 29,9	the parent 2 college 99\$ 30,000\$ to 44,999\$	university 45,000\$ +	u	nknown	Gender	o Women o Men o Other



Dialogue with parents : Participatory analysis of child and family needs

2		IN	FORMATION AB	OUT THE CHILD	REN	
Child's Name date of birth sex Official diagnosis]F □M	Other	age	file number The child lives with	☐ Parent 1☐ both parents☐ other (specify):	☐ Parent 2 ☐ joint custody
Child's Name date of birth sex Official diagnosis]F □M	Other	age	file number The child lives with	☐ Parent 1 ☐ both parents ☐ other (specify):	☐ Parent 2 ☐ joint custody
Child's Name date of birth sex Official diagnosis]F	Other	age	file number The child lives with	☐ Parent 1 ☐ both parents ☐ other (specify):	☐ Parent 2 ☐ joint custody
Child's Name date of birth sex Official diagnosis]F □M	☐ Other	age	file number The child lives with	☐ Parent 1☐ both parents☐ other (specify):	☐ Parent 2 ☐ joint custody
3		SS Protection Act fo		EVIOUS SERVICE	ES .	
	_	follow-up organization fy):				



Dialogue with parents: Participatory analysis

of child and family needs

4

DOCUMENTS TO PROVIDE DURING THE DIALOGUE MEETING

MANDATORY DOCUMENT Authorization form to communicate information (attach to the referral)							
ASSESSMENT REPORTS							
Assessment of children For which children:	Any relevant a assessment c community or	assessment. For example : develop hild psychiatry assessment, follow- ganization.	mental -up by				
1-	2 -	3 -	4 -				
Specify:							

DIALOGUE MEETING 5 **Participatory Analysis of Child and Family Needs**

A meeting with the parents is first held to identify who will be invited to the dialogue meeting.

	Attendance at the dialogue meeting:
1 -	
2 -	
3 -	
4 -	
5 -	
6 -	

date of the meeting This needs analysis concerns... name of the child date of birth



Dialogue with parents : Participatory analysis of child and family needs

6 INCLUSION AND EXCLUSION FACTORS		
INCLUSION	YE	S NO
Children from 0-12 years old (and main parental figures)] 🗆
Children whose development or safety are considered "of concern", even compromised, due to the fact that they live in families in which the parental figures have significant difficulty fulfilling the physical, educational, or emotinal responsibilities expected of them.		
Access to a set of general or specific children and family services does not improve their situation.		
The general approach to these children is maintenance in the family and support for the parents.		
EXCLUSION	YE	S NO
This family should not enter the program at this time, due to the present of needs that the PAPFC2 cannot meet.		
7 COMMENTS AND SIGNATURE		
Comments, Explanatory, Notes, Other Relevant Information, if applicable		
date of referral		
date of meeting		
date of next meeting		
date of next meeting		
worker's signature		



Caseworker's version

8 DIALOGUE	WITH PAREN	ITS			
This need analysis concern : Name of the child : Child date of birth : Today date :			LEGEND P1= Parent 1 P2= Parent 2 W= Caseworker		
Child's Needs: Health Parents agree to talk about this Yes No	Name of the case filing Room for Pa		STRENGTH M	CONCI ODERATE	
The child is often injured (e.g. cuts, burns, fractures)	[injury]		P1 () P2 () W ()	000	000
The child has health problems (e.g. asthma, diabetes, attention deficit, hyperactivity (ADHD),	, depression) [chronic illness]		P1 () P2 () W ()	000	0
The child is often sick (e.g. cold, flu, stomach flu, ear infection)	[infections]		P1 () P2 () W ()	000	000
The child has difficulty sleeping (e.g. takes a long time to fall a wakes up during the night, does not sleep much)	sleep, [sleep]		P1 () P2 () W ()	000	000
Responses to Needs: Basic Care Parents agree to talk about this Yes No			STRENGTH M	CONCI ODERATE	
The parents take care of the healthcare of the child (e.g. vaccinations, medical and dental follow-up)	[healthcare]		P1	0 10 20	0 1020
The parents ensure there is adequate amount of food for the c (e.g. the child eats well for his or her age)	hild [food]		P1	1 2	0 1020
The parents ensure the child's clothing are adequate for each season	[clothing]	757	P1	1 2	0 1020
The parents make sure that the child is clean	[personal hygiene]		P1	0 10 20	0 0 1020
What we will do	Who	will be invo	olved	Wh	en



Caseworker's version

Responses to Needs: Safety Parents agree to talk about this Yes No			STRENGTH M	CONCE ODERATE	
The parents make sure that the child is safe at all times (e.g. supervision, choose babysitters carefully)	[child safety]		P1 () P2 () W 1()2()	0 10 20	0 0 1020
The parents make sure the child does not experience violence or abuse (e.g. at home, at school, at the daycare)	[violence and abuse]		P1 () P2 () W 1()2()	0 10 20	0 0 1020
The parents make sure that the child is not a witness to violence	CE [witnessing violence]		P1 () P2 () W 1()2()	1 2	0 1020
The parents make sure that their home is safe (e.g. gate, smoke detector, absence of dangerous objects and mold)	[safe home]		P1 () P2 () W 1()2()	0 10 20	0 1020
The parents make sure the child knows the potential dangers (e.g. don't talk to strangers, play in safe places,)	aching safe behaviors]	K	P1 () P2 () W 1() 2()	1 2	1 2
What we will do	Who	will be invo	olved	Wh	en



Caseworker's version

Child's Needs: Education			STR	ENGTH	CONCE	RN
Parents agree to talk about this Yes No				M	ODERATE	HIGH
The child is learning well (e.g. is alert, plays with blocks, make learns to read and write, does well in school)	es puzzles,	MABC A LX	P1 P2 W	000	000	000
The child communicates well (e.g is able to point, speak, make conversation)	anguage development]	•	P1 P2 W	000	000	000
The child is developing well (e.g. is able to holds his or head up, sit up, crawl, walk, jump, p	play sports) or skills development]	-	P1 P2 W	000	000	000
The child is clever (e.g. to pick up small objects, to hold a pencil, to cut, to draw, to play with LEGO)	or skills development]	To the second se	P1 P2 W	000	000	0
The child has opportunities to develop (e.g. daycare, group of friends, encouragement, compliments, access to boo	o ks) nities for development]		P1 P2 W	000	000	000
The child has special needs (e.g. diagnosis, major difficulties)	[special needs]		P1 P2 W	000	000	000
Responses to Needs : Stimulation			STF	RENGTH	CONCE	RN
Parents agree to talk about this Yes No					AVERAGE	HIGH
The parents play with the child (e.g. do peekaboo, play outside, draw, play board games)	[general stimulation]		P1 P2 W 1	0 0 20	1 2	0 0 1020
The parents actively participate in the child's daycare/school life (e.g. meet with teachers/educators, explain and answer his/her questions, look at the agenda, homework)	school monitoring]	2+2=4	P1 P2 W		0 10 20	0 1020
The parents are proud of their child's successes (e.g. applaud, congratulate, encourage)	ouragement of success]		P1 P2 W 1	0 0 1020	0 1 0 2 0	0 1 0 2 0
The parents accompany/are interested in the child's activities (e.g. friends, hobbies, games, interests)	[interests]		P1 P2 W	0	1 2	0 0 1 0 2 0
What we will do	Who will be involv€		ved		When	



Caseworker's version

Child's Needs: Emotional & Behavioral Development Parents agree to talk about this Yes No			STRENGTH M	CONC ODERATE	
The child knows which adult to turn to when things go wrong (e.g. comfort, need to talk)	with a parental figure]	A	P1 () P2 () W ()	000	000
The child responds well to changes (e.g. moving, changing shcools, parent's new spouse) [ability to adapt to change/stress]			P1 () P2 () W ()	000	000
The child expresses his or her emotions: joy sadness, anger (e.g. does not stay in his or her room, does not stifle reactions)	xpression of emotions]		P1 () P2 () W ()	000	000
The child expresses his or her emotions : joy, sadness, anger (e.g. does not stay in his/her corner, reacts)	[control of emotions]		P1 () P2 () W ()	000	000
Child's Needs: Identity, Self-Presentation, Ability to selfcare Parents agree to talk about this Yes No			STRENGTH M	CONC ODERATE	
The child is proud of himself or herself (e.g. report card, sports, proud of his/her roots)	[pride of self]		P1 () P2 () W ()	000	000
The child pays attentoin to his or her clothing, to his or her personal hygiene, and to himself or herself (from age 4 onwards) [concern for self-image]			P1 () P2 () W ()	000	000
The child is resourful for his or her age (e.g. eat, get dressed, wash, brush his/her teeth)			P1 () P2 () W ()	000	000
Responses to Needs: Love and affection Parents agree to talk about this Yes No			STRENGTH M	CONC ODERATE	
The parents give the necessary attention to the child	[attention]		P1 () P2 () W 1()2()	1 2	0 10 20
The parents give affection to the child (e.g. have fun with the child, use loving words, spend time with the child) [affection]			P1 () P2 () W 1()2()	1 2	
The parents encourage the child's efforts (e.g. congratulate, tell others about the child's accomplishments, encourgae his/her behabior improvement) [encouragement]		P1 () P2 () W1()2()	1 2	0 0 1020	
What we will do	Who will be involved		Wh	ien	



Caseworker's version

		STRENGTH	CONCERN
		M	ODERATE HIGH
		P1 () P2 () W 1()2(()	0 0 1 2 1 2 0
[routine]		P1 () P2 () W 1()2()	
		P1 () P2 () W 1()2()	
		P1 () P2 () W 1()2()	
Who	vill be invo	lved	When
	to the child's capacities] [routine] ine / educational methods] r in difficult p with problem solving]	to the child's capacities] [routine] ine / educational methods] r in difficult p with problem solving]	r in difficult P1 P2 P1 P2 P2 P2 P2 P2 P2 P2



Caseworker's version

Child's Needs: Family & Social Relationships		STRENGTH	CONCE	RN
Parents agree to talk about this Yes No		N	MODERATE	HIGH
The child is confortable with the impotant people in his her life (e.g. parents, broter, siste, others) [stable and healthy relationship]		P1 () P2 () W ()	000	000
The child has friends of his or her own age and gets along with (e.g. plays with other children, is happy for others, understands others, helps others)	them children of similar age]	P1 () P2 () W ()	000	000
Responses to Needs: Stability Parents agree to talk about this Yes No		STRENGTH	CONCE	
The parents make sure the child has a stable family environme	ent v of significant persons]	P1 () P2 () W 1()2()	0	
The parents ensure that all the adults in the child's entourage same response to his or her behavior (e.g. no means no, the sparent always say the same things		P1 () P2 () W 1()2()	0 0 1020	0 0 1020
What we will do	Who will be inv	olved	Wh	en
	I		I	



Caseworker's version

MY FAMILY AND ENTOURAGE

Employment & Income Parents agree to talk about this Yes No			OK	NOT OK
The parents have sufficient income for their family	[budget management]	3	P1 () P2 () W 1()2	
The parents manage their budget well so that their child does anything (e.g. no late payments, not too much debt)	not lack [budgeting]		P1 () P2 () W 1()2	
If the parents work, they have a stable schedule (e.g. nights, weekends, on call)	[work schedule]		P1 () P2 () W 1()2	
What we will do	Who w	ill be involv	ed	When
Hayaahald				
Household → Parents agree to talk about this Yes No			OK	NOT OK
The parents keep their home for a long time (e.g. no frequent moves)	[frequent moves]		P1 () P2 () W 1()2	000
The parents have everything they need in their household for (e.g. refrigerator, stove, beds, bassinet, washing machine, he			P1 () P2 () W 1()2	
The parents' home is in a safe neighbourhood (e.g. no crimina dangerous objects in the streets or parks)	llity, no [neighbourhood safety]		P1 D P2 D W 1D2	
Their home is clean	[cleanliness of home]		P1 D P2 D W 1 D 2	0 0 1020
What we will do	Who w	ill be involv	ed	When



Caseworker's version

MY FAMILY AND ENTOURAGE

Social support : Extended family, social integra	ation and use o	of community	y services	and resources
Parents agree to talk about this Yes No			OK	NOT OK
The parents have contacts with their families (e.g. grandparents, sisters, brothers, uncles, aunts)	[family contact]		P1 () P2 () W 1()2	
Family and friends are supportive (e.g. help, financial support, advice, listening)	[social network]		P1 () P2 () W 1()2	
The parents are well surrounded (e.g. they do not feel alone)	[social isolation]		P1 () P2 () W 1()2	
The parents know the organizations and services in the neighter [knowledge of ne	bourhood eighbourhood resources]	?	P1	
Services are nearby (e.g. grocery, hospital, clinic, daycare, transport, leisure activ	ities, stores) accessibility of resources]		P1 () P2 () W 1()2	
The parents use the resources of their community (e.g. community organizations, neighbourhood centers, dayca	re, CISSS, CIUSSS)		P1 () P2 () W 1()2	
What we will do	Who	will be involv	red	When



Caseworker's version

MY FAMILY AND ENTOURAGE

Family History & Functioning / Parents History and Functioning					
Parents agree to talk about this Yes No	0		OK	NOT OK	
The parents had "good parents" (e.g. no violence, no abuse, no substance abuse)	adequate parental models]		P1 () P2 () W 1()2(() () 1()2()	
The child has access to both parents and to his or her sibling (e.g. separated parents)	gs d custody, visitation rights]	Burn Salar	P1 () P2 () W 1()2(0 1020	
Each parents has a good relationship with their spouse (e.g. no domestic violence, no marital conflics)	[marital relationship]	66	P1 () P2 () W 1() 2()	0 0 1020	
The parents have a good relationship with eachother (the chidren, separated parents or not) [healthy relations	(e.g. parents of		P1 () P2 () W 1()2(0 0 1020	
The parent's spouse has a good relationship with the child [spous	e's relationship with child]		P1 () P2 () W 1()2(0 0 1020	
The parents can read and write [difficulty reading and writing]			P1 () P2 () W 1()2(0 0 1020	
The parents have physical problems (e.g. illness, difficulty moving) [parent's physical problem]			P1 () P2 () W 1() 2(
The parents are grieving (e.g. death of a loved one, separation)	[grief]		P1 () P2 () W 1()2(
The parents consume (e.g. alcohol, drugs, medication,) [consumption ((alcohol, drugs, medication)]		P1 () P2 () W 1()2(
The parents feel good emotionally (e.g. good mood, no depression, no anxiety)	[good mental health]	(?2)	P1 () P2 () W 1() 2(
The parents must do legal proceedings (e.g. legal custody, ask for pardon)	[legal proceedings]		P1 () P2 () W 1()2(
What we will do	Who will be involved		red	When	



APPENDIX 4

child date of birth:my name:			date:		
Child's Needs: Health			STRENG	TH CON	CERN
└─ I'd like to talk about this ○ Yes ○ No				MODERAT	E HIGH
My child is often injured (e.g. cuts, burns, fractures)	[injury]		0	0	0
My child has health problems (e.g. asthma, diabetes, attention deficit, hyperactivity (ADHD),	, depression) [chronic illness]		0	0	0
My child is often sick (e.g. cold, flu, stomach flu, ear infection)	[infections]	()	0	0	0
My child has difficulty sleeping (e.g. takes a long time to fall as during the night, does not sleep much)	sleep, wakes up		0	0	0
Responses to Needs: Basic care I'd like to talk about this Yes No			STRENG	TH CONG	CERN E HIGH
I take care of the healthcare of my child (e.g. vaccinations, medical and dental follow-up)	[healthcare]		0	0	0
l ensure there is adequate food for my child (e.g. my child eats well for his or her age)	[food]		0	0	0
I ensure my child's clothing are adequate for each season	[clothing]	757	0	0	0
I make sure that my child is clean	[personal hygiene]		0	0	0
What I will do	Who will help n		ne	WI	nen



Parent's version

Responses to Needs : Safety I'd like to talk about this Yes No			STRENG	TH CON MODERAT	CERN E HIGH
l make sure my child is safe at all times (e.g. supervision, choose babysitters carefully)	[child safety]		0	0	0
I make sure my child does not experience violence or abuse (e.g. at home, at school, at the daycare)	[violence and abuse]		0	0	0
I make sure that my child is not a witness to violence	[witnessing violence]		0	0	0
l make sure that my home is safe (e.g. gate, smoke detector, absence of dangerous objects and	mold) [safe home]		0	0	0
I make sure my child knows the potential dangers (e.g. don't talk to strangers, play in safe places)	aching safe behaviors]	K	0	0	0
What I will do	Wł	no will help n	ne	WI	hen



Parent's version

MY CHILD'S NEEDS
MY REPONSES TO MY CHILD'S NEEDS

Child's Needs: Education I'd like to talk about this Yes No			STRENG	TH CON	CERN E HIGH
My child is learning well (e.g. is alert, plays with blocks, make read and write, does well in school)	s puzzles, learns to	ABC QA	0	0	0
My child communicates well (e.g. is able to point, speak, make conversation)	language development]	P	0	0	0
My child is developing well (e.g. is able to hold his or her head up, sit up, crawl, walk, jum [gross	ip, play sports) motor skills development]	7	0	0	0
My child is clever (e.g. is able to pick up small objects, hold a pencil, cut, draw,	play with LEGO) notor skills development]	TOO!	0	0	0
My child has opportunities to develop (e.g. daycare, group of friends, encouragements, compliment	s, access to books) unities for development]		0	0	0
My child has special needs (e.g. diagnosis, major difficulties)	[special needs]		0	0	0
Responses to Needs : Stimulation			STRENG	TH CON	CERN
I'd like to talk about this Yes No				MODERAT	E HIGH
l play with my child (e.g. do peekaboo, play outside, draw, play board games)	general stimulation]		0	0	0
I actively participate in my child's daycare/school life (e.g. meet with teachers/educators, explain and answer his/I at the agenda, homework)	her questions, look	2+2=4	0	0	0
I am proud of my child's successes (e.g. applaud, congratulate, encourage)	couragement of success]		0	0	0
I accompany/ I am interested in my child's activities (e.g. friends, hobbies, games, interests)	[interests]		0	0	0
What I will do	Who	will help m	e	Wh	en



Parent's version

MY CHILD'S NEEDS
MY REPONSES TO MY CHILD'S NEEDS

Child's Needs: Emotional & behavioral dev	elopment		STRENG	TH CON	CERN E HIGH
My child knows which adult to turn to when things go wrong (e.g. comfort, need to talk)	with a parental figure]	A	0	0	0
My child responds well to changes (e.g. moving, changing shcools, parent's new spouse)	idapt to change/stress]		0	0	0
My child expresses his or her emotions : joy, sadness, anger (e.g. does not stay in his/her corner, reacts)	expression of emotions]		0	0	0
My child controls his or her emotions (e.g. no tantrums, no major outbursts)	trol of emotions]		0	0	0
Child's Needs : Identity, Self-presentation, Abili	ty to selfcare		STRENG	TH CON	CERN
☐ I'd like to talk about this ☐ Yes ☐ No				MODERAT	E HIGH
My child is proud of himself or herself (e.g. report card, sports, proud of his/her roots, seld-confiden	Ce) [pride of self]		0	0	0
My child pays attention to his or her clothing, to his or her pers hygiene, and to himself or herself (from age 4 onwards)	concern for self-image]		0	0	0
My child is resourful for his or her age (e.g. can eat, get dressed, wash, brush his/her teeth)	autonomy (basic care)]		0	0	0
Responses to Needs : Love and affection			STRENG	TH CON	CERN
☐ I'd like to talk about this Yes No				MODERAT	E HIGH
I give the necessary attention to my child	[attention]		0	0	0
I give affection to my child (e.g. have fun with my child, use lov spend time with my child)	ving words,		0	0	0
I encourage my child's efforts (e.g. congratulate, tell others ab accomplishments, encourage his/her behavior improvement)	oout my child's		0	0	0
What I will do	Who	will help me	.	Wh	en



Parent's version

MY CHILD'S NEEDS
MY REPONSES TO MY CHILD'S NEEDS

Responses to Needs : Boundaries I'd like to talk about this Yes No			STRENG	TH CONG	
I formulate demands that my child can understand	to the child's capacities]		0	0	0
I make sure my child has a stable routine	[routine]		0	0	0
I use appropriate discipline and measures (e.g. no excessively long punishments, no hitting or shouting, do whatever he/she wants)	I don't let my child / educational methods]		0	0	0
I make sure my child learns to react appropriately in difficult (e.g. stay calm, seek and adult, find solutions)	situations with problem solving] -		0	0	0
What I will do	Who w	ill help me	2	W	hen



STRENGTH

CONCERN

Parent's version

MY CHILD'S NEEDS
MY REPONSES TO MY CHILD'S NEEDS

I'd like to talk about this Yes No				MODERAT	E HIGH
My child is confortable with the important people in his or her (e.g. parents, brother, sister, others) [stable and healthy relationship]			0	0	0
My child has friends of his or her own age and gets along with (e.g. plays with other children, is happy for others, understand helps others)	them ds others, children of similar age]		0	0	0
Responses to Needs : Stability I'd like to talk about this Yes No			STRENG	GTH CONG	CERN HIGH
I make sure my child has a stable family environment	of significant persons]		0	0	0
I ensure that all the adults in my child's entourage always give response to his or her behavior (e.g. no means no, my spouse the same things)	and I always say		0	0	0
What I will do		o will help n	ne	W	hen

Child's Needs: Family & social relationships



Parent's version

MY FAMILY AND ENTOURAGE

Employment & income I'd like to talk about this Yes No			OK	NOT OK
I have sufficient income for my family	[financial situation]		0	0
I manage my budget well so that my child does not lack anyth (e.g. no late payments, not too much debt)	ing [budget management]		0	0
If I work, I have a stable schedule (e.g. nights, weekends, on call)	[work schedule]	0	0	0
What I will do	Who	will help me		When
Household I'd like to talk about this Yes No			OK	NOT OK
I keep my home for a long time (e.g. no frequent moves)	[frequent moves]		0	0
			0	0
(e.g. no frequent moves) There is everything I need in my household for my family	ater) [basic amenities]		OOO	O O
(e.g. no frequent moves) There is everything I need in my household for my family (e.g. refrigerator, stove, beds, bassinet, washing machine, he	ater) [basic amenities] ngerous objects in		OOO	O O O
(e.g. no frequent moves) There is everything I need in my household for my family (e.g. refrigerator, stove, beds, bassinet, washing machine, he My home is in a safe neighbourhood (e.g. no criminality, no dathe streets or parks)	[basic amenities] Ingerous objects in Ineighbourhood safety] In [cleanliness of home]	will help me	OOO	O O O When
(e.g. no frequent moves) There is everything I need in my household for my family (e.g. refrigerator, stove, beds, bassinet, washing machine, here My home is in a safe neighbourhood (e.g. no criminality, no dathe streets or parks) My home is clean	[basic amenities] Ingerous objects in Ineighbourhood safety] In [cleanliness of home]	will help me	0	O O O When
(e.g. no frequent moves) There is everything I need in my household for my family (e.g. refrigerator, stove, beds, bassinet, washing machine, here My home is in a safe neighbourhood (e.g. no criminality, no dathe streets or parks) My home is clean	[basic amenities] Ingerous objects in Ineighbourhood safety] In [cleanliness of home]	will help me	0	O O O When



Parent's version

MY FAMILY AND ENTOURAGE

Social support: Extendend family, social integr of community services and resources I'd like to talk about this Yes No	ation and use		OK	NOT OK
I have contacts with my family (e.g. grandparents, sisters, brothers, uncles, aunts)	[family contact]		0	0
My family and friends are supportive (e.g. help, financial support, advice, listening)	[social network]	-	0	0
l am well surrounded (e.g. l do not feel alone)	[social isolation]	A MARK	0	0
I know the organizations and services in the neighbourhood	eighbourhood resources]	?	0	0
Services are nearby (e.g. grocery, hospital, clinic, daycare, transport, leisure activ	rities, stores) ccessibility of resources]		0	0
l use the resources of the community (e.g. community organizations, neighbourhood centers, dayca	nre, CISSS, CIUSSS) of community resources]		0	0
What I will do	Who	o will help me		When



Parent's version

MY FAMILY AND ENTOURAGE

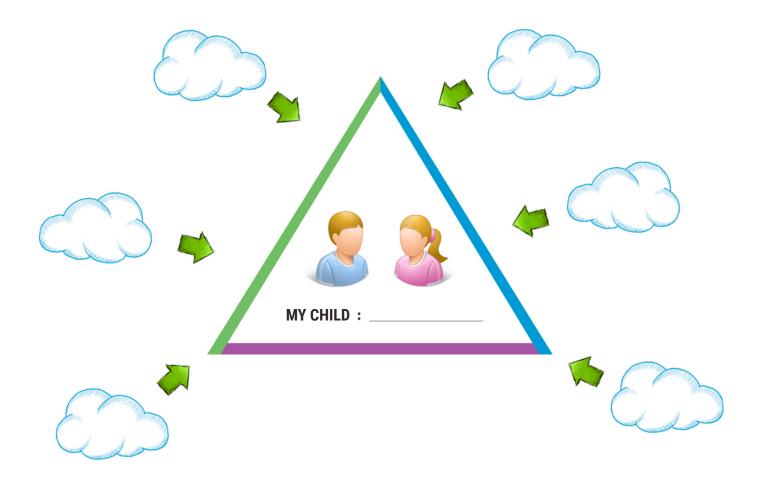
Family History & Functioning / Parents History and Functioning I'd like to talk about this Yes No	UK	NUI UK
I had "good parents" (e.g. no violence, no abuse, no substance abuse) [adequate parental models]		0
My child has access to both parents and to his or her siblings (e.g. separated parents) [child custody, visitation rights]		0
I have a good relationship with my spouse (e.g. no domestic violence, no marital conflics) [marital relationship]		0
I have a good relationship with the other parent (e.g. parents of the children , separated parents or not) [healthy relationship with the other parent]		0
My spouse has a good relationship with my child [spouse's relationship with child]		0
I can read and write [difficulty reading and writing]		0
I have physical problems (e.g. illness, difficulty moving) [parent's physical problem]		0
I am grieving (e.g. death of a loved one, separation)		0
l consume (e.g. alcohol, drugs, medication,) [consumption (alcohol, drugs, medication)]	O	0
I feel good emotionally (e.g. good mood, no depression, no anxiety)		0
I must do legal proceedings (e.g. legal custody, ask for pardon)		0
What I will do Who will	help me	When



APPENDIX 5



PEOPLE AROUND MY CHILD





We would like to thank the parents in the PAPFC2 parent groups who helped develop the tool.

Developed from Ward and Rose's (2012) child's needs assessment framework on which the PAPFC2 program is based. Adapted by: Annie Bérubé*, Vicky Lafantaisie**, Josée Caron***, Line Couvillon****, Marie-Claude Sirois****, Diane Dubeau*, Sylvain Coutu*, Annie Devault*, Carl Lacharité**, Jean-Pierre Houde.

APPENDIX 6

Canevas de questions

a) Le portrait de ton entourage

Regardons les personnes qui font partie de ta vie. Nous allons nous aider de la carte de ton entourage.

Présenter la carte du réseau social.

En regardant notre schéma, imagine que tu es au centre, et autour de toi, tu retrouves toutes les personnes qui l'entourent. Quelles sont les principales personnes qui font partie de ta vie « pour le meilleur et pour le pire » ?

Cela inclut aussi les personnes qui te font sentir bien, celles qui te font sentir mal, celles qui influencent les décisions que tu prends et Ce peut être des personnes avec qui tu vis, que tu vois plus ou moins souvent, des personnes à qui tu téléphones, à qui tu écris, etc. les autres personnes importantes qui jouent un rôle dans ta vie. Choisis 10 personnes au maximum. Pour chacune de ces personnes, je vais te demander de préciser depuis quand tu la connais, à quel point vous êtes proches et la fréquence de vos contacts.

Voir la grille (ou le schéma avec les bulles vides).

b) Des personnes marquantes dans ma vie de parent

Depuis les débuts

- 1. Quelle est la personne qui t'a le plus aidé(e) depuis le début dans ton rôle de parent, la personne qui a fait une différence dans ta vie de parent ? En faisant quoi surtout ? (Qu'a-t-elle fait concrètement pour toi, pour t'aider ?)
- 2. Quelle est la personne qui t'a le plus nui dans ton rôle de parent depuis le début ? En faisant quoi surtout?

Présentement

- 3. Y a-t-il une personne sur qui tu sais que tu peux vraiment compter présentement, quelqu'un sur qui tu peux t'appuyer comme parent ? Si oui, en faisant quoi surtout ?
- Y a-t-il une personne dans ton entourage qui te critique souvent, qui te fait sentir mal ou inadéquat(e) comme parent ? Si oui, donne-moi un exemple de critique qu'elle fait et qui te dérange tout particulièrement
- Y a-t-il dans ton entourage une personne avec qui tu es souvent en conflit (se chicaner, être fâché même si on ne le montre pas toujours)? Si oui, donne un exemple du genre de conflits qui arrivent souvent.

c) Réflexion sur le sentiment de solitude

Voici un petit questionnaire qui aborde le sentiment de solitude que l'on peut vivre parfois comme parent. En te référant à ta situation actuelle, réponds spontanément par « plutôt vrai » ou « plutôt faux ».

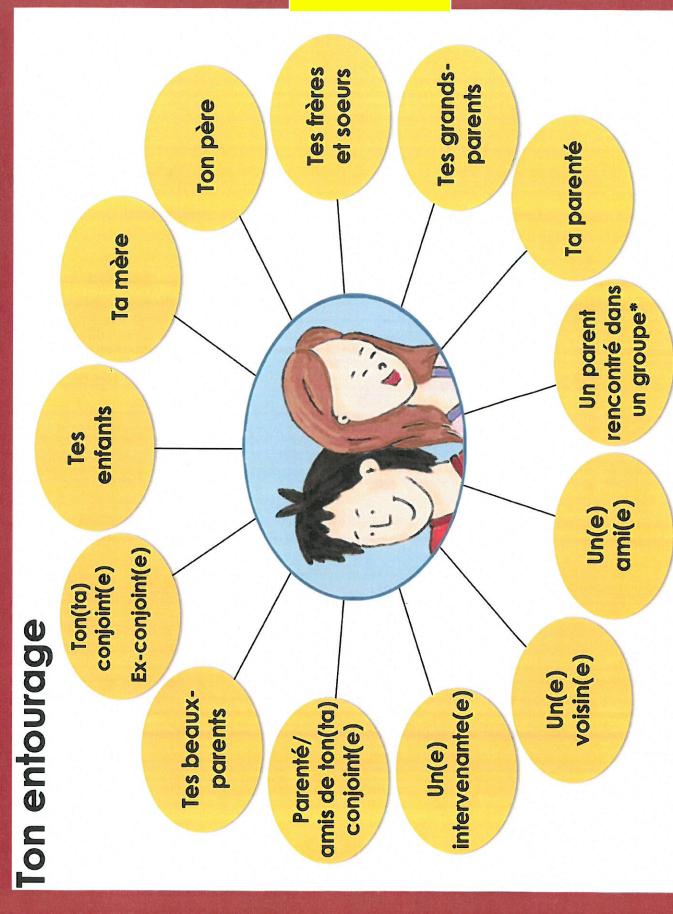
Voir la grille.

Grille de réponses

Portrait de l'entourage

	SILIOL	oriiali de l'enioura	age		Pénonses du narent commentaires pistes à sourceiliere
10 personnes	lien gyec	Degré	Fréguence	Connito	repoises de pareir, commentantes, pistes a pousoivie
les plus		d'infimité	de contact	depuis	1
importantes		Pas très près (1)	Quelques fois	l an ou moins	2.
		Très près (2)) E	Ē	3.
	Ä.		Chaque mois (2)	2 à 5 ans	4
Inscrire les	conjoint,	Positive (+)	Chaque semaine		
prénoms	mère, ami,	Négative (-)	(3) Chaque jour	Plus de 5 ans (3)	5.
	voisine	(-/-) ellile (-/-)	(4)		
					Reflexion sur le sentiment de solitude
					(Encercler la réponse choisie)
					1. As-tu présentement un(e) conjoint(e), un(e) partenaire ?
					Oui Non Depuis combien de temps ?
					Si Oui:
					Je ne sens pas que j'ai un(e) conjoint(e)
					si Non : J'aimerais avoir un(e) conjoint(e) Plutôt vrai Plutôt faux
					2. Je passe beaucoup de temps seul(e) Plutôt vrai Plutôt faux
					3. Je me sens seul(e) Plutôt vrai Plutôt faux
					4. J'aimerais être moins souvent seul(e) Plutôt vrai Plutôt faux
					Nom(s):
					Intervenant(e):

Réseau social



*groupe de loisir, groupe paroissial, bénévolat, cuisine collective, maison de la famille, groupe d'entraide, atelier de formation, études, etc...