

Threshold Concepts in Residential Child Care: Part 2, Relational Practice as Threshold

Abstract

Despite growing international consensus around the complex and demanding nature of residential child care for children and young people, consensus is lacking around how to develop a workforce equal to the task. Similarly, there is near unanimity about the essential nature of relationships, particularly the relationship between practitioner and child, for good residential care. At the same time, theorization on how those relationships are enacted and how to support practitioners' related development of practice is underdeveloped or even absent in some contexts. This second of a two-part paper discusses stage two of a two-stage, transatlantic study aimed at identifying and exploring threshold concepts in residential child care. Threshold concepts are central concepts in a given discipline which are transformative but troublesome for many. They are important to their given discipline because they shape thinking and practice, but they are often difficult to master. In stage one, *relational practice* was the most prominently discussed potential threshold concept in focus groups comprised of educators and practitioners who had studied, practiced and/or taught in the UK, Canada and/or the US. In stage two, in-depth individual interviews were carried out with practitioners around their threshold experiences of relational practice. Analysis found all five characteristics of threshold concepts reflected in the data, with a particular emphasis on the troublesome nature of relationship boundaries. A further theme around the relational nature of teaching and learning relational practice was identified, raising important parallels between the relational experiences practitioners have as part of their training, and their relational practice in the field. Implications are discussed, including the misfit between the demarcation of professional boundaries as applied by cognate fields and the actual requirements of ameliorative relationships in residential child care.

Keywords: Relational practice, relationship-based practice, threshold concepts, residential child care, child and youth care, social work, praxis, relationship boundaries, professional boundaries.

1. Introduction

UNICEF estimated in 2017 that approximately 2.7 million children were living in residential child care globally. Consensus is growing internationally about the complex demands of providing ameliorative residential child care (Holden, 2009; Smith, 2017; Whittaker et al., 2015a), with related qualifications emerging in some countries and already well-established in others. Within this, there is near unanimity about the essential nature of the relationship between practitioner and child in the provision of good care (Kendrick et al., 2011). Consensus is lacking and evidence limited, however, for determining what should constitute training and education (Whittaker et al., 2016), particularly around how practitioners should be supported to develop these relationships. Threshold concept theory offers clarity and direction in addressing related issues of training and education. In a transatlantic study of educator and practitioner views about threshold concepts – whether they are relevant to the field and what they might be – considerable consistencies were found across the two groups, with relational practice discussed most prominently overall. In part 1 of this two-part paper, the precarious and challenging context within which theoretical and practice developments are taking place in residential child care was discussed and the growing imperative to improve the efficacy of training and education was established. It went on to explain and critically apply threshold concept theory to this challenge, and then discussed the design, methodology and findings of the first stage of the study at the heart of this paper. Study participants were unanimous in affirming the relevance of threshold concept theory to their experiences of learning and teaching for residential child care. Their responses illuminated particular demands of a field in which the self of the practitioner is central to the work, and the concept of praxis, defined in part 1 as the ethical synthesis of knowing, doing and being in practice, was employed to synthesise the contributions of threshold concept theory with this special aspect of residential child care education. The application of threshold concept theory sheds light on the important parallel between educators' praxis and the development of students' practice, a key but as yet mostly unacknowledged element of curricular development and delivery.

Part 2 of this paper focuses on the second stage of the study, which interrogates data relating to relational practice through the lens of threshold concept theory. Because residential child care is located within social work in the United Kingdom (UK), and within child and youth care in many parts of North America, this two-part paper draws on related literature from both to offer a hybrid practice and theoretical context for this key intersection of traditions. The methods of stage two of the study are then set out, followed by findings and a discussion of their implications, including the

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utility of applying threshold concept theory to inform related educational developments. First, however, a brief recap of threshold concept theory is offered.

1.1 Threshold Concept Theory

Threshold concept theory has been applied to 259 discipline or subject areas across 45 different countries (Land et al., 2016). Threshold concepts are defined in Meyer and Land's (2003) seminal paper as having five characteristics: they are *transformative* in enabling new ways of thinking and understanding; they are *irreversible* in that, once grasped, they become impossible to forget or unlearn; they are *integrative* in their ability to make visible relationships between ideas or phenomena; they help to demarcate disciplinary or subject boundaries and thus are characterized as *bounded*; and they can be difficult to grasp, counterintuitive, tacit or challenging to pre-existing ways of understanding and therefore *troublesome*. The process of coming to understand a threshold concept often involves a period of liminality involving oscillation between levels of understanding (Land et al., 2005) and mimicry of understanding (Cousin, 2010). Cousin (2008, p. 264) argues that threshold learning is a form of identity work that requires *supportive liminal environments*, ones that enable engagement with uncertainty and the discomfort it can provoke, and that attend to "the dialectic between knowing and being." Finally, as the application of threshold concept theory has spread across disparate fields and disciplines, Meyer et al. (2010) have encouraged an expanded notion of "concept" to include threshold learning, threshold experiences and threshold areas of practice. This expanded use of the term is intended here forward.

1.2 Relationship and Relational Practice

Whether from a child and youth care or a social work perspective, there is broad, international consensus about the centrality of relationships to good residential child care practice (Kendrick et al., 2011). Relationship has been identified as the foundation for all child and youth care work (Garfat, Freeman, Gharabaghi, & Fulcher, 2018), the heart of good practice in UK social work (Ruch, 2018), and fundamental to residential child care (Smith, 2009).

1.2.1 Historic and Current Conceptualisations Relationship-based and Relational Practice

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While the field of child and youth care has had an historic focus on the relationship between adult and child (Holden, 2009), its conceptualisation has evolved from something the adult provided (and therefore created) for the child – “having and using the relationship” – to “being in relationship” (Garfat, 2012, p. 13). This shift in language, according to Garfat (2012), signified a stronger focus on the self of the practitioner and a phenomenological orientation to how he or she experienced (and created the experience of) the relationship. Further development has involved another shift in focus, this time to the co-created space between adult and child, or the “in-between between us” (Garfat et al., 2018, p. 14). This change reflects a contextual shift that has occurred in the social studies of childhood more broadly – one that recognises the agency, rights and experiences of children and young people (Graham, 2011), and from a child and youth care perspective, incorporates curiosity and a recognition of power, identity, culture and historical contexts (Garfat et al., 2018). Relational practice from a child and youth care perspective, then, involves attending to the meaning made of experience and the historic, cultural and political contexts that influence those experiences in order to co-construct relationships in which children, young people and their families can develop different ways of experiencing and being in the world (Garfat et al., 2018).

In the UK social work context, Trevithick’s (2003) seminal article (drawing on Howe (1998)) charted the diminishing value afforded to the service-user/worker relationship and sparked a renaissance of interest in and general reclaiming of relationship-based practice (the term most commonly used in the UK social work tradition). Social work formulations of relationship-based practice (circa Biestek, 1957) emphasised individual rather than contextual change (Trevithick, 2003); starting in the 1980s, welfarist approaches were replaced with a marketised, neoliberal orientation towards notions of ‘best value’ and a greater scrutiny of the efficiency of social work practices (Ruch, 2018). In parallel, an intellectual purge of social work education took place that stripped out a sound practice and theoretical knowledge base in favour of an over-emphasis on social work values (Jones, 1996). “The sense was that social workers who meant well, will do well” (Trevithick, 2003, p. 165).

The way relationship-based practice is conceptualised and applied varies widely across social work education and practice (Hingley-Jones & Ruch, 2016), with most theorising coming from psychosocial perspectives (Hingley-Jones & Ruch, 2016; Ruch, Turney, & Ward, 2018; Trevithick, 2003; Worthington, 2003). Key features of early models of relationship-based practice included a recognition of the influence of past experiences on current thinking and action, an appreciation that individuals are not always consciously aware how past experiences influence their behaviour, and the understanding that what happens in relationship-based practice can be (sometimes unconsciously) associated with past, often unconnected previous experiences (Ruch, 2018). To this

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still-relevant foundation, Ruch's model adds an explicit challenge to the tacit, underlying conceptualisation of "rational actors" (Kemshall, 2010): "people are not simply rational beings but have affective (both conscious and unconscious) dimensions that enrich but simultaneously complicate human relationships" (Ruch, 2018, p. 27). Her model also stresses an integrated approach that responds both to young people's inner worlds as well as the wider contexts of social problems. Fundamentally, then, relationship-based practice is concerned with the content, process and dynamics of relationships, their visible and invisible components and the connections between "the intrapsychic, interpersonal and broader social contexts in which they are embedded" (Ruch, 2018, p. 28).

1.2.2 *The role of the Relationship*

Shifts have occurred across both traditions in the positioning of the relationship between practitioner and child within wider notions of intervention. In child and youth care, the intervention has gone from being conceptualised as bound up in the structures of the residential (or other service) program, to a recognition of the relationship itself as the intervention (Stuart, 2013). Coming from a UK social work perspective, Trevithick (2003) described historic and what she (at that time) deemed to be perilous thinking that the relationship was an end in itself, describing a shift that relocated it as the medium through which the intervention took place. She argued that poor practice related to the former came to be associated with psychosocial (and particularly psychodynamic) approaches, reflecting, it can be argued, deep roots of ambivalence and confusion about the nature of these relationships. Interestingly, she also noted the more intense and therapeutic use of relationships, particularly with looked-after children, as providing reparative experiences that, *in themselves*, may support coming to terms with or even overcoming abuse or other relational trauma. More recently, Ruch (2018, p. 29) explicitly combines the two, offering the relationship as "the vehicle through which interventions are mediated, as well as potentially being of intrinsic value as an intervention in its own right."

While social pedagogy, the professional umbrella under which residential child care sits in much of continental Europe, was beyond the scope of this study in terms of the sample (described below), the aforementioned cross-fertilization related to theoretical and practice development has included social pedagogic perspectives, with growing related interest in the UK and North America. Findings from a cross-national study of relational practice from a social pedagogic tradition (Cameron, 2013),

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therefore, merit inclusion here. The study explored the perspectives of social pedagogues in Belgium, Denmark and Germany, as well as practitioners who trained as social pedagogues in Germany but were working in residential child care in England (UK). Based on 43 intensive interviews, Cameron identified two broad perspectives about the purpose of professional relationships between practitioners and children: one was an instrumental orientation to relationships that were essentially led by the adult; and the second, coined as the “ethical encounter position” (p. 13) was characterised by mutuality, dynamism, unpredictability and not being amenable to prescribed outcomes. It is this latter perspective which Cameron argues is consistent with the basic social pedagogical position. Tensions between these two identified perspectives reflect the broader historic changes in the positioning of the relationship relative to the intervention. Similar tensions are reflected in many of the difficulties discussed next.

1.2.3 Difficulties and challenges of relational practice

All three traditions highlight difficulties and challenges associated with relational practice. Ruch (2018) points out the paradoxical nature of, on the one hand, the obviousness of working within the relationship, and on the other, the potential complexities associated with such relationships. Individual and social defences are inevitably provoked in the “messy realities” (p. 34) of relational practice and therefore require theoretical understanding, time, thinking space and support. The complex web of multiple relationships in residential child care engenders further complexities that require more systemic thinking for effective relational practice (Ward, 2007).

Boundaries are a particular source of challenge. Stuart (2012, p. 137) defines boundaries as “the interface of intimate communication between people within a particular context.” In this, she actively diverges from more traditional definitions, ones that often imply clear-cut, fixed restrictions entirely on the conduct enacted by the professional. This divergence is necessary, she argues, due to the depth of relationships within which these boundaries manifest in child and youth care, the mutuality that characterises them, and their everyday nature [as opposed to being restricted to, for example, a weekly therapy hour in an office]. Davidson (2004) similarly argues that the distinctly unique role of child and youth care practitioners must be understood if professional boundaries are to be established and maintained.

Mann-Feder (1999, pp. 93-94) highlights how practitioners’ own interpersonal boundaries can be “pushed to the limit” in child and youth care precisely because interpersonal boundaries are what children and young people need to relearn. Finding a stance between too close and too distant,

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according to McMahon (2018), makes considerable emotional demands on practitioners. They need to be close enough to be attuned, emotionally available and demonstrative of care while also being “far enough out” (p. 151) to see, think about and respond helpfully to what the child or young person is actually communicating. Thus the intellectual and emotional demands on practitioners are compounded by the more personal nature of relationships in residential child care, as they require more complex decision making related to boundaries (Fewster, 2004). In a rare study into the views of 86 residential child care practitioners about the exercise of boundaries in their practice, Coady (2014/15) found significant gaps between what is espoused in policy and practice literature and participant responses; this gap reflected an absence of clear-cut and consistent demarcation between acceptable and unacceptable boundaries, in terms of the everyday decision-making practitioners must make. Respondents also indicated anxiety around to boundary decisions and a related increase in restrictiveness, one which Coady links to the impact of concerns about historic abuse in residential child care.

Wider contextual challenges in building and maintaining relationships in residential child care include stigmatization of residential child care, its position as a last resort service, managerial approaches, and staff absence and turnover (Welch, Fowler, Ross, Withington, & McGhee, 2018). Cameron’s (2013) previously-mentioned social pedagogic study participants described relentless managerial pressure as conflicting with the conditions and aims of relational practice. In a recent medium-scale, qualitative study, Brown, Winter, and Carr (2018) found a pervasive culture of fear that compromised and constrained practitioners’ relational practice and related understanding. Key contributors to this fearful culture, they argue, include low status of residential practitioners, the influence of inquiries into abuse, an overriding focus on child protection that emphasizes risk, and discourses of professional practice that prize objectivity and emotional detachment. While this study was carried out in the Republic of Ireland, these cultural contributors are immediately recognisable in North American and UK contexts as well.

Also within this wider context and at the same time, a shift is taking place away “from proscriptions on touch and the termination of relationships when children leave their placements to love making its way into discourses of residential child care,” in both the UK and in North America (Steckley, 2018, p. 368). Such dichotomous discourses will invariably raise the level of difficulty of relational practice for those practitioners committed to keeping the child’s interest (rather than their employers’ or their own) paramount in their boundary-related decision making.

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1.2.4 Education and Training of Relational Practice

Trevithick (2003) calls for a sound theoretical understanding to underpin practitioners' thinking and application of relationship-based practice. This is echoed by Ruch (2018) fifteen years later where she argues that practitioners require requisite skills and knowledge in the complex dynamics of helping relationships if they are to be effective in relationship-based work. Similarly from a North American context, Gharabaghi (2010) highlights the extreme importance of incorporating "relationship development" and "being in relationship" into training curricula and ongoing professional development.

Yet an appreciation that specific knowledge and skills are necessary for good relational practice appears to be absent in social policy contexts and parts of the field more generally. Gharabaghi (2010) points out the lack of recognition in child and youth care of what he terms a "relationship skill" (p. 87) and an absence of mandatory training that in residential child care settings that focuses on relationships. Similarly, Cameron (2013) contrasts the growing emphasis on the centrality of relationships in official guidance related to looked after children in England with the paucity of content on how they should be constructed or maintained. This reflects what Trevithick (2008) frames as an emphasis on understanding (i.e., knowing about) over an ability to put knowledge into action (i.e., knowing how).

Ward (2008, 2018) has offered the most theoretically developed analysis, grounded in his many years in direct practice, higher education and scholarship in the residential child care/social work, of effective education and training of relationship-based practice. It addresses both knowledge and how to put that knowledge into action. Fundamentally, he argues that professional education must go beyond what he terms the *instructional mode* to the development of processes, or *learning modes*, that correspond to what will be required in practice. Within these processes, consideration of students' felt experiences, the quality of teacher/learner relationships, and what is being modelled within those relationships become more prominent. Thus, the self of the educator comes into a more significant focus, as does the parallel (as discussed in part 1) between educators' praxis and the development of students' praxis.

2. The Study

The overarching aim of this two-stage study was to identify and explore potential threshold concepts in residential child care; it was jointly funded by the Higher Education Academy and the University of

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XXX. Stage one involved focus groups with two different participant types: educators who had taught on a degree-level course specifically dedicated to residential child care, therapeutic child care or child and youth care and also had published research on and/or theorization of practice; and practitioners who had undertaken a dedicated degree-level course in residential child care, therapeutic child care or child and youth care and also had practiced in one or more residential child care settings. Further discussion of the underlying methodology of the study, as well as the methods of sampling, data collection and data analysis for stage one, are contained in part one of this paper.

2.1 Data Collection

Of all the candidate threshold concepts discussed in stage one of the study, *relational practice* was the most prominent in terms of frequency, depth of discussion and emphasis across the practitioner focus groups; it was a close second across the educator focus groups (with *use of self* slightly more prominent). As a result, stage two focussed on relational practice.

In-depth, semi-structured interviews were employed to interrogate whether practitioners' experiences were consistent with the aforementioned five characteristics of threshold concepts. In building an evidence base for child and youth care, Bellefeuille and Ricks (2010, p. 1237) argue for dialogical approaches "that recognise the value of multiple realities and that ground knowledge development in experience and the ever-changing context of child and youth care practice."

Exploring practitioner accounts of coming to understand relational practice through the theoretical lens of threshold concepts not only grounded the findings in the experience and context of practice, but as will be discussed further, helpfully illuminated it.

Interviews were carried out in an online platform with a subset (n=7) of the practitioner sample from stage 1. Collectively, all three dedicated courses had been undertaken by participants in the subsample (i.e., residential child care, therapeutic child care and child and youth care courses).

Interviewees were asked whether they consider *relational practice* to be threshold, and were then asked a series of questions about their experiences of coming to understand relational practice.

Interviews lasted approximately 88 minutes on average. Pseudonyms have been used to indicate content from individual interviews.

2.2 Data Analysis

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All interviews were recorded, transcribed and deductively coded (Lune & Berg, 2017) based on the five characteristics of threshold concepts; themes are organised accordingly. A final theme around *the relational nature of teaching and learning relational practice* was identified, and it ends this section; further explanation of the analytic process of arriving at this theme is discussed below. Because focus group participants also spoke tellingly about these themes, relevant data from stage 1 has also been incorporated into the findings.

3. Findings

All seven practitioners indicated unequivocally that they thought *relational practice* was threshold (i.e., was consistent with the five characteristics of threshold concept theory). In answering this initial question, three use the word “definitely”, two “crucial” and one indicated it was at the “top of my list”. Another participant instead immediately applied the characteristic of transformative:

I think so, I think because when you start putting, when you get the idea of a relationship in practice it transforms the way that you work with your co-workers and how you work with families and youth. It opens doors for different ways of being with people. It just makes you understand your practice in a different way. (Rachel, Practitioner)

3.1 Transformations in coming to understand relational practice

All of the practitioners spoke of a transformation in their thinking and practice related to relationships with children and young people, and all spoke about this in a way that extended into their overall practice. The following participant was the most explicit in this regard:

How would you sum up that change that you have gone through in terms of how you approach or consider relational practice? (Interviewer)

Probably to use the word that we have got on the slide there: transformative. It did transform the practice. Once my understanding improved and developed then my practice transformed and I think like it says on the left there, once you have got it, then you have got it and you understand it and you don't unlearn it then. You realise the value of it, it sort of touches on every area of practice and the way that you are thinking in the job that you are doing. (Barry, Practitioner)

While some spoke of “lightbulb moments,” all described a more lengthy process of coming to understand relationships in the way that they now do. Almost all cited their related educational

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courses as contributing to this process, with over half describing these courses as having an overall transformational impact on them. Matt was the most emphatic in this regard, describing how his difficulties with education were transformed during his studies, due in part to his experiences of relationships on the course:

I think relationships, when I learned about relationships, I looked at the relationships with education, myself with education, where that's not necessarily dealing with my kids that's dealing with my own issues as such with education [...] I had barriers there as well that I had to knock down, er so that I could move forward with that. But I think it's important, it's good having that support that you can sort of be, because by this time you can question yourself and question yourself why you're there, why you're in here. (Matt, Practitioner)

Prior to experiencing their transformations, participants primarily described relationships with children as functional and/or defensive within an overarching punitive, controlling and/or rule-bound orientation that coloured their interactions:

I would say that it was this very functional thing, you know – you go in, we do something and we leave. There was no sense of being, but a lot of doing. (Nicholas, Practitioner)

The issue of control was really the central issue and [...] the adjectives that would be used to describe workers either positively or negatively would be things like strong and weak and things that related to, eh, how much power they had displayed in their relationships with young people. So it did feel as though that the kind of power and authority aspect of relationships was really, ehm, significant and that the relationship was, if it was in the picture at all, it was there as a means of achieving [...] the worker's purpose. (Jim, Practitioner)

Participants' descriptions of their current relational practice were more varied. Over half described individually or collectively thinking more explicitly and deeply about their relationships with young people, whether in terms of how to build them, how their decisions affected them or how they – the relationships – met particular needs. In relation to this last point and reflecting related shifts in the literature (Ruch, 2018; Stuart, 2013), just under half specified coming to see the relationship as having intrinsic or therapeutic value in its own right rather than simply being a means of achieving some other end. This sense of relationship being an end in itself also was voiced in educator and practitioner focus groups as well:

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The idea of relational practice [...] the idea that the relationship is the intervention [...] the relationship isn't a means to some other end [...] the relationship by itself achieves something therapeutic because it changes the people who are involved in it [...] to me that's quite a strong contender for a threshold concept because it changes what you think you're trying to achieve and also the way in which you think it will be achieved. (Practitioner from focus group)

The quality of practitioners' descriptions of their current thinking and practice did not have the same qualities of defensiveness or guardedness, though a vulnerability was still reflected in a couple of participants' accounts:

...they [the children] just have their own ways, like how they show you what they want, what they need, that they need relationships. It's obviously gonna start throwing certain things on you [...] So within a functional mode of relationship, you're protected against all of this, so there's no vulnerability, there is no, it's very hard actually to become, to have [this] transformation. (Nicholas, Practitioner)

Just under half explicitly spoke of bringing more of their *selves* into their practice and more actively putting the child's needs at the centre of their considerations. Almost all spoke of becoming more confident about how to build and maintain relationships, and some spoke of working to bring about cultural change in the way that relationships are thought about and practiced in their places of work.

3.2 *The irreversible nature of practicing relationally*

All but one of the participants indicated that they would not be able to unlearn relational practice, with one referring to it as "second nature" (Rachel) and another describing embarrassment at his previous way of thinking and practicing:

Never, never. I would never go back to the practice that, which I would say I would be embarrassed with now. Er that's that truth. I would be shocked, but that's reading from the essays [essays he had written on a previous qualifying course not specific to residential, therapeutic, or child and youth care]. (Matt, Practitioner)

One, who described a great deal of difficulty coming to his current understanding of relational practice, spoke of tension and temptation:

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To go back into the other way of thinking [...] like I said I was brought up in a very business-oriented understanding, where things were functional, obviously there was relationship as well [...] I always find that even though it gets easier with time, erm, no, the battle, the tension is always there. The transformation is an ongoing thing. (Nicholas, Practitioner)

Nicholas' quote offers potential clarity that moving through the threshold of relational practice does not herald a cessation of relational challenges; rather, what may be irreversible is an inability to revert back to unthinkingly using relationships in an instrumental or punitive fashion.

3.3 *The integrative nature of relational practice*

All of the respondents either named *use of self* or spoke about its core elements (e.g., self-reflection, self-awareness, sharing parts of oneself) when discussing their process of coming to understand relational practice.

Relationship is the key aspect in that ['that' meaning transforming his understanding of the young person] and it does make you look at yourself as well and to understand how change has happened. I think there is a process of [...] there are aspects of self from that point of view that come into it. (Ian, Practitioner)

Meaningful relationships are not possible without the presence of a self and so the highly integrative discussions incorporating use of self – across the focus groups as well as the individual interviews – reflect the somewhat obvious interrelated nature of the two areas of practice. Interestingly, the characterisations participants made of their practice prior to their threshold transformation – thinking and practice that were instrumental and defensive within wider punitive or controlling contexts – did not incorporate such references to the self. Indeed, the orientation towards rules, punishment and/or control may well serve as a social defence (Menzies Lyth, 1988) against having to consider the self with any depth.

The other most commonly mentioned concept that reflected the integrative quality of relational practice was attachment theory, mentioned by over half of the participants:

Attachment, understanding why you're going to have those people who just, it's going to be harder to build a relationship and they respond to you in a different way. If you don't understand that theory then there would be times where you would really really struggle to

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connect people who have reactive attachment or don't understand why they are acting a certain way. (Rachel, Practitioner)

Just under half of the respondents also mentioned containment theory, loss, trauma and concepts from social pedagogy in an integrative manner (with relational practice).

3.4 Bounded: relational practice's contribution to defining subject boundaries

Participants in neither the focus groups nor the individual interviews were asked directly whether they thought relational practice demarcated some kind of boundary between residential/child and youth care and other fields, and no participant explicitly referred to the boundedness as a characteristic of any threshold concept. Nevertheless, participants in both stages of the study did refer to ways in which education and/or practice is different from or even unique in comparison with other disciplines or fields; these references were consistently about relational practice, use of self or an integration of the two.

The depth and the scope that the people in residential childcare have to offer the young people in terms of relationship working, it is completely different. For instance, time constraints have a huge impact within other areas [...] They don't have the time to really get to know and do the therapeutic work in the same way that the residential worker has and I think in that respect the residential worker should grasp the opportunity they have to work with those young people in the sense that other sectors can't. (Shirley, Practitioner)

Indeed, most references to what distinguished residential child care cited depth of relationships due to the greater amount of time and intensity that characterised them.

[...] almost no other profession, we could claim, has the level of intimacy of both the physical and the emotional of the caregiving. (Educator from focus group)

This different nature of the care relationship highlights differences and related tensions between other parts of the field that are considered cognate or (in the UK) the same:

[...] it's about professionalism and what professionalism means in a care context [...] there was a sense that professionalism in a care setting meant the same thing as professionalism in a social work setting, and a professional relationship would have the same characteristics and the same boundaries in both of those situations. And over the years I've felt as though

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I've come to believe that less and less, and I've come to believe that care relationships are about something different than that. And we're still stuck in a bit of a rut of trying to squeeze ourselves into relationship boundaries and a sense of professionalism that would maybe relate to social work more, whereas what we should really be thinking about is what do these children need and how can I give them that safely? (Practitioner from focus group)

In terms of boundedness, multidisciplinary fields can be what Wimshurst (2011) refers to as unsettled and she suggests the benefit of differentiating between generic threshold concepts that serve to integrate and deepen related understanding across cognate disciplines in a professional domain, and those that act across dissimilar disciplines and possibly professional domains (the latter of which would constitute unbounded thresholds). Perhaps more significantly, this paper argues that the assumption of shared conceptual foundations and practical manifestations of threshold areas of practice within multidisciplinary contexts, when those assumptions are false or facile, may serve to unsettle the field and limit or even distort practice.

3.5 Relational practice as troublesome

Doing relationships as opposed to learning about them in abstract or general ways appeared to be an important component of coming through some sort of relational practice threshold. The difficult gap between a professional, idealised version of how one is supposed to *do* therapeutic relationships and the messy realities of relational practice were repeatedly visited in all of the focus groups. What was identified as the disguise of the seemingly simple in part 1 was specifically applied to relational practice in one practitioner focus group and one educator focus group:

Even talking about relational practice, we're kinda like, 'everybody knows what that is, right?' But to really embrace it, to really understand it in an integrated way is really tough. It's a very hard thing to grasp and it's a hard thing to teach people. (Educator from focus group)

Their troublesome nature and the desire for clear, definable boundary positions can be seen in the next excerpt in which a participant describes an experiential lesson on boundary management:

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What it means to be dealing with a young person who is constantly invading your space and your boundaries [...] They thought I was going to teach them the secrets [of boundary management] [...] I was going to put some concepts on the board and it would be clear and neat and easy, but it's messy as hell. (Educator from focus group)

Boundaries as a troublesome component of doing relational practice came up in all practitioner focus groups, two of the three educator groups and all but one of the individual interviews. This was consistently connected to one of two aspects of boundaries: emotional and physical closeness – referred to as *relational proximity* here forward, and responding to behaviour.

3.5.1 Boundaries: Relational proximity

Several practitioner focus group participants and almost half of the interview participants described difficulties around relational proximity; many used the term “boundaries” and those who did not, like the one below, were nevertheless concerned with emotional and physical boundaries:

For me the hardest part so far has been staying therapeutic, building that relationship but still not getting attached. We were told all throughout school that we had to build these relationships; we had to get close with these children but not too close. So I guess I'm finding it hard to find where the cut-off is, where I step back. (Practitioner from focus group)

Forms of affectionate or playful touch also served as perhaps the most tangible proxy for the difficulties around determining appropriate relational proximity in professional caring relationships:

I've learned that, yeah, we need touch, right. Erm we need closeness, especially with these children, but, erm that is not clearly understood. Yet again, drawing the line where, who are you serving, yourself or the child, is very hard to draw. (Nicholas, Practitioner)

3.5.2 Boundaries: Responding to Behaviour

Maintaining boundaries in terms of responding to difficult behaviour also came up frequently in focus groups. While *working with behaviour* was identified as a potential threshold concept in practitioners' focus groups, practitioner participants often made explicit links to relationship or relational practice when discussing it:

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What kind of relationship? [...] Like, you want them to like you, like, 'That's how I'm going to get the most out of them is if they like me. So how do I get them to like me?' You know, 'I'll be the cool person that comes in. Cool team member'. [pause] But it's the opposite in my experience. It's when you're clear, concise, firm [...] I found in my experience, the really strong relationships [come from this] instead of going in and letting them away with everything. (Practitioner from focus group)

The preceding excerpt also reflects that transformative shift away from a more functional orientation to relationships (as reflected in practitioners' accounts of the early part of their threshold process) towards a strong relationship for its own sake. In the individual interviews, the majority of participants spoke of difficulties in responding to difficult behaviour within their discussions of troublesome areas of relational practice:

If you have an expectation that you don't want to be punched by [boy's name] unexpectedly. If that is your expectation and that is against your boundary and that you then think that that is not being respectful, then that is your starting point within that relational interaction with the young person [...] And then the feeling that goes along with that boundary, perhaps being, I suppose, violated. (Ian, Practitioner)

Stuart (2008) argues that practitioners must have an adept understanding of boundary management, and the context-dependent, fluid and elusive nature of relationship boundaries (Davidson, 2005; Garabaghi & Stuart, 2013) makes this a troublesome area of learning. Moreover, almost all interview participants referred to difficulties within their care teams or across inter-professional teams related to conflicting views about the function of relationships with young people:

The unlearning of preconceived ideas in RCC might include giving up methods that have previously been used to influence behaviour, such as points and levels, threats and punishments and, for some, rewards. When culture change of this kind takes place, for people who find ways to work through relationships, this may be transformative. For those who do not, it is more likely to feel troublesome, as the only tools they valued or knew how to use have been removed or devalued, and the short-term gains of behavioural approaches have been lost, creating a sense that their toolbox for managing behaviour is empty. Similarly, it can be counterintuitive that relationships are more effective than controlling regimes and responses as a means of reducing out of control behaviour. (Jim, Practitioner)

3.6 The Relational Nature of Teaching and Learning Relational Practice

In the process of analysing the interview data in relation to the five characteristics of threshold concepts, an inductive code (Lune & Berg, 2017) was identified around parallels participants were drawing between their threshold experiences of transformation and their other relational experiences. Well over half spoke of the positive influence of relationships with colleagues, fellow students and educators on the way that they thought about and approached their relationships with children and young people:

That's probably a huge part of it, the profs I most connected to and the profs that mean the most to me and have the most influence on me and my career to this point and my education was people who modelled all the things that I hold as being important.

Interviewer: Like what?

Time to build relationship. (Rachel, Practitioner)

Nicholas was emphatic about the parallels between what good educators bring to the learning process and what is expected of practitioners in the field:

Lecturers are going to pass on to us not only the learning, you know, but their culture so to speak [...] So, you know, if that's what is needed in the field, then why shouldn't it be given to the students to begin with ?

Interviewer: Yes, and when you say why shouldn't it be given to students, what is 'it'?

All of this, the sense of relationship, a sense of use of self, the tools which you are going to need in the field. (Nicholas, Practitioner)

As discussed in part 1, focus group data was analysed in relation to participants' views of the utility of threshold concept theory and within that, a strong theme around the self of the learner was identified and discussed. In re-analysing that data, much of what participants spoke about could be

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interpreted as the relational nature of teaching and learning relational practice, with it being discussed in two practitioner focus groups and all three educator focus groups:

So you have a challenge when working with a [...] new-to-the-field group of practitioners, in that your relationships with them, in terms of understanding where they're coming from, in terms of their attachment experiences, their understanding of relationship. You need to work through your relationship with them because you can't expect them to apply some of the concepts that a more experienced practitioner kind of takes for granted, like knowing their boundaries, working with love, and those sort of things. (Educator from focus group)

Another participant in a different focus group expanded the consideration from her own relationships with her students to the learning space:

The nature of the practice is so relational [...] so I think that the relationality of the work [of learning] is so fundamental [...] it's how we create safe working environments for people to be able to do that conceptual thinking relationally and not just about imposing or applying it to the child. (Educator from focus group)

Another focus group participant emphasized the necessity of trust:

You need a sense of trust in the person who is teaching you, you know, that the person is teaching you the right things, whether this is coming from the lecturer or book [...] trust is taking a risk to try the new [...] when you trust someone, then you listen [...] then you have to trust yourself to go out and do it. (Practitioner from focus group)

4. Discussion

That relational practice was the most frequently and deeply discussed potential threshold concept across the focus groups does not come as a surprise. In recent years, relationships have increasingly been receiving international attention in both the social work and child and youth care literature (Garfat, 2012; Li & Julian, 2012; Ruch et al., 2018; Ward, 2014). Examining relational practice through the lens of threshold concept theory, however, yields significant insights into the transformative process required for some students to think and practice relationally; it also brings

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into sharper relief what is necessary in order to support this process. Cousin (2010, p. 4) argues that involving students in dialogue about the difficulties they encounter and giving them room to “flounder, fail and forget” dramatically reduces the likelihood that they will abandon their commitment to learning. The same can be argued in relation to newly-qualified practitioners. For both, the provision of support for dialogue, reflection, debate and time (Barradell, 2013) – the latter of which is short supply in today’s accelerated universities (Vostal, 2016) – is needed, as well as alternative discourses about the nature of student learning (Land, 2016). Towards this end, as argued in part 1, simplistic constructions of ‘safe spaces’ must be reframed as *supportive liminal spaces* (Cousin, 2008).

The conflation of good relationships, a general relational orientation and relational practice can be identified in the data and is also evident in social policy and practice literature. While the three are closely related, they are not the same. Practitioners’ descriptions of their own relational practice had limited resonance with the definitions offered in the literature and beginning to discern relational (or relationship-based) practice from more general (often unthinking) ways of doing relationship may be an important part of supporting students’ progress through this threshold.

The difficulties students and practitioners encounter are not only due to the conceptual and practical complexities of relational practice. The above-mentioned unsettled educational and practice boundaries in the field also make relational practice troublesome. The field itself clearly appears to be going through its own threshold process; relational practice is almost universally accepted as centrally important and yet at the same time and as reflected in the data, what it actually is and how it should be enacted is contested (or invisible). Moreover, related conflicts of meaning and expectation tend to be mostly tacit. Thus, the “rules” of the “underlying game” (Meyer et al., 2010) are fluid and difficult to discern. This is likely most pronounced in tensions around relationship boundaries, where the “rules” are heavily influenced by expectations of other professions and residue from the “unremitting nature of the focus on institutional abuse” (Corby, Doig, & Roberts, 2001, p. 181). A different conceptualisation of professional boundaries, one less preoccupied with distance and risk avoidance, is necessary for practitioners to form the kinds of significant and enduring relationships that are identified by growing evidence as efficacious. Stuart’s (2012) definition of boundaries is relevant here, as it holds both an explicit reference to relational proximity in its use of “intimate communication,” as well as emphasising the relevance of the context within which the boundary is being considered.

It can be argued that the relational dimension is relevant to all teaching and learning environments and that high quality teacher/student relationships (however they may be defined) will have a

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positive effect on learning. That said, if relational practice is indeed a threshold concept in our field, then it raises important pedagogic and ethical questions about the way educators should engage in relationships with their students. If the relationship between practitioner and young person serves as a prototype for the young person in later relationships (Garfat, 2012), then the relationship between student and educator should offer parallel, prototypical experiences that enable relational practice with children and young people. The related implications are twofold: first, for educators to be effective, they must have successfully navigated their own threshold processes such that they not only know *about* relational practice but can model (and embody) it in their interactions with students; and two, that there are very likely similar issues of boundedness manifesting in the educational setting that parallel those described by participants about their practice settings – particularly related to professional boundaries. There may be a similar misfit between what are deemed to be appropriate professional boundaries in child and youth care or social work education and their fit with what is actually required to facilitate students' threshold processes, especially because it is the process and experience of relationship that is the focus of this threshold concept. Ward's (2018) call for a move from the *instructional* to the *learning mode* of professional education is concordant here. Thus beyond skills and knowledge, the educator's way of being in relationship is called upon in a way that warrants further consideration and again draws attention to educators' ethical synthesis of knowing, doing and being – their praxis.

Even educators who tend to be relationally adept will, like Nicholas (quoted above), still sometimes struggle despite grasping the concept of relational practice. This reveals something significant about at least some thresholds in residential child care and other cognate fields: successfully traversing a threshold does not necessarily mean it is no longer ever troublesome in practice. Indeed, some thresholds in some fields may actually be ongoing thresholds, with a liminal quality that may look qualitatively different at different stages of mastery, but may nevertheless be continual. The messiness so frequently referred to in the literature and participants' accounts may be, at least in part, related to this liminality. Part 1 argued that praxis is a useful counterpoint in conceptualising the relationship between threshold concept theory and the use of self in practice, especially in fields where the self is a primary instrument of the work. Relational practice epitomizes this argument and offers a more complex, nuanced understanding of what mastery might mean for those thresholds central to praxis.

Finally, Cousin's (2008) encouragement for students to be supported to dialogue about their difficulties with the troublesome nature of relational practice would be augmented by a similar call for educators to engage in dialogue about their own troublesome experiences – past or present – in

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practicing relationally. This would require supportive liminal environments similar to those described in part 1, where educators are supported to exercise the same courage in the face of uncertainty and vulnerability that is asked of students. Such liminal environments can create a facilitative space for more robust discussions about the ethical dimensions of relational practice – both between practitioners and young people, and between educators and students. It may crystalize our understanding of relational practice as an ongoing threshold process, not just for students and novice practitioners, but for those more advanced in their (direct or indirect) practice, and even for the field as a whole.

5. Limitations

The small, self-selecting sample limits generalisability. While the study's flexible design was not directed toward statistical generalisability, the findings may contribute to the development of theory which aids understanding in similar cases, sometimes referred to as *theoretical generalization* (Robson & McCartan, 2016). The involvement of participants from different countries and cultures did yield the interesting finding of similarity across the different locations in terms of the identification of *relational practice* as threshold, but it was not possible to disentangle and explore culture or other participant characteristics. Indeed, further research aimed at illuminating the influence of culture (and other factors) on students' and practitioners' experiences of coming to grasp threshold concepts in the field would be valuable, and not just cultures based on geography and ethnicity, but those micro-cultures that develop within individual services. Moreover, other factors, including gender, length and type of professional experience, and even trauma history, may exert significant influence over practitioners' experiences of threshold areas of learning and practice and therefore warrant further investigation.

6. Conclusion

The findings of this study firmly establish the relevance of threshold concept theory to the education and training of residential child care practitioners and identifies relational practice as a strong candidate threshold concept. All five characteristics – transformative, integrative, irreversible, bounded and troublesome – are reflected across the focus group discussions and follow up interviews. Practitioners' accounts of moving away from functional or defensive approaches to their relationships and of trying to shift working cultures away from being controlling, punitive or rule-

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bound as part of their threshold experiences of relational practice are significant, as these qualities characterise abusive care cultures (see Levy & Kahan, 1991, for a flagrant UK example). This amplifies the imperative to more effectively address the development of relational practice as part of practitioners' praxis, and the application of threshold concept theory makes a significant contribution towards this end.

The shift in emphasis on relational practice in recent years poses difficulties for the current managerialist paradigm of checklists, regulation and professional distance (Meagher & Parton, 2004). Relationships – especially therapeutic relationships – do not easily lend themselves to formulas, targets and outcomes measures. The emergence of love and enduring relationships in residential child care discourses across the UK and North America (Steckley, 2018) can be seen as reflecting an appetite to transcend these current constraints, but such a way forward requires an embrace of even higher levels of complexity and messiness.

The application of threshold concept theory also makes visible the liminal nature of relational practice for the field, as it too appears to be traversing a similar threshold; the inherent issues of boundaries and boundedness require further clarity and stronger assertion if professional education is going to equip practitioners for relational practice. Further research is needed to support the development of theorization and education to support relational practice in the field. Incorporation of the views and experiences of people who have been cared for in residential child care would be a necessary next step, as well as deeper exploration into experiences of relational practice thresholds and the concomitant shifts in identity and praxis (as discussed in part 1).

This application of threshold concept theory to relational practice has also identified that some thresholds in some fields may be characterised by a quality of continual liminality. Thus, it may not just be the notion of “concept” that should be expanded (Meyer et al., 2010), but also “threshold” to sometimes incorporate the sense of an ongoing threshold. This very likely has utility for other fields engaged in the application of threshold concept theory, and again highlights the importance of supportive liminal environments – and not just classrooms – as integral to good educational practice.

Finally, the epistemological (and therefore methodological) fit between threshold concept research, child and youth care research and child and youth care practice merits comment. Threshold concept theory offers a “relational model of educational research and development in which key actors (e.g. students, teachers, researchers) work within a framework of co-inquiry” (Cousin, 2008, p. 261). This

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strongly resonates with the co-inquiring approach to child and youth care research espoused by Bellefeuille and Ricks (2010), and this, in turn, resonates with what they refer to as “the collaborative meaning-making process that is so central to [direct] relational CYC practice” (p. 1235). Interestingly, those writing about relational methodologies – whether in threshold concept research or child and youth care research – describe a messiness that chimes with that described by study participants and direct practice literature. These resonances are important because they reflect and reinforce a degree of congruence across multiple levels of our field, something that has been identified as the theoretical touchstone for understanding what makes for well-functioning residential child care (Anglin, 2004). They also stand in sharp contrast to the dominant managerialist discourse of targets, technical-rational approaches and measurable outcomes that pervades the wider contexts of care. Put another way, threshold concepts offer theoretical traction for addressing the messy complexities of residential child care in a manner consistent with current developments in the field and, more importantly, in a manner that supports the ongoing struggle for congruence in the service of the best interests of the children and young people.

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