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Promoting children’s welfare through Family Support

Introduction

Although our understanding of children and childhood has been reconstructed and it is now accepted that childhood is a distinct and important phase in human development children remain dependent on adults to secure their needs and promote their welfare. A key factor in the development of children is their experience of being parented and their experience of family. The social and emotional needs of children are supported by a positive parent-child relationship and within the family environment (Chan and Koo, 2011). Expanding on this point, Connolly (2004) suggests that good outcomes for children are achieved through positive parenting, a stable environment, a healthy family life, strong family and kin relationships, community involvement and supportive networks (p.1). Formal Family Support is a specific orientation within child welfare services that aims to respond to the welfare needs of children in circumstances where such conditions are not present. Research indicates that the main influences on a child’s development include parenting style, the parent-child relationship and their home environment (Chan and Koo, 2011). Family Support is well placed to work in a focused manner to address all three identified areas. This chapter explores the potential of Family Support to respond to issues negatively impacting on children’s welfare with specific attention paid to the parent-child relationship and to the experience of family life.

Children and their families in context

While there are alternative viewpoints, popular discourse on childhood holds that it is a socially constructed concept determined by context, time and culture. It is also now widely held that children are social agents in their own right who play an active role in the construction and determination of their own lives (Prout and James, 2015). Supported by the momentum associated with the United Nations Convention on the Right of the Child, (UNCRC, 1989) children are also presented as a minority group of rights holders. The rights of children in relation to their civil, political, economic, social, health and cultural lives are explicitly outlined with an onus on societies to work towards realizing these rights in the best
interests of the child (Ben-Arieh et al., 2014). Children born into disadvantage are more likely to have health problems and behavioural issues; are also more likely to experience housing and food insecurity, have lower levels of educational attainment and have less supportive parental relationships. Research also shows that experiences during a child’s development affect lifelong health and wellbeing (Montoya 2014, p.1, *original emphasis*). The requirement to support children throughout their childhood to ensure their welfare needs are met and that they are in a position to reach their full potential is self-evident.

More recent formulations of Bronfenbrenner’s bioecological mode emphasise the concept of proximal processes; interactions between the individual and their context (Bronfenbrenner and Morri, 1998). The family is regarded as the most significant context for children whilst parenting behaviours and the quality of the parent-child relationship are seen as key influences on their development. The UNCRC describes the family as *the* place for the full and harmonious development of a child’s personality, and the natural environment for the growth and well-being of children (Preamble, 1989, *emphasis authors own*). Where children experience ample amounts of this type of environment and have good quality relationships from a wide ranging network, it can be argued that they are living within a ‘rights rich’ environment (Honneth and Fraser, 2003; Dolan, 2010). Children’s rights and needs are inherently intertwined. Ife (2000) usefully discusses the difference between needs and rights, stating that connecting needs with rights provides a stronger reference point from which to meet need, and takes the discussion beyond a subjective interpretation of what constitutes need. In linking rights to needs, children’s rights are grounded in the day to day practice of supporting parents and families to meet such need.

At an overall level, children who live in families that get along well together report higher levels of wellbeing than those living in families that do not. Recent studies which have asked children directly about what makes them happy have found that family and social relationships are frequently identified. Chaplain (2009) carried out two studies in the US involving 300 children aged 8-18 years. In both studies, the children were asked what made them happy. The consistent finding across the age groups was that familial and peer relationships dominated their responses. A recent study of 817 children aged 6 -12 years found that family relations represent the most frequently mentioned factors used in children’s explanations of their state of happiness or unhappiness (Thoilliez, 2011). Family stressors; conflict in parent child relationships, children who had social and emotional problems, parental depression, low parental self- efficacy and child isolation were found to significantly
impact on children’s self-assessed happiness (McAuley and Layte, 2012, p.523). Quite simply the lower the level of stress within the family unit the happier the child.

**Parenting and children’s welfare**

In most instances the welfare of the child depends on the capacity of the family to meet their needs, and a large body of research highlights the role of parents in promoting children’s healthy development and well-being right through into adulthood (Families Matter, 2009; Munro, 2011). The importance of parents to child development is sufficiently obvious that it is practically axiomatic (Sheppard, 2009, p.1427).

It is consistently held that the most conducive parenting style for positive child wellbeing is that which is characterised by responsiveness, warmth and support (Belsky, 2005). A warm supportive emphatic relationship between a child and its parent’s results in the greatest likelihood for positive child outcomes and correspondingly poor quality parenting is generally considered a precursor to a range of poorer outcomes for children (Chan and Koo, 2011). For children who have the benefit of a warm, continuous and intimate relationship with their parent(s) throughout their childhood, there is the opportunity to develop a strong sense of identity, self-worth, trust in others, the ability to handle stress and to develop and maintain relationships (Richardson, 2005, p.157). Daly and Abela hold that the UNCRC serves the rights of parents and children with its emphasis on family and its importance and suggest that adults are compelled to forge a new path in relation to rearing of their children with a focus on ‘positive parenting’ or ‘parenting in the best interest of the child’; essentially working towards building positive relationships while optimising children’s developmental potential (2007, p.11).

The wider context within which family exists is central to the capacity of parents to meet the needs of their children. It is now well established that parenting is not a ‘neutral fact’ and that a parent’s material and social conditions influences their ability to parent effectively (Geens and Vandenbroeck, 2013). Solem emphasises the need to move away from a conceptualisation of parenting as being defined by as difficult and rather a focus on parenting defined by a difficult child rearing situation and suggests we should adopt a situated and situation specific approach to supporting parents (2013, p.13)
It is recognised that Family Support is well placed to support parenting capacity and address risk. Supporting parents can enhance family wellbeing; contribute to better outcomes for children; and reduce the prevalence of problems later in a child’s life. In addition, at a community level, parenting support can support healthy communities and promote social inclusion. At a societal level, support for parents can ensure a more effective use of resources, serve to reduce inequalities, and can develop and promote human and social capital (Department of Children and Youth Affairs, 2015). Definitions typically identify parenting support as a broad range of activities, distinguishable but largely within the broader theme of Family Support. While the field of Family Support can be defined by its concern about children’s welfare and by a growth of a rights culture in relation to children (Daly, 2011), it covers a broader range of family and parent focused services and programmes. ‘Parenting support may be regarded as intensely related to (but capable of being distinguished from) that wider concept’ (Department of Children and Youth Affairs, 2015, p.6)

**A Family Support approach to promoting children’s welfare**

Formal Family Support is an approach to working with children, young people, parents and families which is based on a style of work which emphasises prevention, early intervention and a focus on the strengths of family members. It aims to reinforce positive informal social networks and build on individual resilience. The essence of Family Support is captured in its delivery. Family Support can be provided by a range of practitioners working with families with varying levels of need in an effort to respond to their need in a timely and considered manner (Pinkerton et al., 2004; Devaney, 2011; Devaney and Dolan, 2014; Frost et al., 2015; Churchill and Fawcett, 2016). As children’s needs and the needs of their parents vary in complexity and intensity consequently so too must the formal support services provided to meet their need. The Family Support orientation is applicable across the range of services that respond to differing levels of need in children. This includes all services which are provided universally to children and parents; services which respond to identified need and are more targeted and focused in their delivery; and services which provide specialist support or care placements for children where the family unit has broken down temporarily, or on a more permanent basis.
A threefold classifications of Family Support is used to explain its differing focus in responding to levels of need. The first is that of developmental Family Support, which seeks to strengthen the social supports and coping capacities of children and parents in the context of their neighbourhood and community. The second category is compensatory Family Support what seeks to compensate family members for the negative or disabling effects of disadvantage or adversity in their current or previous experiences. Protective Family Support is the third category, which seeks to strengthen the coping and resilience of children and adults in relation to identified risks or threats experienced in families (Gilligan, 2000).

Family Support is informed by an amalgam of a number of social science theories, namely; social support, social ecology, social capital, attachment and resilience which underpin and inform practice initiatives (Devaney and Dolan, 2014). Whittaker (2009) also argues that Family Support reflects a set of values as opposed to a clearly defined programme strategy or direction, with a respect for the complex task of parenting essential, and a collegiate relationship between the parent and the professional necessary.

The centrality of the aforementioned social science theories to effective family functioning and children’s development is evident. For the majority of children, the primary relationships formed within a family provide the platform from which children grow, develop and explore the world. Assured by the permanence and stability of their attachment to, and connection with their family members, children reach their full potential. While regular ‘ups and downs’ in family life throughout childhood and adolescence may ‘bend’ these relationships, they won’t and don’t break. An integral part of these relationships are the core functions performed within each one of them. This informal social support is provided throughout the life cycle by family members from adult to adult and crucially, from adult to child. Depending on the age and stage of children, this support varies in type and intensity as required. Coping with day to day stressors and difficulties, big and small, is also a regular and accepted part of functioning family life. Life brings many challenges experienced in a unique way by all families and by all family members. The security and supports provided by family act as a protective factor, building children’s resilience to cope with, adapt to, and survive life’s challenges. As noted, families and family life does not exist in a vacuum, with extended family, neighbours, communities and various social institutions (schools, work, religious groups, clubs, et cetera) playing an interconnected influential role in family functioning. This social ecology within which children and families live, and the social
capital which is accrued by the close ties which individual family members develop as part of these community-based relationships, is drawn on as a resource in good times and bad.

However, in certain instances and for varying lengths of time, families do not function in the positive, healthy manner outlined and are unable to provide the necessary supports. There may be difficulties associated with attachments within the family relationships, with the source, type, or quality of the social support available, with particular stresses or adversities in the immediate or extended environment, and an accompanying lack of resilience in coping with these issues. A myriad of reasons can impact on individuals within families affecting their ability to support and care for each other. Direct and indirect influences on well-being can adversely affect each family member’s ability to deal with regular and irregular life events. Additional, exacerbating factors, such as poor mental health, physical illness, poverty, isolation, addiction, or family breakdown, can detract further from the ability of children and parents to respond to, and cope with difficulties. In such instances, the need to support parents and families in the rearing of their children is well researched (Gardner, 2003; Families Matter, 2009). Family Support also has a role in supporting sibling relationships. The sibling relationship is considered to be very significant for children in light of the emotional intensity of the relationship and the amount of time spent together however this relationship is often overlooked as a resource in supportive interventions (Feinberg et al., 2012).

Aligned with this, Family Support is also increasingly viewed as a social justice issue. As Stevenson (2007) notes, families have a right to be supported in their efforts and children have a right to be supported within their family unit. Honneth and Fraser (2003), expanding the social justice model, indicates that positive regard in relationships (which includes respect and, where appropriate, love) is a key part of the principle of recognition between people. In effect, for children this means their needs are met through relationships forged out of love, respect and understanding, ideally in a family unit (Dolan, 2010). As Cooper et al. emphasise: “the State must trust families to bring up their children, and must be driven by the basic belief that families that need help are entitled to support by right, rather than that these families are failures in need of surveillance and monitoring” (2003, p.31).
Protecting children through Family Support

High quality responsive Family Support can impact positively on children’s wellbeing and in the majority of instances it is through supporting families that children are protected. For example, MacMaillan et al., found that protective factors for children included access to resources and support for parents (for example, material resources, human capital and social support), nurturing responsive parenting and care, and nurturing and supportive family and friendship relationships (2009). The degree to which child welfare systems achieve a balance between protecting children and supporting families is generally regarded as a critical issue in the design and delivery of services (Lonne et al., 2009). In many jurisdictions there is an ongoing debate as to the difference between, and merits of a Family Support or child protection orientation. As Whittaker (2009) indicates, there is, in many systems, a ‘fault line’ in children and families services which includes: “the continuing tension between ‘front-end’, preventative services and ‘deep-end’ highly intensive treatment services and the unhelpful dichotomies these tend to create and perpetuate” (p.167).

Spratt (2001) has identified a definite distinction reflected in differing descriptions of Family Support and child protection orientations in the child welfare system. The child protection orientation is characterised by a: “primary concern to protect children from abuse, usually from parents who are considered morally flawed and legally culpable. The processes associated with this orientation are built around legislative and investigative concerns, with the relationship between practitioners and parents becoming adversarial in nature” (p.934). In comparison, the Family Support approach is characterised as: “having a tendency to understand acts or circumstances, thought of as harmful to children, in the contexts of the social or psychological difficulties experienced by families. Here, families are seen as needing support to undertake the task of parenthood and services are provided to enhance their capacity to do this successfully” (Ibid, p.934). The Family Support approach is attentive to the circumstances children and families are living in and the difficulties they face, and is focussed on supporting them to address and overcome such issues in order to care for and promote their children’s welfare. Pecora et al. suggest that the development of such an approach to child welfare reflects a stance that a: “society is willing to invest in as many or more resources in the prevention of problems as in treating these problems or placing children in out-of-home care” (2000, p. 231).
An integrated approach to child protection and Family Support, with a balance between investigation and assessment processes, and the provision of support services were advocated by Bullock et al., in 1995 and remain relevant today. Suggestions regarding how children could be better protected included: a sensitive and informed practitioner-client relationship, where honesty and reliability were valued; the need for an appropriate balance of power between participants where serious attempts were made to work in partnership; a wide perspective on child protection, concerned not only with investigating forensic evidence but also with notions of welfare, prevention and treatment; affording priority to effective supervision and the training of practitioners; and that, generally, the most effective protection from abuse was brought about by “enhancing children’s quality of life.” (pp.45 - 50). A key finding in the report was that if these conditions prevail, outcomes for children are generally better at all stages of the protection process. In support of these messages, Gardner (2003) highlights that while Family Support is not only or solely child protection, it can play a part in creating safer contexts for children, by helping parents to care for them and by obtaining assistance for children at the greatest risk. This overall emphasis on protecting children by supporting them and their parents is gaining currency. Gilbert and colleagues in their follow up study on child welfare systems found that a new child-focussed orientation has emerged which pursues more holistic, wide-ranging and supportive policies and programmes to promote child development and wellbeing, especially in early childhood (Gilbert et al., 2011).

The essence of Family Support in practice

Fundamental to the Family Support approach are a core set of service and practice characteristics and a strong value base which underpins its delivery. Key features include a sound knowledge and skill base, the specific style of individual practitioners, the use of reflective practice and supervision and the general orientation adopted by services (Dolan et al. 2006; Munro, 2011; Devaney and Dolan, 2014).

Family Support practice characteristics

Practitioners must be informed and knowledgeable on the theories on attachment, social support, resilience, social ecology and social capital. An understanding and appreciation of the issues involved in realising children’s rights and upholding their social justice is also
required (Davies and Ward, 2012). Knowing the theories and issues involved, however, is not enough to deliver high quality Family Support. Practitioners must also have the skills and ‘know how’ to apply them in their chosen practice context and with each child and family they are charged with helping. Interpersonal skills are the key to effective interventions and the style and manner in which a practitioner goes about his or her business is central to Family Support practice. Adopting a non-judgmental approach in interactions with children and families portrays a respect for the human being and exemplifies the value base from which Family Support developed and is viewed as a perquisite to best practice. All practitioners and professionals who work with children and families require these skills. Priority should be given to developing and consolidating interpersonal skills in all forms of training, supervision and professional development (Davies and Ward, 2012; Churchill and Fawcett, 2016).

Notwithstanding the complexities involved and the need for professional boundaries, a respectful, non-judgmental and healthy relationship can be developed. The creation of an effective working relationship is a critical ingredient in effective Family Support (Munford and Sanders, 2006). Allowing a relationship to develop between the practitioner and children and their families (at whatever level is appropriate to each individual circumstance), forms a place from which to support, protect, or challenge as required. Research has indicated that parents appreciate a relationship with a worker which is based on honesty and kindness, and where they are prepared to go the ‘extra mile’ for them and that there is a need to return to relationship-based practice (Ferguson, 2011; Churchill and Fawcett, 2016). The complexities involved in this process, and working with children and families generally, demands time and space to reflect on practice, and support through regular high quality supervision. Working in the human services, and particularly with children who are experiencing upset, distress and trauma, is onerous. All involved in this area of work aim to improve the lives of children and are affected and frustrated when this is not the reality. Working with uncooperative or hostile family members who cause harm to children, or hamper efforts to support and protect them, is also very difficult for practitioners. Working in this time of scarce resources and increasing demands adds to the pressures and stress involved. High quality regular supervision and support which includes a model of self-reflexivity is essential to work to a high standard in supporting children (Ferguson, 2011; Munro 2011).
Family Support service characteristics

The key principles of preventing difficulties arising, intervening early in the lives of children and in the genesis of a problem, in a responsive, needs-led and strengths based manner, is central to how services adopting a Family Support approach orientate themselves.

Preventing difficulties from arising in the first place, and preventing existing difficulties from escalating or becoming more entrenched, is a requisite feature of Family Support practice. Prevention involves intervening early in the stage of a problem or difficulty experienced and also early in the life of a child where necessary (Barlow et al., 2010; Allen, 2011; Munro, 2011; Davies and Ward, 2012). It is clear that early interventions are of key importance. Programmes that prevent the occurrence of maltreatment are likely to be more effective than those that address its consequences. As Allen (2011) suggests, one great merit of early intervention is that it can help families under stress to fulfil their mission of giving children a secure and loving space in which to grow. It can keep families together and save many from the trauma of break-up and removal (p.ix). The concept of prevention is not a new one, and has its origins as a concept in the public health field. Allen (2011) reminds us of the old adage: “prevention is better than cure” (p.3). Sheppard notes that prevention is traditionally understood in terms of services provided to families and the timing of these, and suggests that the actions of families themselves, in particular parents, ought to also be included in the prevention continuum. Sheppard refers specifically to the actions of parents in the stages prior to the involvement of services, and the actions families will take to ameliorate or resolve a situation (2009, p.1442). He highlights what he terms ‘proto-prevention’ in describing the earliest stage on the prevention continuum where the actions of families and parents in particular are considered. Accessing informal social supports prior to any engagement with formal services in an effort to improve their situation demonstrates how the preferred informal sources of support for families are often best placed as a form of early intervention and prevention. Such efforts should be recognised and encouraged in the first instance at times of difficulty, where possible. Building on this idea Barlow et al. (2010) distinguish conceptually between preventive interventions, designed to reduce the likelihood of maltreatment, and more specialist or therapeutic interventions, designed to prevent its recurrence and/or address the psychosocial consequences. While acknowledging that the interventions may be different in content and focus they are all nonetheless preventative in nature.
A strengths based perspective is also considered a cornerstone of practice in Family Support (Dunst, 1995; Gardner, 2003). Family Support emphasizes and focuses on the strengths of individual and family members, in marked contrast to models which have attempted to correct weaknesses or cure deficiencies. Advocates and promoters of Family Support have asserted that Family Support acknowledges family strengths, builds upon them and promotes these strengths as a way of supporting family functioning and parenting capacity (Dunst, 1995; Gilligan, 2000). Smith and Davis (2010) describe how a strengths based Family Support perspective advocates choice, participation, anti-discrimination and timeliness and employs approaches that put peoples own solutions at the centre of service provision.

Dunst (1995) usefully synthesised thinking on how to incorporate a strengths based approach in practice. This involves five premises: a recognition that all families have unique strengths which depend upon culture, background, beliefs, and socioeconomic status; the failure of a family to display competence must not be viewed as a deficit in the family, but rather as a failure in the system to create opportunities for the competency to be displayed or learned; work with families must be approached in a way which focuses on positive functioning rather than perceiving families as ‘broken’ and ‘needing to be fixed’. This approach requires acceptance but also valuing of individual difference; a shift away from the use of treatment and prevention models as primary frameworks to promotion and enhancement models, consistent with strengthening family functioning; the goal of intervention must be viewed not as “doing for people”, but as strengthening the functioning of families to become less dependent on professionals for help. This requires a move from believing that experts should solve the families’ problems towards empowering families to master the challenges in their own lives (p.22). These five considerations collectively suggest an alternative to the deficit and weakness based approaches which have traditionally been present in service delivery, towards a proactive and positive approach which is truly supportive of families. It is further advised that practitioners work with families, supporting them to build up their aspirations and capabilities, so they can take responsibility for their own lives and support each other in the present and in the future (Think Family, 2008).

Recognising that such an approach cannot take place in a vacuum, a system wide approach is suggested, with recognition that particular skills are needed by practitioners to confidently work with families in this way (Ibid, 2008).
The delivery of Family Support services is also inextricably linked to the concept of need. The needs of children should determine the extent and nature of services provided to them (Dolan et al., 2006; Families Matter, 2009; Barlow et al., 2010). A key initial task in Family Support service delivery is to generate information on the needs of family members. Good quality social and family history taking is essential, including accurate chronologies and historical information about parents’ childhood relationships and behavioural backgrounds. This entails a focus on need as identified by family members, as opposed to the needs identified by practitioners, and recognises the role and strengths of the family in both identifying and meeting their needs (Davies and Ward, 2012). Children and families looking for a service should not be placed in set routine categories. While some degree of consistency and categorisation may be necessary, needs viewed in this narrow way are only partially understood and responded to. A needs led response involves the ability to be flexible in tailoring the Family Support practices to the particular circumstances of the families and communities in which they are based. Involving children and their families in the overall plan of work to meet these needs is necessary throughout this process. Including relevant service providers is also necessary with effective inter-agency and inter-disciplinary work essential. Strong integration of services leads to better services for children, young people and families (Davies and Ward, 2012).

Conclusion

Family Support is well placed to meet the wide range of welfare needs in children and is a valuable component in the continuum of supports available to children and their families. A challenge within the Family Support orientation involves focusing on the needs of the child alongside the needs of parents and the wider family context. However, it is by supporting the parent-child relationship, enhancing the parenting style used and addressing issues in the wider family environment that the welfare needs of children are responded to and met. Family Support can compensate where there are negative effects of disadvantage or adversity and can increase and strengthen protective factors in response to specific risks. Underpinned by a sound knowledge and skill base and the practice and service characteristics outlined Family Support can support parents in their efforts to ensure children’s welfare needs are met and at an overall level help restore positive family functioning.
References


