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# RELATIONAL LISTENING, LISTENING BARRIERS, AND LISTENING FACILITATION IN FINNISH ADMINISTRATIVE CARE ORDER PREPARATION HEARINGS

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## ABSTRACT

This qualitative study aimed to investigate clients' listening barriers as well as listening facilitation-related practices applied by social workers in an emotionally charged relational listening situation emerging in administrative hearings. These hearings are filled with tensions that can be assumed to impair the listening of parents and children because in the hearings, final decisions regarding giving a child into care are made. The study examines an authentic child protection situation with three different data sets. Data are analyzed with the thematic content analysis. The results indicate that the clients' intra- and interpersonal as well as institutional listening barriers can be facilitated by practices applied by social workers in various ways. The study also interestingly reveals how the listening dimensions of social workers are constructed in the relational listening situation emerging in administrative hearings. Even though the study describes the Finnish system and procedure of taking a child into care, and procedural and legal systems are not similar between countries, the core of the social workers' profession worldwide is relational. Thus, our findings regarding relational listening in social work can be applied widely. Moreover, global similarities regarding the listening dimensions of social workers could be examined in future studies.

When Finnish social workers have described their work, they have talked about themselves as relational actors and very little as agents of the statutory bureaucratic system (Eronen et al., 2020). This is the case even though they use public power over families while working in partnership with them. This interesting polarity is highly tangible in administrative hearings in which decisions are made regarding the care order of a child, one of the most far-reaching decisions that can be made in the context of child welfare services. Still, the practices and the institutional communication of the administrative hearing have scarcely been studied (Helavirta et al., 2014).

Giving up a child into care is an emotionally charged situation for parents and children, so it can be assumed that administrative hearings are filled with tensions that impair listening and understanding. In the legal sense, social workers need to find out whether parents and children consent or object to their proposal for a care order. Achieving this, they need to find out the clients' opinion of the case. This study focuses on examining the relational nature of this institutional communication situation through possible barriers to clients' listening and the practices that social workers use to make understanding the decision-making process and the decision itself easier. As the clients are the actual decision makers in administrative hearings, the listening that they express either themselves or through the lenses of social workers are examined.

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## Theoretical Framework

### *The administrative hearing*

The administrative hearing as a part of care order preparations is an institutional decision-making situation in Finland in which taking the child into care is considered. It is estimated that client's contact with authorities usually lasts from a few months to several years before such a hearing is organized. During that time, the family is offered supportive services so that the child could stay at home in improved conditions.

The procedure of taking a child into care restricts parental rights, as the child is moved into the care of child welfare services to enhance the child's right to protection. In most European countries, this procedure is part of legal services and is conducted in courts (Burns et al., 2017). In Finland, however, the legal system is only involved in cases in which a custodian or a child over 12 years objects to the care order proposal in the administrative hearing. In practice, this means that 75% of all Finnish care order decisions are made by social welfare authorities in municipalities and 25% by the Administrative Courts (Poso & Huhtanen, 2017).

The administrative hearing, which is required by the Child Welfare Act, (2007), must fulfill two specific legal purposes. The first goal is to ensure that all relevant information is available for the clients before they express either their consent or objection to the care order proposal. This is ensured by providing the documents presenting the arguments for the care order proposal to the clients. The second goal is to ensure that the clients feel free to express their opinion regarding the case. These two goals are related to the understanding of the client and the client's free will (or self-determination). It can be assumed that understanding in this situation is of high importance to the client. However, according to Hargie (2016) the emotional distress in the formal situation like the hearing may impair the client's ability to listen and understand the relevant information and implications of the proposed care order.

Although the hearing is a one-time institutional communication situation between parties, the participants (two social workers with one party – parents and children 12 years or older) usually share a mutual history from their previous meetings. This means that the already established relationship gives meaning to and frames the hearing. The relationship contextualizes the messages that are exchanged and listened to, but at the same time the administrative hearing constructs institutional practices through relational communication between interlocutors (Valikoski et al., 2020).

### *Relational listening*

The administrative hearing is a stressful and emotional situation for the client. The goals for the hearing put pressure on the client's cognitive, relational, and social competencies. Information processing has been demonstrated to be a cognitive phenomenon, but also a part of the listening process (Imhof, 2010), whereas opinion-giving is a relational one in which the role of listening is emphasized. Thus, in the hearing situation the social worker needs to facilitate the client's cognitive ability to adopt and understand information, but also to manage the relational aspect of the decision (Enroos et al., 2021).

Relational listening in the administrative hearing has been examined from the perspective of relational communication theory that draws from the core assumption that every message includes content and relationship components (Watzlawick et al., 1967). Relationships emerge from repeated interactions (Wilmot, 1995), and each interaction adds information about the relationship and contextualizes the messages exchanged between interlocutors. Moreover, the concept of relational listening draws on Brownell's (2018) definition of relational listening as being what goes on between people communicating rather than the process of creating and sending messages: The focus is on the way in which listeners construct meanings from what speakers have said. Relational listening takes into account that listeners have perceptual differences and thus must negotiate shared meanings as they frame communication situations differently based on their previous experiences and knowledge.

The term “relational listening” has also been defined as one of listening styles (Bodie, 2011) and understood as reciprocal listening (Floyd, 2014). Relational listening has been found to construct and maintain the confidential relationship between the participants, which in turn increases, for example, their interaction involvement (Keaton et al., 2015). Thus, here we define relational listening as indicating concern with and awareness of others’ feelings and emotions (Keaton et al., 2015).

A concept that is closely linked to relational listening is the relational message, which refers to all messages that represent a meaning about a relationship between two people (Dillard et al., 1999). Relational messages are usually related to the interaction goals of the relationship. The achievement of these goals is affected by seven aspects of relational messages: 1) dominance/submission, 2) level of intimacy, 3) degree of similarity, 4) task-social orientations, 5) formality/informality, 6) degree of social composure, and 7) emotional arousal and activation that in turn affect the listening of both interlocutors.

In the context of child welfare services, these aspects are tied to the asymmetry of the expert position of the social worker (dominance) and the layperson position of the client (submission). The asymmetric relation is likely to affect the level of intimacy. The degree of similarity is a complex relational aspect in an asymmetric relationship, as social workers can communicate empathy with their listening, yet they refrain from reciprocating, for example, self-disclosure. Despite the asymmetric relationship, the aspect of task-social orientations is probably the least likely to affect relational listening, as everybody participating in the situation is there for the shared purpose explicitly noted in the topic of the situation: an administrative hearing as part of care order preparations. However, the interaction in the hearing is contextually institutional due to the formal relational communication type. Unfamiliarity with formal communication has been shown to hinder the client’s listening as a layperson (Valikoski et al., 2017). The degree of social composure also varies greatly due to the asymmetric communication relationship. As professionals, social workers are assumed to communicate in a composed manner that can be assumed to convey the message and to facilitate listening. This means that social workers can use their relational listening to ease the client’s listening. Emotional arousal is more apparent in clients’ communication behavior and listening behaviors, as the decision they are expected to make may have significant impacts on their lives. Thus, negative emotional states may hinder communication and listening (Hargie, 2016).

Besides these aspects, previous research has indicated that individual listening may be affected by one’s cognitive and physical state and capacity (Imhof, 2010). Moreover, educational challenges as well as several levels of cultural communication (family, organizational, national) challenges have been found to hinder effective listening (Beall, 2010). In sum, contextual and relational elements may create barriers for relational listening in the administrative hearing situation.

## The Goal of the Study, Methods, and Analysis

As shown, the law-based goal for the social workers in the administrative hearing is to hear the clients’ opinion of the proposal regarding the placement of a child into public care. Yet the goal of the hearing is also to check the clients’ understanding of the decision they will make. In fact, it is the social workers’ professional responsibility to enhance this understanding by facilitating the clients’ listening. Because it is the client who is in the center of the whole care order process, this study is focusing on clients’ listening barriers and how their listening can be facilitated.

Shedding light on these factors, our study considers the following research problem: What kind of relational features are there in the listening occurring in the institutional setting of the administrative hearing? These relational features refer to the factors that hinder and facilitate the clients’ listening in the situation.

Two research questions were set:

1. What kinds of barriers affect the client’s listening in the administrative hearing?
2. What kinds of practices do social workers use in their attempts to facilitate the listening of their clients in the administrative hearing?

## Method

The data gathering was planned together with the social workers to ensure its practical utility. As the study is a part of a research project titled *Consent and objection in child welfare decision-making: A socio-legal analysis* (2017–2021 the Academy of Finland, Decision 308402), the data were gathered by the team members of the project. The details of the data gathering are explicated in Enroos et al. (2021) and Valikoski et al. (2020). The first author of the current article is one of the team members, thus there was an access to the data. Only the transcriptions of the hearings, reflections and interviews were used as a data.

The first data set (referred to later as “d1”) includes 16 transcriptions of recorded hearings from three municipalities in Finland between 2018 and 2019. Hearings related to taking a child into care are discrete communication situations, so special attention was paid to the ethical aspects of the data gathering. The plan for the data gathering was ethically pre-assessed and approved by Tampere University. Several permissions needed to be obtained. First, each municipality participating in the study gave its consent. Then the social work teams working for these municipalities gave their individual permission. In terms of recording the specific hearings, the clients were asked for their permission before and during the hearing. When asking for the client’s written permission, the study’s purpose as well as the confidentiality and security of the data handling were explained in detail. The hearings lasted from 20 to 90 minutes. Two of the hearings ended with an objection and 14 with consent. The first data set consists of hearings of 5 children and 11 adults [8 mothers (m)/3 fathers (f)].

The second data set (referred to later as “d2”) includes 15 transcriptions of recorded reflections of social workers in which they discussed their feelings related to their interaction with clients immediately after the hearings. This data set provides the social workers’ (sw) perspectives on most hearings included in the first data set (d1).

The third data set (referred to later as “d3”) consists of 29 transcribed interviews with social workers (sw). All interviewees participated voluntarily, were females and very experienced (5–15 years) in child protection services. The interviews were conducted to gain a general understanding of the social workers’ views about the process of taking a child into care. The interviews were conducted in three municipalities and lasted from 30 to 75 minutes. The social workers were informed about the study’s purpose and informed consent was obtained before the interviews. In the interviews, the social workers were asked to “tell a story” about the care order process, and then, specific questions were asked about the hearings (a detailed description of the interviews is also reported in Eronen et al., 2020). However, in this study only the parts of the data in which the social workers discussed hearings *per se* were used. The third data set supplements the first two by providing the social workers’ general insights into the hearings’ interactions. These multiple data sets provided a rich understanding of the phenomenon under investigation.

The contents of the three types of qualitative data sets were all thematically analyzed (Mayan, 2009). The analyses were collectively executed by all three authors. In practice, the materials were coded individually but compared and discussed together. Possible different emphases were resolved through discussion.

The analysis was inductive yet guided by the theoretical framework of relational listening as well as the research literature regarding the listening barriers (Beall, 2010; Hargie, 2016; Imhof, 2010; Valikoski et al., 2017). First, the materials were coded according to the sub-categories representing the barriers. The categories of the barriers emerged from the previous research literature and were examined on institutional, inter- and intrapersonal levels. The facilitative procedures related to listening in the hearing situations were also examined on institutional, inter- and intrapersonal levels. The codes within these sub-categories were created inductively and the possibility of merging, dividing, and removing existing codes and the emergence of new codes was maintained throughout the coding. For example, health and developmental stage-related listening barriers category was created from two previously separated codes (health related barriers and developmental stage). Yet, after discussion they were merged as they essentially represent a barrier related to the cognitive abilities of the client. After the data were arranged

**TABLE 1.** Barriers and facilitators of client's listening in an administrative hearing.

Barriers affecting the listening of clients in the administrative hearing	Practices that social workers use to facilitate the client's listening
<b>Systemic listening barriers</b> Institutional listening barriers <i>Formal communication situation</i> <i>Changes in social worker personnel</i>	<b>System-related practices to facilitate listening</b>  <i>The lessened formality provided by the system itself</i> <i>Communicating the attempt to ensure the continuation of the worker-client relationship</i>
Interpersonal listening barriers <i>Asymmetric communication relations</i> Intrapersonal listening barriers <i>Unfamiliarity of the process</i> <i>Lack of information</i>	<i>Implementing power responsibly</i>  <i>Explaining the procedural phases</i> <i>Explaining the matters, repeating the reasonings</i>
<b>Culture-related listening barriers</b> Listening barriers related to family culture <i>Negative attitudes</i> <i>Lack of communication</i> <i>Spiral of silence</i>	<b>Culture-related practices to facilitate listening</b>  <i>Neutralizing family power relations</i> <i>Wording the dynamics of family communication</i>
Intrapersonal listening barriers <i>Loyalty</i> <i>Previous experiences</i> <i>Simultaneous need to maintain control and the sense of parenthood in a contradictory situation</i>	<i>Understanding the motives of the client</i> <i>Supporting the parent-child relationship</i> <i>Emphasizing shared parenthood</i> <i>Believing in the will of parenthood</i>
<b>Emotional listening barriers</b> Intrapersonal listening barriers <i>Difficulties in accepting the situation</i> <i>The inability to manage intense emotional reactions related to the situation</i> <i>Lack of trust</i> <i>Inability to make decisions</i>	<b>Emotion-related practices to facilitate listening</b>  <i>Expressing understanding regarding the situation of the client</i> <i>Verbal and nonverbal support of emotion management</i>
<b>Health and developmental stage-related listening barriers</b>	<b>Health and developmental stage-related practices to facilitate listening</b>
Mental health issues Lack of social competence Age-related early stage of cognitive development	<i>Building and maintaining trust</i> <i>Explaining the matters, repeating the reasonings</i> <i>Being supportive</i> <i>Accepting variance of opinion</i>  <i>Considering and supporting the resilience of the client</i> <i>Anticipating the client's needs</i> <i>Modifying verbal expressions to match the cognitive development level of the client</i>

inside the barrier and facilitator categories, we sought to juxtapose the found barriers with the practices to overcome the specific barrier. For instance, the dominance of the literal documents as a listening barrier in the hearing could be deduced from the social workers' way of emphasizing the importance of verbally reviewing the documents. Finally, the sub-codes in the barrier and facilitator categories were inductively grouped according to emerging themes, resulting as systemic, culture-related, emotional, and health and developmental stage-related barriers and facilitative practices, and can be found in [Table 1](#).

## Results

### **Barriers affecting clients' listening**

Our results indicate some barriers that may affect the listening of the client in the administrative hearing, but also practices that facilitate listening. The barriers and facilitative practices are presented in [Table 1](#).

The barriers were divided into four main categories based on their origin: they were systemic, cultural, emotional, or related to health and development. Even though the procedural perspective is embedded in them, the listening barriers are strongly relational.

The results suggest that **systemic listening barriers** of the client can operate on the institutional, interpersonal, and intrapersonal levels in the administrative hearing. The institutional-level listening barriers are most often caused by the formality and rigidity of the institutional system. For instance, changes in social worker personnel may result in challenging listening situations for the client.

The interpersonal listening barriers on the systemic level seem to be also heavily connected to the procedure. The hearing is an orally organized institutional communication between a client and two social workers, a layperson and experts, which may hinder the client's listening because of the suspense and tension experienced in the situation. The social workers did not experience this due to their professional familiarity with it. This asymmetric communication relationship between parties can also be seen as a factor hindering listening, as the social workers hold the expert power in the context. So as the data 3 shows, this may lead them to use wordings that are difficult for the clients to understand: "There are often some challenges when you can't be sure what the client actually understands [-] . . . you try to find a way to explain yet still use proper terms . . ." (d3/sw)

The administrative hearings include written information in the expert documents about the client's situation and reading them may hinder relational listening. In fact, the dominance of expert documents creates non-human agencies besides the participants' human agencies in the meeting: "Expert documents and authorities always tell us what the best thing is." (d1/m)

According to the social workers (data sets 2 and 3), the client's inability to understand what is being discussed can also be caused by the temporal length of the relationship with the social workers, for instance, if the relation is either very recent and the client is not fully familiar with the procedure yet, or if the relation is well-established over years. In the latter case, previous negotiations may affect the listening and form a barrier as the client and social worker may both assume that certain things have already been covered. It seems then that the intrapersonal listening barriers partially overlap with the institutional and interpersonal listening barriers. This was discovered in the analysis of the data set 1 when clients felt that the novelty of the formal situation affected them: "This is a totally new situation for me, never been in a situation like this." (d1/m) The unfamiliarity of the situation might have made them to feel like they were lacking information about the procedure.

The results indicate that **barriers stemming from the listening culture** were most often expressed as an unwillingness to listen. According to the data sets 2 and 3, this unwillingness was related to two sources, the first being negative attitudes toward the authorities, the second was related to interpersonal communication within the client's family. For instance, the social workers mentioned that a spiral of silence was predominant in some families: They did not want to talk about anything in the hearing.

The social workers also reported that the intrapersonal listening barriers within the cultural level of listening stemmed from loyalty, previous experiences, and the need to gain control. The custodians often expressed a profound need to show their children that they loved them and wanted to take care of them, even though they realized that the best thing for the child's wellbeing was to release the child into care. Finding from data set 1 supported the result and it seemed that the contradiction affected them greatly: "I know that this (custody) may be good for my child, but I'm the mother and my heart says no. I cannot accept the proposal." (d1/m) However, this effect was not completely negative. Some custodians reported that it encouraged them to listen more closely and to show that giving their consent was an act of love.

The last intrapersonal cultural listening barrier stemmed from the culture of the client's social reference group that influenced the hearing, especially with children. The social workers noted the influence of friends in the behavior of the client. They reported that in some hearings, there were also incidents where a friend called the client during the hearing and the hearing was interrupted for a few minutes.

The **emotional listening barriers** found in the results seemed to be mostly intrapersonal. They were related to intense emotional reactions, such as grief, fear, confusion, aggression, and uncertainty: "It is the worst thing ever to give your child into the custody of child welfare services." (d1/f) Sometimes the clients were unable to manage the intense emotional reactions, which might hinder their ability to listen. The emotional load seemed to make it difficult for them to accept the situation. As data set 1 showed, some clients reported that they did not trust the system and were not motivated to battle the authorities anymore. They obviously felt that they had been unjustly treated and not listened to by the system.

The last listening barrier that emerged in the results was the **health- and developmental stage-related listening barriers**. The social workers referred to various types of mental health issues of the clients' family members in their discussions, and even the custodians themselves made comments about both mental and physical health issues such as *feeling depressed*, *having a flu*, and *difficulties in reading without glasses*.

Developmental issues that affected the client's hearing were related to cognitive abilities. For instance, social workers reported that it was possible that a custodian's general lack of social competence hindered the ability to listen and comprehend, or that the young age of the child affected the listening. Consequently, as the hearing process does not inherently include elements that would acknowledge the presence of children, the expressions that were used in hearings were occasionally too complex for a young child to fully understand.

### **Practices to facilitate clients' listening in the administrative hearing**

The results of the study indicate that social workers usually have appropriate practices to facilitate many of their clients' systemic and other listening barriers. Just like the barriers, these facilitators operated on institutional, interpersonal, and intrapersonal levels. One of the **institutional-level practices** that may facilitate listening in the formal setting of the administrative hearing stems from the structure of the Finnish system itself: there are no legal professionals present in the administrative hearing. Instead, all participants know each other and at least one of the social workers has worked with the family for a long time. Therefore, even if the formality affects the client's listening, they can ask clarifying questions from social workers they already know.

The results indicate that another institutional-level practices to facilitate listening is to assure the client that the worker-client relationship will continue. The social workers reported that when the clients knew that they were going to cooperate with the social workers for a longer period, they also seemed to focus more on what the social workers had to say. Especially with underaged clients, social workers also used their expert knowledge on how the formality may impact the clients' emotional state and tried to be as easy to approach as possible. For instance, so as data set 1 shows, they encouraged children to ask if they did not understand and lessened the formality by emphasizing how easy it was to fill in and sign the hearing record with expressions such as "this is a really easy paper to sign."

Moreover, the social workers brought up previous discussions during the hearing and used these references to ease the understanding of the client: "So, this is about your custody matter, which we have been talking about and worked on during the spring." (d1/sw)

The significance of the already established client-worker communication relationship was also considered by the social workers themselves in the discussion after one hearing resulting in the child giving consent:

If the social worker had not done this kind of background work, this hearing situation could have been different. And I think that when we go into this kind of process, it must be in a way that one spends time with the family, it is especially valuable. (d3/sw)

The social workers seemed to use various practices to facilitate the interpersonal and intrapersonal listening barriers of their clients. When an asymmetric communication relationship seemed to hinder a client's listening, social workers made sure that they were implementing their power responsibly: "We don't always have to write things down in the worst possible way; we have the power to decide how to word things." (d3/sw)

When the unfamiliarity of the process or general lack of information seemed to form a barrier for the client's listening, the social workers often explained the procedural phases and the reasoning for why something was happening:

Ok, it is the formal administrative hearing at hand now. Your opinion will be heard and put on the records at the end of the meeting. We all sign the document and confirm that your opinion is officially heard. Do you have any questions or comments first? (d1/sw)



All data sets showed that the social workers increased the calm atmosphere by reminding the client that they can take time to read the documents and make decisions. The social workers also focused on explaining that the document that the client was reading was not their whole life story nor something that defined the client, because they knew the clients well and thus also their strengths.

The results also revealed several **interpersonal and intrapersonal practices** that the social workers seemed to use to facilitate the listening of the client at the **level of family culture**. As data set 3 pointed out, for instance, the social workers aimed at neutralizing family power relations by reminding the clients/custodians that they were supposed to make their own decision about the consent despite the opinions of other family members. They also used their listening to word the dynamics of the family's communication culture: "With this family, we had to consider that they avoid talking about most things. So, we had to respect that they didn't want to read the documents in the hearing either." (d3/sw) This is how they seemed to know not to expect more from clients than they were willing or capable of giving.

Data sets 2 and 3 indicate that when intrapersonal listening barriers were affecting the clients' listening, the social workers were trying to understand the motives for their behavior, for instance, a child's loyalty toward their parent. Their communication was supporting the parent-child relationship and preventing negative experiences that could have hindered the relationship between the parent and the child and their motivation to listen to social workers in the future. When the parents expressed a strong need to control the situation and maintain a sense of parenthood by refusing their consent, social workers facilitated their listening by emphasizing the concept of shared parenthood after the child was taken into care and by reassuring that they believed in the parent's desire to be a good parent. There were several examples of this type of behavior in data sets 2 and 3.

The analysis of the data sets 2 and 3 also indicated that the social workers also facilitated the social group-related listening barriers by expressing their understanding of the need for belonging that the clients expressed during hearings. For instance, they did not prohibit the use of cell phones in the hearing, instead suggesting that non-urgent matters should be taken care of after the hearing.

**The practices to facilitate listening on the emotional level of listening** operated at the intrapersonal level of communication. To facilitate listening in the hearings, the social workers tried to help the clients accept the situation. So as data set 2 implicates, they showed consideration toward the intense emotions caused by the situation: "These hearing situations often include physical expressions of emotion like crying or slamming doors and possibly other aggressions, and that isn't the moment to offer information but time and empathy." (d2/sw) The social workers also facilitated emotional management by wording the feelings of the client during and after the hearing. Especially with the children, the social workers praised them for reading the documents thoroughly and complimented them for handling the situation well. Humor was used to lighten the atmosphere in the hearings.

The social workers reported that they tried to communicate to build and maintain trust with the clients. The social workers appeared to be on the clients' side as opposed to the technocracy of the situation and the unnecessarily obscure language of the documents. Building trust generally included accepting the expressions of negative feelings and aggression from the clients. Sometimes a client and the social workers together acknowledged the trust inherent in their relationship in a playful manner.

The social workers also expressed understanding toward the motives of the client and their difficulty in making decisions: "In the hearing, I always try to show acceptance when opinions change, like even if they know they can't take care of the child, they still say they object, but often eventually they give their consent." (d2/sw)

In addition to understanding and accepting changes in the clients' opinions, the social workers also informed they tried to help the client in the emotionally overwhelming situation by explaining the matters and being generally supportive.

The results of the study indicate that the social workers also tried to help with **the health and developmental stage-related listening** issues of the clients. For instance, they reported that they expressed understanding toward physical health issues during the hearings by mentioning that the child seemed tired or that it was great that a custodian made it to the hearing despite having a bad cold.

The social workers destigmatized mental health issues and expressed their understanding toward these issues according to the results of the data set 3 analysis. Based on their prior interaction with their client, the social workers had noticed that there were certain mental health-related barriers, such as anxiety, that may affect the ability of their client to listen and make decisions:

The girl was really concerned about her mother's reaction to her giving her consent. So, we wrote the text in the way that it was easier for her as well as her parents to accept it and give their consent and look into the future without having to be scared. (d3/sw)

With this behavior, they seemed to facilitate their ability to listen as the clients knew that after reading the written documents, they had nothing to worry about.

The social workers appeared also to anticipate the clients' needs through modifying their verbal expressions so they could match the social competence and developmental stage of the clients and by creating an unhurried atmosphere. All data sets had signs of this facilitation. This was also seen in explaining the information and the meaning of the expert documents by using more understandable terms. If the clients seemed confused, the social workers repeated the reasons for what was happening and why.

## Discussion

Clients have one significant listening goal in the administrative hearing in child protection: They need to listen to the information delivered by the social workers so they can decide whether to accept or deny the care proposal. The information is mainly oral, but there is also written information in expert documents to process. Due to the formality and distress, clients have cognitive and relational listening barriers to overcome. Our study indicates that the facilitation of those barriers seems to lie in the hands of social workers. This relational listening facilitation is discussed next.

The professional responsibility-related goals frame the listening behavior of the social workers. In addition to the law-based goals and the running of the hearing, social workers must remember the requirements of confidentiality, ethical decision making, and treating all parties fairly and equally. Burgoon and Hale (1984) found that these goals are affected by aspects of relational messages. Our study shows that the social workers attempted to facilitate their clients' relational listening in order to reach all goals set for the hearing.

From the perspective of relational communication aspects, the social workers' institutional position and task-orientation reflect the dominance/submission aspect and the task-social orientation aspect. Dominance stems from the asymmetric communication between participants affecting the listening of the layperson in the hearing. However, social workers do not emphasize dominance in the relationship. On the contrary, their communication seemed to diminish the psychosocial distance from the client. This notion is supported by a previous study (Valikoski et al., 2020), which found that social workers allow clients to keep their communicational independence during discussions in the administrative hearing.

On the level of system-related practices to facilitate clients' listening, in addition to the aforementioned aspects that address themselves in all levels of facilitation, the social workers demonstrated relational message aspects of formality/informality and a degree of social composure. Our data exemplifies that they seem to communicate trust and involvement with their relational listening in a situation that is new to the client despite their previous relationship. Previous studies confirm that the formality of the meeting increases the situational anxiety of the layperson (Valikoski et al., 2017),

and situational anxiety has been shown to be related to the attention factor of one's cognitional listening and information processing (Imhof, 2010). Maybe due to that notion, social workers often seemed to diminish systemic tension by explaining the formal procedure of the hearing.

On the level of culture-related practices to facilitate listening, the social workers applied domination/submission and task-social aspects of relational messages to their listening. In addition, they also seemed to implement the relational message aspect of the degree of similarity. Our current study exemplifies how social workers show an understanding of and share the same comments with the client. Some of their reactions indicate trust developed with the family.

On the level of emotion-related practices to facilitate listening, the social workers expressed listening behaviors that reflected the level of intimacy and the degree of similar aspects of relational messages. With this listening behavior, they communicate acceptance and keep the atmosphere of the meeting open and positive, which Galvin and Cooper (2000) found to enhance communication activity. This is an important notion regarding the clients' ease of asking questions and expressing an opinion.

On the level of health and development stage-related practices to facilitate listening, the relational message aspects that the social workers' listening indicated the most were the degree of similarity, formality/informality, and degree of social composure. By doing this, the social worker diminished the social distance between the parties (see Baxter, 2010) and opened the atmosphere for better relational listening.

The relational message aspect that was missing from the listening behavior of social workers is emotional arousal. This was not surprising, due to the professional emphasis that social workers place on their communication. This could be seen particularly when children were heard, as then social workers expressed even higher amounts of social composure in relational messages by explaining the situation more to the children than to other clients, and they encouraged children more often than others to ask questions. However, it seemed that despite this, children were mostly seen as information providers. This notion is not new, as in previous studies social workers have often stated that there is no right kind of setting or time to communicate with and listen to children (Davies et al., 2019).

## Conclusions

The aim of the current study was to find out what kind of relational features there are in the listening occurring in the institutional setting of the administrative hearing. These relational features were referred to as factors that may hinder and facilitate the clients' listening in the situation.

Previous research has shown that social workers emphasize an informal, permissive communication culture when interacting with clients (Valikoski et al., 2020), yet the asymmetric power relations in the situation can be assumed to create a power distance and tension in the situation. The social workers seemed to manage the effect of these in the listener facilitation by using their professional listening competence. The term was introduced by Ala-Kortesmaa (2015), and it suggests that in order to listen effectively in a professional situation, a person must listen dialogically, meet profession-specific listening requirements, and apply dimensions of listening and human agency appropriately to the listening situation. Listening dimensions have been shown to be contextual, cognitive, affective, ethical, and behavioral (Jones, 2011, p. 85). Traditionally, dimensions have been considered nonhierarchical elements (Wolvin, 2010); thus, it has been noted that these dimensions are not randomly organized but create hierarchical constructions (Ala-Kortesmaa, 2015; Viljanmaa, 2020).

When the results of the current study were analyzed, the dimensions of the social worker's professional listening came out as conclusions regarding the practices that social workers used or reported to use for listening facilitation. Our current study interestingly indicated that the way social workers engage relational message aspects in their listening speaks volumes about the way their professional listening dimensions are constructed. The construction of these dimensions is demonstrated in Table 2.

**TABLE 2.** Dimensions of social workers' professional listening.

Behavioral dimension	
Ethical dimension	
Cognitive dimension	Affective dimension
Contextual dimension	

It seems that the contextual dimension creates the basis for the other dimensions. In the administrative hearing, these contextual goals are giving information to and seeking the opinion of the client. The relational message aspects of dominance/submission and task-social orientation become visible in the relational listening choices that the social workers make. As these two aspects penetrate all facilitative practices that the social workers seem to use in their listening and communication with the clients, they seem to form a professional orientation to listening which is not intrusive but inquisitive and permissive.

Cognitive and affective dimensions are built on the contextual dimension. The cognitive dimension consists of the knowledge related to professional listening, and the way the professional chooses to listen forms the affective dimension. Finnish social workers are highly educated (a master's degree) and it has been shown that they know that social work is relationship- (Eronen et al., 2020) and person-centered work (Lonne et al., 2016). Therefore, it is not a surprise that these dimensions became visible when social workers combined the relational message aspects of formality/informality and the degree of social composure with aspects of dominance/submission and task-social orientation. They seemed to be aware of what kind of listening was required and what they needed to do to show it. Thus, the relational message aspect was embedded in their professional listening.

The reasons for listening in this institutional setting of an administrative hearing constructed the ethical dimension of the social workers' listening. The ethical dimension of listening has been found particularly meaningful for social workers, as the informative and relational information that they gather with their listening can have real consequences that are difficult to change (Purdy & Borisoff, 1997). When they applied the relational message aspects of the degree of similarity and level of intimacy in their listening, the relational core of their profession was activated. This notion confirms the reciprocal feature of relational listening (Floyd, 2014) and is supported by the work of Keaton et al. (2015), who have noted that all supportive encounters, just like listener facilitation, are transactional and relational in nature.

The behavioral dimension of social workers' listening competence became visible when they used their listening and facilitated their clients' listening with relational practices. Relational listening behavior is helpful in the opinion seeking situation in the hearing. This notion poses an interesting contradiction to those studies that have seen opinion-seeking in child protection only as a forced and combined phenomenon (Lynch & Boddy, 2017).

Our present study describes the Finnish system and procedure of taking a child into care. While procedural and legal systems are not similar between countries, social workers worldwide have relational encounters. Thus, our findings from relational listening in social work can be applied widely. Moreover, future studies could examine global similarities regarding the listening dimensions of social workers.

There are certain limitations in the current study. Three different data sets are used, but the total informant numbers for each set are quite modest. Despite the several data sets including lots of information about clients' behavior, clients were not personally interviewed. So, clients' listening was seen through the professional lenses of the social workers as well as the lenses of the researchers. As participating in the research was voluntary, it was not possible to confirm if the social workers that were interviewed and provided reflectional data were particularly competent in their profession (data sets 2 and 3) nor if the social workers sought permission only from certain types of families or if only certain types of parents or children gave their consent (data set 1).

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