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The importance of maintaining Family and Community Links for Children in the Out of Home Care System

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Introduction

Regardless of the exact setting in which the social care worker is involved, be it supporting clients in maintaining their position in the community or assisting clients in making a return to the general community, the maintenance of family and community links are key tools to the achievement of the above identified goals.
The role of the parents, family and community in general must not be underestimated if we are to fully meet the needs of the vulnerable people with whom we work.
In the following article we will discus the reasons why it is important for social care workers maintain these links, identify key research carried out in the area, discuss some obstacles to the maintenance of contacts for clients and finally identify ways in which we as social care workers might promote the maintenance of contacts for the clients with whom we work.

Before discussing the reasons why it is important to maintain contacts for clients in the care system, let us firstly examine the legal obligations and responsibilities placed upon social workers and social care workers in relation to this matter.

Legislative Instruments guiding the maintenance of contact for children in care

The 1991 Child care Act is one of the key tools protecting the access rights of parents, family and any other person with a 'bona fide' interest in the welfare of a child.
Section 37 of the Act requires health boards to 'facilitate reasonable access between children in care and parents, any person acting in loco parents or any person who has a bona fide' interest in the child's care' (Child Care Act, 1991: 21).
The act also permits any person who is dissatisfied with health board access arrangements to apply an order to the court so it can 'make such orders as it thinks proper regarding access to the child by that person'.
(Child Care Act, 1991:21)
The health board may also under the brief of this act apply to the court to safeguard and protect the welfare of a child by seeking the court to authorize the health board to refuse to allow a named person access to a child in it's care.

Article 8 Part III of the Child Care (Placement of Children in Residential Care) Regulations (1995) requires the health board in each residential centre to provide arrangements such as a visiting room and accessible telephone in order to facilitate reasonable contact between children living in their centres and their parents, family and friends. This requirement is further promoted by the National Standards for Children's Residential Centres (2001) and the National Standards for Foster (2003) Care drafted by the Social services Inspectorate which calls for the assurance that:

"Children in partnership with their families are facilitated in identifying people they regard as significant in their lives, including family members, neighbours and friends.
Their wishes in relation to contact are ascertained and, where possible, facilitated"
(National Standards for Foster Care, 2003: 11)
The Children Act (2001) calls for Directors of detention centres to formulate a temporary leave programme for every child where appropriate.
The Act, with regard to 'mobility trips' or authorized absences for children in detention, calls for such trips to be utilized in

"assisting their integration into society by promoting their personal and social development, their awareness and appreciation in matters of culture, education and recreation"
(Children Act, 2001:118)

Research in relation to contact for children in the care system

Research in relation to this subject matter strongly indicates that, in the majority of cases children have experienced more successful outcomes in their placements where contacts have been maintained with key figures in their lives, namely parents and families.
Milham et al (1986) following their expansive study of 450 children in care, identify the following reasons for promoting contact for children in care with their families and communities:

- Frequent contact is the clearest indicator that the child/young person will return home or leave care quickly.
- Long term substitute parenting does not become a dominating issue.
- Older adolescents often have well forged friendships and links with their community, which they wish to maintain.
- The inclusion of the child's family can often reduce feeling of anxiety experienced by the child in attempts to maintain loyalty to natural parents
- The maintenance of family links helps prevent the freezing out of parents and families from the care process as the transition to care 'as far as possible should be a planned process with and not for families'
  (Johnson, 1986: 18)
- The relevant professionals in the child's life should be aiming to work in partnership with parents and families to promote and agree common goals and outcomes for the child.

A study carried out by Focus Point (1996) 'Focus on Residential Care in Ireland. 25 years since the Kennedy Report' surveying 29 residential centres at the time found only 53% of residents had retained contact with their families after their move to residential care.
Clarke (1998) points out in her study of residential services provided by the Sisters of Mercy that

"Where there was a dispute between the Health Board and the family many staff left the contact to the social worker" but advises " the centre must make maintaining contact a primary responsibility, and this should include 'difficult' families" (Clarke,1998: 95).

Berridge and Brodie (1998) identify in Britain the inadequacy of arrangements for contact between children out of home and the families prior to the Children's Act 1989 but post legislation indicate a marked improvement in this area of practice as staff
"were positive about helping children maintain and improve their relationship with their families" (Berridge and Brodie, 1998: 102)

Finally Whitaker et al (1998) identify the quality of a young person's relationship with family as a key indicator of positive outcomes for that young person.

<u>The Importance of Maintaining Contact for Children in Care</u>
The following considerations highlight the importance of maintaining contacts for children and young people in the care system:

- Parents know more about their children than anyone else and thus are often the key source of invaluable and essential information e.g medical histories, therapeutic interventions such as life story work

  'No matter how scanty their knowledge, at the outset of case interventions and planning, the parents know more about their child than anyone, if for no other reason, social workers need to work with the parents to access this knowledge' (Fahlberg, 1996: 229).

  This will continue to be a key issue for social care professionals as we work with Children from different cultures and nationalities and it may be difficult to access key information in order to best meet the needs of the child/young person.

- Parents and families can often be a valuable resource to call on if a child or young person is experiencing upset, stress or crisis.

- Aids the child/young person in maintaining and further developing their identity and cultural, religious or ethnic beliefs and backgrounds.

- The maintenance of contact further allows for the child to understand why they are in care which may reduce or prevent feelings of blame, anger and rejection or abandonment.

- Regular contact with parents or key family figures may reduce concerns the child or young person may have in relation to their parent's or family's welfare or health

- Regular contact also prevents children and young people developing fantastical images about absent parents or family members

- Parents and families may be a key support to the young adult who is leaving care to a more independent lifestyle

Barriers to Maintaining contacts for children in our care

There are many barriers in maintaining key contacts for children and young people in the care system. Some of these are listed below and might be reviewed by social care practitioners and child care professionals in reflection of their practice in the promotion of parents and families involvement with the child in care.

- Distance for parents and families to the residential centre and related transport difficulties and costs
- Communication problems
- Child refuses contact with parents and families
- Staffs do not encourage contact. This contact should be promoted from the pre admission stage and as professionals we should recognize 'parents should not have to earn acceptance any more than their child should have to earn parental love' (Fahlberg, 1996: 187)
- Social, gender, cultural or ethnical differences between staff and parents
- Parents feelings of guilt or of being judged
- Lack of facilities to support access e.g. availability of access room or of social worker or access worker to supervise visit
- Parents/Families undermining work of residential staff or foster parents or vice versa
- Concerns of foster parents about birth parents visiting their homes
- Difficulties in maintaining links with old communities may lie in distance involved or lack of staff resources to facilitate community activity

Ways of Including Parents and Families in the child's Placement

The involvement of families in their child's care might be promoted in the following ways:

- Include them in the information gathering process
- Include parents/families in identifying problems and problem solving
- Facilitate and support regular access visits
- Ensure the child and the parents /family have photos of each other
- Involve the parents, where possible, in daily matters and key occasions in the child's life e.g. hospital appointments, confirmation days, parent teacher meetings
- Aim to model positive care and parenting skills for the parents during contact times (Fahlberg, 1996)
- Attempt to build positive working relationships with parents/families
- Include the parents, again where possible, in daily routines of the unit when they visit the unit e.g. making dinner, homework time

Conclusion

In conclusion, we have recognised the importance of attempting to maintain family and community contacts for children living out of home.

In response to research findings and practice guidelines, which promote the maintenance of contacts, the possible barriers to maintaining contacts have been identified.

Finally suggestions for ways in promoting contacts are also identified with the invitation for us all as professional social care practitioners to reflect on our practice and continue to recognise and promote the involvement of families and communities in the lives of the children and young people with whom we work

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