

Family support as a working style in child protection in Italy: A comparative study on social workers' child welfare attitudes

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Abstract

Comparative studies on child protection decision-making highlight the implications and determinants of differences in child welfare systems internationally and reinforce discussions regarding child protection practices and family support when a child is exposed to inadequate parental care. To date, Italian child protection studies have highlighted a system characterised by a strong degree of variability related to the absence of practices shared nationally. Differently, this comparative study focuses more on similarities within the Italian context, seeking to understand how they influence practices. The opinions of 188 Italian social workers with respect to the substantiation of maltreatment, risk assessment and intervention recommendations were compared with the results of a recent study involving practitioners in Israel, Northern Ireland, Spain and the Netherlands. The main outcomes show that Italian social workers prefer a family support orientation, meaning that children are usually removed from their home only if necessary and generally with the aim of reunification with their families. The study also reveals that Italian professionals are more in favour of residential care than foster care.

KEYWORDS

decision-making, child protection, comparative studies, Italian social worker, maltreatment substantiation, risk assessment

1 | INTRODUCTION

Professionals working in child protection make decisions that can have positive or negative consequences on the lives of children and adolescents, as well as on their families (Farmer et al., 2008). The importance of these decisions makes it essential to understand how decision-making processes are established and the factors influencing them. Although this specific area is studied internationally (Arad-Davidzon & Benbenishty, 2008; Fluke et al., 2020, 2014; López et al., 2015; Munro, 2019; Trocmè et al., 2013), there are

currently few studies in Italy (Cabiati, 2015; Fargion, 2014; Segatto & Dal Ben, 2020). The results of the international studies highlight “low agreement across professionals on criteria utilized to make decisions about the future of children and families” (Lindsey, 2004, p.163) and reveal that decisions are often inconsistent within the child welfare services themselves (Gold et al., 2001; Karski, 1999; Rossi et al., 1999).

According to the *Judgments and Decisions Processes in Context* model (JUPIC) (Benbenishty & Arad-Davison, 2012; Lopez & Benbenishty, 2020), used as a reference in this study, judgments and

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decisions in cases of alleged child maltreatment are the result of complex interactions between features of the case (related to the child and his/her family), characteristics of the professionals (such as personal experiences or attitudes towards child removal) and the specific context of the agency where decisions are made (such as guidelines or child placement policies). Moreover, other studies underscore that decision-making is also influenced by the country's social and political features (Benbenishty et al., 2003; Gilbert et al., 2011; Wolf et al., 2011). Specifically, decisions seem to reflect the country's historical background, its socio-economic conditions, and welfare system policies and attitudes towards the costs and benefits of child placement.

In order to understand the role of context in child welfare decision-making, it is important to conduct comparative studies that examine how similar cases lead to different judgments and practices in different child welfare systems (e.g., Benbenishty et al., 2015; Gilbert et al., 2011). The aim of the present study is to compare decision-making in child welfare in Italy with other European countries to see similarities and differences in comparison.

2 | COMPARATIVE STUDIES ON DECISION-MAKING IN CHILD PROTECTION

Cross-national studies have revealed significant influences exercised by welfare systems in decision-making, identifying two main directions for child protection policies: one focussing on protecting the child, and one supporting the parents. These two approaches differ from each other in the manner they define maltreatment, in the methods in which maltreatment is treated—including the approach used by professionals—and in the procedures in which child are placed outside the family (Gilbert et al., 2011).

An interesting study compared professionals' decision-making processes in Canada and Israel (Gold et al., 2001; Osmo & Benbenishty, 2004), highlighting that Canadian practitioners were more in favour (58%) of removal of the child, whereas 89.5% of Israeli professionals preferred to keep the child with his/her family while working with the parents. These different positions can be understood based on the two countries' social and cultural values: Israel is more focused on family support than Canada, where a child protection orientation is more common. There are also organisational differences, as social services in Israel are run by public authorities whereas in Canada by private agencies.

Jergeby and Soydan (2002) compared social workers' attitudes in Sweden, United Kingdom, Denmark, Germany, and Texas (USA) with regard to risk assessment, perception of problems, tolerance of corporal punishment and judgments on the appropriateness of interventions. The study highlighted that caseworker in Texas (USA) had a greater removal orientation whereas the other countries focused more on maintaining and supporting the relationship between the child and the family. The mainly selected alternatives by social workers interviewed were a more radical intervention to try to

improve the situation (United Kingdom, Denmark and Germany), voluntary or compulsory removal of the child from the family for placement (primarily in Texas), and involving child psychiatry specialists to assess the family's situation or medical experts to assess the child's injuries (mainly in Sweden and Denmark). The most important result is related to a high level of variability in decision-making within each country, even in the United Kingdom where practices are more formalised than in other countries.

Brunnberg and Pećnik (2007) compared the opinions of Swedish and Croatian professionals. Their results highlight that Croatian practitioners were more in favour of the removal of the child, whereas the Swedish social workers preferred keeping the child with his/her parents while continuing to offer family support. According to the authors, these different opinions are probably connected to the fact that the Swedish social system receives significant economic and human resources, which allows long-term interventions. In contrast, the Croatian child welfare system developed only in recent years, so it faces greater difficulties, and its interventions are more radical.

Križ and Skivenes (2013) compared practices in the United Kingdom, Norway and California, revealing differences in risk assessment and consequently on the interventions proposed by case-workers: "for children at risk of maltreatment in Norway (and less so in England), system intervention is more likely than for children in the United States. This indicates a totally different relationship between children and the welfare state in these countries" (Križ & Skivenes, 2013, p. 1869).

Finally, in the study of Benbenishty et al. (2015), professionals in Israel, Netherlands, Northern Ireland and Spain were asked to assess a vignette related to a case of alleged child maltreatment to establish substantiation of maltreatment, risk assessment and intervention recommendations. The results showed that there were significant country differences on most measures, underscoring the importance of context in child protection decision-making. Specifically, professionals from Northern Ireland had the strongest attitude against child removal of all participating countries and were most in favour of supporting and involving parents, and of child advocacy. Israeli practitioners had a low degree on child removal both with parental agreement and under a court order. The findings showed that Israeli professionals resembled Northern Irish caseworkers in supporting parental involvement in decision-making but had a less favourable attitude towards child participation. Finally, Israeli professionals had the most positive view of residential care, which was significantly different from all the other countries. While Dutch professionals resembled their Northern Irish colleagues in not preferring removal, they expressed the lowest level of support for parent and child participation in decision-making of all countries. Spanish practitioners were the most likely of all the other participating countries to recommend removal and had a much lower preference for reunification. They also showed very low support for parent and child participation. With regard to interventions, Spanish professionals demonstrated the most positive view of foster care, significantly different from all participating countries.

3 | THE ITALIAN CONTEXT

In Italy, child protection services are managed by public authorities and have a “hybrid” working orientation (Bertotti, 2012; Fargion, 2014), with strong emphasis on family support in accordance with national legislation, but also with limited resources invested in supporting families that is an essential part of child welfare orientation. At the same time, the law includes both the commitment to support parents and the interest of removing children and adolescents living in situations presenting risk of injury based on the assessments of professionals working in child protection services and/or by the juvenile court. Some studies (Fargion, 2014) have highlighted a lack of uniformity in decision-making primarily regarding the interventions recommended by professionals and to risk assessment. Concerning the characteristics of each case, the age of the minor, the degree of maltreatment was the most significant variables in the decision-making process. The social workers recognised that their own personal experiences (e.g., parenthood) could be relevant in their management of child protection cases. Finally, also of fundamental importance were the local resources available to the agency in terms of networks, financing for placement in residential care, implementing personalised interventions and human resources within the services to ensure long-term commitments (Segatto et al., 2020). In addition, social workers rarely use standardised tools and shared practices: “it was observed that even when provided tools designed to facilitate the adoption of a shared mode of operation, the interviewees did not use them, believing they limited their professional autonomy” (Segatto et al., 2020, p.9).

4 | METHODOLOGY

4.1 | Goals

This study used the JUDPIC model to describe factors influencing decisions in cases of alleged child maltreatment, considering (a) risk assessment and intervention recommendations, and (b) professionals' attitudes regarding the following: (i) Removal from the home of children at risk, (ii) reunification with the family, (iii) placement in foster care, (iv) placement in residential care, (v) childrens' involvement in decision-making and (vi) parents' involvement in decision-making. The data collected on the sample of 188 Italian social workers are compared with those of the international study by Benbenishty et al. (2015). This comparison aims to determine whether and how cultural and social influences in Italy impact professionals' decision-making thereby to initiate reflections on policies related to child and family well-being.

4.2 | Procedure

The study followed all ethics requirement: The participation was voluntary, anonymous and confidential. The questionnaire was

administered electronically using the LimeSurvey platform to ensure rapid diffusion, respect the privacy of all participants and allow participants to dedicate time and space to it. As, in the original study, samples were recruited in different ways in the participating countries in order to represent the population of decision makers in their respective systems as accurately as possible, our samples were recruited through snowball sampling, with the research group contacting child protection's social workers who had participated in previous studies and asking them to recommend other colleagues. The research group's professional network on child protection was also used through social media such as LinkedIn and Facebook. Over 1000 social workers were contacted, with 582 of them beginning the questionnaire and 188 completing it. It is important to emphasise that the data collected in this study are not representative of the population of Italian social workers, though they are interesting because they provide information and perspectives on caseworkers' attitudes.

4.3 | Sample

Of the 188 social workers having participated in the study, 81 (43.1%) work in child protection services, 58 (30.8%) have worked in child protection services in the past, and 49 (26.1%) have never worked in child protection. We decided to include social workers not working directly in child protection services because of the high level of turnover in social services and the lack of request of specialisation to work in child protection area in Italy (Argentin et al., 2020; Cabiati, 2015).

The great majority (95.7%) were females, reflecting female dominance in the Italian social work field. The average age of the sample was 40.16 years (s.d. 10.92 years). In terms of education, about half (50.5%) had a master's degree, followed by 38.3% with a bachelor's degree, and the remainder of the sample with another qualification such as a doctorate (11.2%). In terms of professional experience, the practitioners had worked 14.22 years on average (s.d. 10.71 years) with an average of 10.53 years (s.d. 9.86 years) of service at their current workplace.

4.4 | Instrument

Following the study by Benbenishty et al., the instrument had three main parts: Demographics, assessment of the particular case using a vignette and workers' child welfare attitudes, not necessarily related to the particular case.

The first section collected demographic information such as age, gender, education level, type of child welfare agency, years of service and other professional career information.

In the second part, the participants were presented with a description of a case of alleged child maltreatment and were asked to answer some questions on it (*Vignette Questionnaire*). The case describes a family composed of two parents and three children. Social services receive a call from the primary school teacher who is worried

about the eldest daughter named Diana (6 years old). The vignette has two parts. The first part of the case describes Diana's family and provides information about the teacher's report (bruises, neglect, economic issues and the parents' conflictual relationship).

Following the description of the vignette, the respondents were asked to:

1. substantiate the suspicion of maltreatment for each of five types of maltreatment (emotional abuse, physical abuse, emotional neglect, physical neglect, and sexual abuse) on a 5-point scale, from 1 = *strongly disagree*, to 5 = *strongly agree*.
2. assess the level of risk related to physical and emotional harm (on a 5-point scale, from 1 = *no risk*, to 5 = *very high risk*) if the child were to remain in the home with her biological parents.
3. recommend the best intervention in the case, choosing one of the following five options: (1) Refrain from further intervention; (2) indirect intervention through other professionals who are already in contact with the child (e.g., teacher); (3) direct social work intervention without the provision of additional services; (4) direct social work intervention with the provision of additional services (e.g., afterschool care for the child; attendance at family centre); (5) placement of the child with a foster family.

The second part of the vignette presents Diana's situation after 2 years of placement in foster care, with a clear improvement in her situation. However, there has been no change in her biological parents' situation because they have refused to collaborate with social services. At this point, the respondents were asked to assess:

1. the level of risk related to physical and emotional harm (on a 5-point scale, from 1 = *no risk*, to 5 = *very high risk*) if Diana were to be returned to her biological parents.
2. Then, again to choose an intervention from among the following options: (1) Recommend reuniting the child with her biological family while continuing to work with the foster family, the biological family and the child on the reunification process; or (2) recommend keeping the child with the foster family while continuing to work with the foster family, the biological family and the child.

The third part included *The Child Welfare Attitudes Questionnaire* by Benbenishty et al. (2003) and Benbenishty and Arad-Davison (2012), which examines professionals' attitudes with respect to the removal and reunification of children at risk. The scale includes 50 statements covering six content areas related to child protection practices and interventions: Removal from the home of children at risk (alpha: .66), child reunification with the family (alpha: .53), placement in foster care (alpha: .67), placement in residential care (alpha: .76), child's involvement in decision-making (alpha: .77) and parents' involvement in decision-making (alpha: .72). The respondents were asked to indicate their degree of agreement with each item on a 5-point scale (from 1 = *strongly disagree* to 5 = *strongly agree*).

The *Vignette Questionnaire* and the *Child Welfare Attitude Questionnaire* were modified slightly to adjust them to differences in the

Italian context. This adaptation involved two main steps: The translation of the items was presented to a restricted group of social workers to assess the coherence of the translation to the original. The tool was modified in accordance with the feedback, was administered to a sample of 85 social workers and then subjected to internal reliability analysis using Cronbach's alpha (Di Masi et al., unpublished). The version used in this study is the result of additional changes made to the questionnaires following administration. The original Vignette Questionnaire included four different versions related to the end of the second part of Diana's case regarding her wish for reunification and to her parents' level of collaboration with the intervention. However, the comparative study results showed that these areas (child's wishes about reunification; parental cooperation) had no significant effect on the professionals' assessment. For this reason, we decided to use only one version of the questionnaire in which Diana's conditions had improved and her parents did not collaborate with social services.

5 | RESULTS

5.1 | Assessing maltreatment substantiation and type of intervention

Considering the *Vignette Questionnaire*, the majority of the sample agreed that the child was a victim of emotional neglect (94.7% chose *strongly agree* or *agree*) with mean of 4.28 (s.d. .62), emotional abuse (88.9% chose *strongly agree* or *agree*) with mean of 4.24 (s.d. .75) and physical neglect (86.7% chose *strongly agree* or *agree*) with mean of 4.11 (s.d. .67). A slight majority of respondents did not believe that she had suffered physical abuse (53.7% chose *strongly agree* or *agree*) with mean of 3.49 (s.d. .77), whereas a clear majority of them believed there was no sexual abuse (82.4% chose *strongly agree* or *disagree*) with mean of 1.98 (s.d. .65) (Table 1).

After their assessment of the types of maltreatment, the practitioners were asked to decide whether Diana was at high risk for emotional or physical abuse if she remained in the home (Table 2). The results highlight those professionals perceive a very high risk of emotional abuse (93.7%, 179 interviewees chose *high risk* or *very high risk*) with mean of 4.49 (s.d. .63) and a moderate risk of physical abuse (69.7%, 131 interviewees chose *high risk* or *very high risk*) with mean of 3.82 (s.d. .73) (Table 2). There were no differences in the assessment of the risk of maltreatment for Diana at the time of notification and following the period in which she was removed from home (Table 2).

The respondents were then asked to recommend an intervention. The majority (65%) of the social workers would allow Diana to remain with her family: Supporting her with daily care service while continuing to work with her biological parents (46.3%), or only providing support to the biological parents (18.6%) (options 3 and 4, respectively). Just 32% of the professionals would remove the child and place her with a foster family (option 5). The rest of the social workers (3.1%) considered other intervention inappropriate or recommended indirect

TABLE 1 Percentage, means and standard deviations of maltreatment substantiation by Italian professionals.

Type of maltreatment substantiated	Strongly disagree	Disagree	Not agree/nor disagree	Agree	Strongly agree	Means (SD)
Emotional abuse	--	3.7%	7.4%	49.5%	39.4%	4.24 (.75)
Physical abuse	--	6.9%	46.8%	36.2%	10.1%	3.49 (.77)
Emotional neglect	0,5%	0.5%	4.35	60.1%	34.6%	4.28 (.62)
Physical neglect	--	2.1%	11.2%	60.1%	26.6%	4.11 (.67)
Sexual abuse	20,2%	62.2%	17.0%	--	0.5%	1.98 (.65)

TABLE 2 Means (SD's) of assessments of risk if child were returned home by Italian professionals.

Type of maltreatment	First evaluation	After placement in foster care
Emotional abuse	4.49 (.63)	4.45 (.58)
Physical abuse	3.82 (.73)	3.81 (.82)

intervention through other professionals who are already in contact with the child (e.g., teacher).

The respondents were asked again to recommend an intervention after two years of foster care placement: almost all participants (96.3%) recommended keeping Diana with the foster family.

5.2 | Child welfare attitudes

Considering the six content areas related to *The Child Welfare Attitude Questionnaire*, we note an interesting degree of differentiation and discretion on the part of professionals. In four of the six scales, the mean score was around 3 (*not agree/nor disagree*): they appear neither for nor against removal, neither for nor against reunification, and neither for nor against involving the child and parents. Observing the minimal and maximal values on removal and reunification, we note that the social workers' responses differ significantly, with scores ranging from 1.00-1.27 to 4.73-5.00 (Table 3), so that it was impossible to identify some common trend on these themes. Whereas, observing the minimal and maximal values, with regard to child and parent involvement in the decision-making process, the professionals, despite again providing highly differentiated responses, seemed to be slightly more in favour of involving the child (min 1.00; max 4.89) than of involving the parents (min 1.22; max 4.33) (Table 3).

Considering foster care and residential care, we note that the practitioners had a negative attitude towards both, but the most interesting observation is that they appear to be more positively disposed to placement in residential care (min 1.17; max 4.17) than in foster care (min 1.25; max 3.50).

5.3 | A cross-national comparison between Italy, Israel, Northern Ireland, Spain and the Netherlands

Considering the *Vignette Questionnaire*, we compare the Italian results with those of the international study of Benbenishty et al. (2015) to

highlight similarities and differences on the assessment of child maltreatment substantiation by professionals from all participating countries (Table 4).

Regarding emotional abuse, Northern Irish professionals had the highest assessment of emotional abuse, followed by Spanish and Israeli practitioners, whereas Italian and Dutch professionals made the fewer assessments of emotional abuse. In particular, Dutch practitioners made the lowest assessment of emotional abuse of all the professionals from all the other countries.

The same was true of the assessment of emotional neglect, where Northern Irish professionals made the highest assessment of emotional neglect followed by Israeli practitioners to a similar degree, whereas Spanish and Dutch professionals considered there to be a lesser degree of emotional neglect. However, the lowest degree was by Italian social workers. So, Italian professionals made the lowest assessment of emotional neglect with respect to the practitioners from all the other countries.

With regard to physical neglect, Northern Irish professionals were most likely to consider there to be physical neglect, followed by Israeli practitioners with a similar degree of assessment, then the Spanish professionals, with the Dutch and Italian social workers expressing the lowest assessment. So, Italian practitioners also made the lowest assessment for physical neglect with respect to the professionals from all the other countries.

Considering the bigger picture related to the assessment of the worth of maltreatment in Diana's life, we observe a common orientation between Northern Irish and Spanish professionals, which considered the prevalent abuse in this order: emotional abuse, emotional neglect, physical neglect, and physical abuse. Instead, Israeli, and Italian professionals disagreed, considering that the most prevalent type of abuse was, in order: Emotional neglect, emotional abuse, physical neglect, physical abuse. Finally, Dutch professionals differ from all the others considering more relevant in order: emotional neglect, physical neglect, emotional abuse, and physical abuse. All practitioners, from all countries involved in the study, agree that sexual abuse was least likely (or absent).

With regard to intervention recommendations, we underline that considering the original version of the questionnaire we reduced the answer's options to the following categorisation: Direct social worker intervention with parents without removal of the child, placement of the child in daily care service while continuing to work with her biological parents, or placement of the child with a foster family (putting together the two options with or without

TABLE 3 Means and standard deviations of the six areas of the child welfare attitudes by Italian professionals.

	Against removal from the home of children at risk	In favour of reunification	In favour of child's involvement in decision-making	In favour of parents' involvement in decision-making	Positive view of foster care	Positive view of residential care
Means (SD)	2.71 (.47)	3.19 (.77)	3.26 (.67)	2.73 (.62)	2.12 (.44)	2.35 (.61)
Minimum	1.27	1.00	1.00	1.22	1.25	1.17
Maximum	4.73	5.00	4.89	4.33	3.50	4.17

TABLE 4 Means and standard deviations of maltreatment substantiation by country

Type of maltreatment substation	Israel	Northern Ireland	Spain	Netherlands	Italy
Emotional abuse	4.49 (.73)	4.67 (.49)	4.55 (.58)	4.02 (.86)	4.24 (.75)
Physical abuse	3.85 (.85)	3.73 (.93)	3.71 (.86)	3.41 (.79)	3.49 (.77)
Emotional neglect	4.63 (.59)	4.64 (.53)	4.51 (.60)	4.47 (.59)	4.28 (.62)
Physical neglect	4.38 (.70)	4.39 (.80)	4.33 (.71)	4.14 (.68)	4.11 (.67)
Sexual abuse	1.60 (.75)	2.71 (.60)	1.90 (.78)	2.19 (.67)	1.98 (.65)

TABLE 5 Frequencies and percentages of the types of intervention recommendation by country.

Type of intervention	Israel	Northern Ireland	Spain	Netherlands	Italy	Total
Direct social worker intervention with parents	19	3	44	24	35	125
	9.1%	1.6%	21.8%	11.2%	18.6%	12.5%
Placement in daily care service	136	144	51	122	87	540
	65.4%	59.4%	25.2%	57.0%	46.3%	50.7%
Placement in foster care	28	57	67	24	60	236
	13.5%	29.7%	33.2%	11.2%	31.9%	23.9%

parental agreement). We decided this reduction because of the small amount of interviewed that choose these two last options to permit us to made comparison. So, we observe (Table 5) that Spanish professionals were most likely to propose direct social worker intervention with the parents (21.8%), followed by Italian social workers to a lesser degree (18.6%), then by Dutch (11.2%) and Israeli practitioners (9.1%). However, only a very small minority of Northern Irish professionals would propose this kind of intervention (1.6%). Next, we can highlight that the vast majority of Israeli practitioners would propose child placement in daily care service (65.4%), followed by a large majority of Northern Irish professionals (59.4%) and Dutch social workers (57%), whereas less than half of Italian professionals would propose this intervention (46.3%), followed by 25.2% of Spanish practitioners.

Ultimately, regarding removal of the child from her biological family with placement in foster care, this intervention was chosen predominantly by Spanish and Italian professionals (33.2% and 31.9%, respectively), followed by Northern Irish practitioners (29.7%), whereas a much lower percentage of Israeli and Dutch social workers tended to propose removal of the child (13.5% and 11.2%, respectively).

Lastly, Table 6 shows Italian social workers' attitudes in the six content areas investigated through the adaptation of the *Child Welfare Attitudes Questionnaire*, comparing them with the attitudes of professionals from all other countries participating in the international study.

Italian professionals had the most favourable attitude to removal (mean = 2.71) with respect to all the other practitioners from all the other countries. Northern Irish (mean = 3.19) professionals were most averse to removing the child from her biological family, followed by Dutch, Israeli and Spanish practitioners, and last by Italian social workers who were much less averse to it than all the others.

We observe that Northern Irish (mean = 3.28) and Italian (3.19) professionals were most favourable of reunification, followed by Israeli and Spanish practitioners with a similar attitude, whereas Dutch professionals were less in favour of reunification than all other social workers.

Considering children's involvement in the decision-making process, we see that Northern Irish (mean = 3.78) professionals were most favourable of child advocacy, followed by Israeli and Spanish practitioners with a similar attitude. All of them had a higher average than Italian (mean = 3.26) and Dutch (mean = 3.02) social workers.

TABLE 6 Means and standard deviations on child welfare attitudes by country

Child welfare attitudes	Israel	Northern Ireland	Spain	Netherlands	Italy
Against removal from the home of children at risk	3.11 (.51)	3.19 (.57)	3.02 (.54)	3.16 (.53)	2.71 (.47)
In favour of reunification	3.02 (.65)	3.28 (.64)	3.05 (.56)	2.98 (.56)	3.19 (.77)
In favour of children's involvement in decision-making	3.47 (.54)	3.78 (.48)	3.44 (.58)	3.02 (.45)	3.26 (.67)
In favour of parents' involvement in decision-making	3.43 (.43)	3.43 (.47)	3.04 (.49)	3.02 (.38)	2.73 (.62)
Positive view of foster care	3.45 (.44)	3.52 (.52)	3.67 (0.50)	3.52 (.36)	2.12 (.44)
Positive view of residential care	3.59 (.45)	2.88 (.56)	3.35 (.48)	3.19 (.50)	2.35 (.61)

Regarding parental involvement in the decision-making process, we observe that Italian social workers (mean = 2.73) were least in favour of involving parents in decision-making compared to all the other countries. Israeli (mean = 3.43) and Northern Irish (mean = 3.43) professionals were most in favour, followed by Spanish and Dutch practitioners with a similar attitude.

With regard to the viewpoint related to placement in foster care (mean = 2.12) and/or in residential care (mean = 2.35) Italian social workers were least favourable towards both these options, meaning they had the most negative view of both foster care and residential care placement with respect to all other professionals from all the other countries. Spanish (mean = 3.67) professionals had the most positive view on foster care placement, followed by Dutch and Northern Irish practitioners with a similar attitude, and then Israeli professionals with a less favourable attitude. Considering the placement in residential care, we note that Israeli (mean = 3.59) professionals had the most positive view, followed by Dutch and Spanish practitioners, whereas Northern Irish professionals had a less favourable view.

6 | DISCUSSION AND IMPLICATIONS

Considering the studies (Bertotti, 2020; Del Valle et al., 2013; Milani et al., 2019) and our country's legislation, Italy tends to lean towards family support to avoid removing definitively children from their families and favours processes that allow children to grow up with their families as much as possible. The findings of our research, though revealing a high degree of discretion in the assessments of the participants, are consistent with this perspective.

Indeed, although the professionals believed that Diana had suffered emotional and physical harm, most of them considered it most appropriate to undertake direct social worker intervention with her biological parents or to place the child in daily care service. We observe that only 32% of professionals initially declared being in favour of removal based on the case information. However, it is important to underline that the findings related to the case after two years during which Diana had lived with a foster family, show that close to the majority of professionals agreed with this intervention, because it offered the child better living conditions, and due to the lack of collaboration by her biological family.

Therefore, despite being those who have shown the most favourable attitude towards child's removal between the professionals involved in the study, Italian professionals only rarely consider removal from home to be a possible initial intervention, even in cases like Diana's where signs of maltreatment appear obvious and shared.

In this perspective, working for the collaboration of families on child protection projects should be one of the factors determining important differences related to the success of the intervention recommended. On contrary, the results on the Italian social workers attitude towards this collaboration show that they are low interested in involving parents in the decision-making process. It gives the impression they want families to join the project but not to participate in it. This attitude can be understood through the lens of the difficulties of the Italian professional in managing the conflict that such participation/involvement could generate (Gold et al., 2001). Another interesting result is related to Italian social workers' favourable opinion of residential care over foster care. Although this finding should be investigated further, we can hypothesise that given Italian professionals' favourable attitude for reunification, they consider this kind of intervention more protective of children as it preserves their relationship with their biological families.

Regarding the international comparison, the Italian professionals' attitudes were similar to those of the Israel in the assessment of alleged child maltreatment. They tended to identify a higher risk as Northern Irish, Israeli and Spanish practitioners. Even though, the peculiar situation of Italy is highlighted by considering the recommendations for intervention: Italian social worker appear to be oriented towards family support such as Israeli, Northern Irish and Dutch case-workers choosing to intervene on parent or placing the child in a daily care centre, but they also show similarity to Spain, more oriented towards the protection of minors, especially in the percentage of those who choose to place the child in foster care. The Italian and Dutch professionals shared the same orientation on the involvement of the children and parents in decision-making, with both showing a less favourable attitude to involving them during interventions with respect to all the other participating countries. Next, it is important to highlight the Italian professionals' attitudes towards residential care and foster care; we have already stated that they were less favourable of them than all the other professionals from all the other participating countries. As already explained by Benbenishty et al. (2015), the Netherlands have a strong focus on family support, confirming the similarities with Italian social workers.

7 | CONCLUSION

In conclusion, the Italian research findings confirm what had already been underscored in the international study, that is, that the orientation of social policy in each country is an important factor that creates clear differences in child protection interventions. The child protection decision-making process in Italy is characterised by a high degree of discretion in terms of legislation and interventions, having consequences on social workers' practices and on the results of interventions (Segatto et al., 2020; Segatto & Dal Ben, 2020), and by the centrality of the biological family bond, with family support interventions appearing to be at the heart of the assistance process, which does not exclude the use of removal, albeit rarely as a first intervention.

Despite having highly differentiated personal attitudes towards specific interventions, Italian professionals generally remove the child only to protect the child's best interests from serious harm and always with the goal of reuniting the child with the biological family (Segatto & Dal Ben, 2020).

Unfortunately, we should emphasise that this type of practice does not always guarantee the best results for children's well-being, because it usually creates a chronic situation while waiting for the parents' situation to improve or for institutions to verify the lack of efficacy of family's support interventions.

Another interesting aspect regarding social workers' greater willingness to involve the children rather than their parents is that the responses of the participants appear both to be overestimated with that which occurs actually in Italian protection agencies and appears to correspond more to a symbolic or ideal vision than a real one.

An additional important theme is that related to the attitude expressed by Italian social workers with regard to foster care placement, which is preferred more rarely than residential care placement and is often chosen very late in the game when the child's relational situation appears compromised and difficult to manage in a non-professional context, or instead of adoption to avoid rupturing ties with the biological family. For this reason, it seems appropriate to highlight the need to promote foster care among social workers, so it can become a true resource for social services.

8 | LIMITATIONS

This study has limitations, which should be considered in order to correctly interpret the results.

First of all, because we did not participate in the original study, we were only able to compare the means and percentages and were not able to generate other statistics. Regarding the survey tool, the use of vignette creates a context that, although it has been shown to be comparable to that of real life (Evans et al., 2015), is nevertheless artificial. Therefore, it is not possible to be certain that the professionals would actually have acted as reported in the questionnaire, especially considering that decision-making in this area is divided in

contexts of high complexity and external pressures. Next, the translation of the vignette used in the various countries may have led to discrepancies on the equal understanding of the story, as also underlined in the original comparative study.

Also, with regard to the tools used, it should be noted that Italian social workers have little experience in expressing their assessments using standardised tools and scales, so the results may not always fully reflect their opinions. Second, decisions are usually taken by a team, therefore not a single professional: for this reason, it would be interesting if the study was conducted not only on social workers, but also on other professionals (e.g., psychologists, educators, and judges) in order to also know their opinions and to deepen the part of the processes through a method of investigation allowing group simulations. Finally, as regards the specific Italian context, it is important to emphasise that the data collected are not representative of the population of Italian social workers, though they are interesting because they provide information and perspectives on caseworkers' attitudes that should be useful as a starting point for reflections on child protection decision-making with the aim of continuing this work in future research.

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DATA AVAILABILITY STATEMENT

The data that support the findings of this study are available from the corresponding author upon reasonable request.

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