## Re-imagining family support

Professor John Devaney Centenary Chair of Social Work School of Social and Political Science

J.Devaney@ed.ac.uk

@JDev65



## The Relationship Between the State and the Family

**Universal Services** 

Family Support

Family Preservation

**Alternative Care** 

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Level of Need	Focus	Service Response
Level 1		Children with no identified additional needs. Their
	rly He	needs are met through routine universal services.
Level 2		Children with additional needs that can be met by
		targeted support by a single agency or practitioner.
Level 3		(Team Around the Family) Represents children with
		additional needs that can be met by targeted
		support by a multi-agency support package.
Level 4	Statutory Social Work Intervention	(Child in Need) Represents children with significant
Level 5		needs that persist and have not been met by
		targeted support.
		(Safeguarding/Looked after Children) Represents
		children with complex and enduring needs at the
		highest level of vulnerability that will be met by
		multi-agency support from specialist services led by
		Children's Social Care.

**Devaney** (2019)

## **Existing Evidence Base**

- Children as part of a family, who are within a community
- Importance of prevention
- It's not just about the early years
- Providing early help
- Providing sustained help
- Supporting responsive relationships for children and adults
- Strengthening core life skills
- Reducing sources of stress in the lives of children and families
- Structural issues, such as poverty, gender inequality and racism matter

"Working in partnership to deliver support services at the right time for families to help them stay together and thrive"

Glasgow's Family Support Strategy Consultation

March 2019

# Framing how we understand and approach support for families

The Critical Few or the Many?

Crisis Driven or Asset Based?

## The critical few or the many?

- There tends to be a focus in many family support strategies on children who are directly known to children's social care
- For example, 16,500 children in Scotland have a parent in prison on any given day compared to 2,700 children with a child protection plan
- Thresholds for access to children's social care are usually felt to be too high
- Funding models for provision of family support tend to be skewed towards statutory services
- We need to talk about rationing, rather than thresholds

#### Crisis driven or asset based?

- Many of the children with the greatest needs live within the most disadvantaged communities
- Many of the children with the greatest needs also live within families whereby parents/carers are least able, for a variety of reasons, to access/use community services
- A real sense that the parents of the 'right' children are not accessing available support
- Asset-based approaches emphasise the need to redress the balance between meeting needs and nurturing the strengths and resources of people and communities

## **Broadening Our Vision**

- The current focus on adversity in childhood is a helpful one (Spratt, Devaney and Frederick, 2019)
- Relationships and services can seek to compensate or mitigate for the consequences of adversity
- We need to see adversity as having both an individual and a structural dimension
- We need to start talking about the temporal nature of adversity e.g. a lifecourse perspective
- Working with communities is at least as important as working with individuals
- A shift has occurred strengths-based and relational practices are once again coming to the fore

## Trauma, Psychological first aid, Caring communities



The Youth-nominated Support Team is a psychoeducational, social support intervention. Adolescents nominated "caring adults" (mean, 3.4 per adolescent from family, school, and community) to serve as support persons for them after hospitalization. These adults attended a psychoeducational session to learn about the young person's difficulties and treatment plan, suicide warning signs, communicating with adolescents, and how to be helpful in supporting treatment adherence and positive behavioural choices. The adults received weekly supportive telephone calls from YST staff for 3 months. The study found a significant reduction in deaths over an 11-14 year period.

King et al. (2019)

## **Concluding Thoughts**

- Who are the children who aren't part of the family support conversation at present?
- Should family support strategies be centred around children's social care at the hub or communities (however these might be defined)?
- How do we make better informed decisions about how finite resources are best used in multi-agency/multisectorial working?

#### References

- Glasgow City Health and Social Care Partnership (2019) Glasgow's Family Support Strategy (Draft Version 7)
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- Spratt, T., Devaney, J. and Frederick, J. (2019) Adverse Childhood Experiences: Beyond Signs of Safety - reimagining the organisation and practice of social work with children and families. *British Journal of Social* Work
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