

Assessing the needs of children living in chaotic and dysfunctional families

Jan Horwath

University of Sheffield, UK

CORRESPONDENCE TO

e-mail: j.horwath@sheffield.ac.uk

Abstract

Children living in chaotic and dysfunctional families are likely to have a diverse range of problems which affect their cognitive and socio-emotional development. Assessing the needs of children living in dysfunctional and chaotic families is challenging for practitioners for a number of reasons: practitioners cannot always agree on what is good enough parenting, they need to assess parents' willingness and ability to change, attention has to be paid to the parenting environment and it is important to understand how children experience their world. Through a comprehensive assessment practitioners can capture first what life is like for a child living in these conditions and secondly they can identify the impact that these conditions are having on the health and well-being of the children.

Keywords

Assessment – Dysfunctional families – Child protection – Social work – Parents involvement

Living in chaotic and dysfunctional families

«My name is Dylan I am six years old. I live with my mummy and baby brother Ethan. We have to climb lots of stairs to get to home. It is smelly mummy says people pee on the stairs. I get really scared when I go up the stairs as there is a funny man who comes out his door and shouts at us. Our home smells too mummy says it is damp I know what that is: it is the black stuff on the walls. On a good day mummy wakes me in the morning and then I get up and go to school for breakfast club. I like that as everyone is nice to me and I love the cereal and toast. My teacher Mrs Hunter is nice but the children in my class are not nice. They say I smell and have dirty clothes it is not my fault and they won't let me play their games. I got so mad one day I hit one of the boys and then I got into trouble. I also got told off for saying words mummy uses but Mrs Hunter told me they are naughty words. I have one friend Jason but he is like me and does not go to school every day. I like reading and sums but I'm no good, Mrs Hunter says I'd be better if I came every day. She gives me books to read at home with mummy but mummy

is too tired and gets cross when I ask her to read to me. Sometimes I sleep in lessons it is so nice and warm in my class room and then I get laughed at. I love the school dinners and if anyone leaves theirs I'll try and eat up what is left. The others call me a pig: one boy told me he has another dinner when he gets home I wish I was him I get bags of crisps and a bottle of coke. I get worried when we get to going home time as I hope mummy will be there for me. She came on Monday and walked and smelt funny she shouted at me and Mrs Hunter told her off so she hit me when I got home. I hate it when I get home. Mummy says she's tired and sleeps on the settee and tells me to look after Ethan. He cries a lot and I can't stop him so mummy shouts at us both. I watch TV and sometimes I fall asleep on the floor or mummy will tell me to go to bed. I wet the bed sometimes: the sheet might be dry when I go to bed if not I keep my clothes on. Sometimes if I've wet the bed and got no dry clothes mummy gets cross and I can't go to school and I watch TV. I don't like that as there is nothing to do, Dylan cries a lot and mummy shouts at us. Sometimes mummy lets me go to the shop for her I hate going past the scary man but I like being out and I know you have to look for cars before you cross the road. There is a nice lady in the shop and sometimes she'll give me chocolate' (Horwath, 2013)».

The daily lived experience of children living in chaotic and dysfunctional families, as can be seen from this account, is miserable and has a detrimental effect on their health and wellbeing. Children like Dylan are likely to be living in families with long-term, complex problems, such as drug-misuse, domestic violence, unemployment and poverty. Moreover, the situation can be exacerbated problems by the inter-generational nature of the problems with the parents themselves having experienced miserable childhoods. It is not surprising, therefore, that parenting is erratic with parents unable to provide guidance and boundaries to their children, often being inconsistent in their handling of the child and finding it difficult displaying emotional warmth. As a consequence of this type of parenting the children are likely to have a diverse range of problems which affect their cognitive and socio-emotional development. We know for example, that poor diet affects physical development, lack of interaction between parent and child not only affects the quality of attachments but can also lead to language delay and the poor development of social skills. And lack of stimulation affects cognitive development.

So how can practitioners capture first what life is like for a child living in these conditions and secondly how can they identify the impact that these conditions are having on the health and well-being of the child both immediate and longer term? The answer to this question is a comprehensive assessment.

The assessment framework

Irrespective of whether one is identifying emerging concerns or risk of significant harm, a detailed assessment enables practitioners to understand how the safety of the individual child and their health and wellbeing is affected by their parenting and family

lifestyle. Drawing on this knowledge, practitioners can then determine how to intervene to ensure the needs of the child are met. In the last ten years there has been significant attention paid internationally, to improving the quality of these assessments. In the UK for example each nation has its own assessment framework: *The Framework for the Assessment of Children in Need and their Families* (Department of Health *et al.*, 2000), commonly known as the Assessment Framework is used in England and Wales; in Scotland it is *the My World Triangle* and in Northern Ireland *UNOCINI (Understanding the Needs of Children in Northern Ireland)*. All of these frameworks are underpinned by an ecological perspective that recognises the development of the child is influenced by both the capacity of the parent or carer to meet their needs and the environment in which the child is brought up (Bronfenbrenner, 1979). This means that practitioners, whether identifying emerging concerns about neglect or assessing the risk of harm to a child should consider: the developmental needs of the child; parenting capacity to meet those needs and the family and environmental factors that affect family life. An ecological approach towards assessing the needs of children is also taken in Canada, Romania, the Russian Federation, Slovakia, Sweden, Ukraine, Malta, Croatia, the Republic of Ireland and some parts of the United States of America and Australia (Daly, 2007; Rose, 2009). We have been using this standardised approach towards assessing the needs of children in England for over ten years. Studies of assessment practice has indicated that this has led to improvements in the quality of these assessments and there is evidence that assessments are now much more focused on identifying the needs of the child and the factors that contribute to their needs being or not being met than in the past (Cleaver, Walker *et al.*, 2004; Davies & Ward, 2011).

Assessing the needs of children in dysfunctional and chaotic families, a challenging for practitioners

Despite these improvements in the quality of assessment, assessing the needs of children in dysfunctional and chaotic families remains challenging for practitioners for a number of reasons.

First, the harm these children suffer is likely to be cumulative, making it difficult to ascertain the point at which practitioners can demonstrate the parents are failing to meet the needs of the child. As a consequence, professionals find they are only able to intervene if there is a specific incident or dramatic event that requires an urgent response. For example, in the case of Dylan he only came to the attention of child protection services when he got hit by a car going to the shops alone. In addition, practitioners and indeed the general public cannot always agree on what is good enough parenting and therefore the threshold for intervention into these families lives varies depending on the professionals involved and their standards: what may be acceptable to one professional or a

society at a particular time and place may not be acceptable to another professional or to a society at a different time and place. Professionals also have to consider the extent to which parenting issues such as mental health problems, alcohol and substance misuse and domestic violence are affecting parenting. Finally, the parents themselves are likely to have a past history of being abused and neglected as well as having experience of child protection and other child welfare services. This will probably influence not only their approach towards the child but also towards professionals and in many cases can result in them being highly resistant to involvement from practitioners. This resistance may manifest itself through disengagement, verbal or physical aggression.

Second, in order for parents to meet the needs of the child the parents require the necessary ability and motivation to change their approach to parenting. A key assessment task, therefore, is to assess parents' willingness and ability to change in order to meet the needs of their child. This requires an understanding of the way in which individuals respond to change. All too often families believe change is imposed on them: they are told what needs to change and how to achieve this by professionals (Morrison, 2009). As Senge and colleagues (1994) note people do not resist change they resist being changed. Therefore, if practitioners wish to improve the quality of the daily lived experience of the neglectful child then they need to pay attention to the process of change, as, for example, outlined by Prochaska and di Clementi (1982), and support parents through recognising the need to change, deciding how to make the necessary changes and sustaining any changes that are made. I will consider this further in the workshop.

Third, attention has to be paid to the parenting environment. This needs to be supportive and facilitate quality child-rearing. For example, the parents need suitable housing, an income and community resources and a support network. Therefore, in order to assess the needs of the child an ecological perspective (Bronfenbrenner, 1979) and a multilevel systems approach is necessary. Conceptualising chaotic and dysfunctional families in this way means going beyond assessing the child and their parents. It requires practitioners to consider the child's world: the immediate and extended family, the community in which that child and family lives and the influence of the wider society on the family through, for example, legislation, culture and religion. Taking this perspective child development is inextricably linked to the interrelated contexts within which child grows up which either support or inhibits their progress.

Fourth, in order to assess the needs of the child so that practitioners can intervene effectively with these families, it is important to understand how the individual child experiences their world. In 1988 Dame Butler-Sloss reminded practitioners that: «*the child is a person and not an object of concern*» (Butler-Sloss 1988, p.245). This perspective challenges what was the view at the time, namely that children are biologically and socially immature and that powerful groups of adults construct representations of the child and impose this construction on groups of children, in the case Butler-Sloss was referring to, sexually abused children. In the last twenty years there has been a move

towards a more socially constructed view of childhood that recognises children as social actors and agents who live and experience family and community life in very different ways (James and James 2000). Thus, in order to make sense of these children's lives, it is important to understand the daily lived experience of the child living in a particular dysfunctional family, and to recognise that living in these types of families affects each child differently. This can be difficult to achieve if practitioners are overwhelmed with forms, policies and procedures which place more emphasis on following procedures and protocols rather than recognising children as individuals. All too often workers appear to go through the motions of following guidance and procedures aimed at assessing and meeting the needs of the children without demonstrating a commitment to the individual child (Munro, 2010). Thus, it is essential that organisations support practice that allows practitioners time to establish relationships with both children and parents: without a meaningful relationship with family members the practitioner will not be able to access information about past experiences and the current concerns and anxieties that influence child-rearing. If workers are to complete effective assessments they need to work in organisations where managers demonstrate, through the implementation of operational systems, that they have created an environment that promotes practice associated with positive outcomes for children. This requires systems that ensure the needs of the child are given priority over the needs of the organisation and that staff feel valued, supported and have manageable workloads.

A further issue for practitioners is deciding the extent to which the voice and views of the child should determine actions. Whilst maltreatment is experienced by and affects children differently it is also a problem that is categorised and defined by adults and remains an act of harm inflicted by those who have some power and control over children: namely their parents. Moreover, the very phrase «child protection» reflects a view that the child cannot safeguard themselves and therefore needs support from the state and its agents (Littlechild, 2000). Thus, making sense of the child's lived experience means not only taking into account the child's views but also what can be learnt about their lived experience from other professionals and family members.

Finally, one of the consequences of this emphasis on assessment, however, is that identification and assessment of need can be viewed as an intervention in its own right. There is no doubt that an assessment is, at one level, an intervention into the life of the family but the assessment alone does not necessarily lead to sustained change. Assessment is not a stand-alone activity: in order to ensure it leads to improved outcomes for children it should be inextricably linked to planning, intervening and evaluating progress.

To conclude, in the words of a practitioner in a recent study I completed on assessment practice with chaotic and dysfunctional families:

the hope is that the assessment will be a sort of a wake-up call to the parents and they will want to engage and there will be change.

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