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PARENTAL QUALITY AND CHILD RESILIENCE: EXPERIENCE OF A HUNGARIAN MODEL PROGRAM

Abstract

The study concludes the findings of a research on the efficiency of innovative, complex services aiming at preserving the family's unity, which were piloted by professionals of family and child welfare centres located in various settlements in Hungary (Szentes, Szekszárd, Budapest, Pécs, Sopron). By measuring parental skills and child resilience in deprived families included in the pilot programs aimed to develop parental skills, we assessed the results and impacts of the programs; in order to better understand their experiences, we conducted interviews with the target groups and the professionals. In the present study, following a short presentation of the pilot programs, we overview the main results of the research. Resilience - Experience of a Hungarian Model Program

Keywords: Child welfare service innovation, child resilience, parental skills

JEL Codes: J13

1. Child welfare practices for preventing and counterbalancing disadvantages

The study presents the results of the efficiency assessment of innovative complex services targeting to keep families together, which were the first such services to be developed and implemented by professionals of family and child welfare services in various locations of the country (Szentes, Szekszárd, Budapest, Pécs, Sopron).⁴ We assessed the effectiveness and efficiency of the programs by measuring parental skills and child resilience in disadvantaged families included in the experimental model programs, applying quantitative methods and conducting interviews both with professionals and clients.

Writings on the decisive role of the family in socialization in early childhood and in shaping the life path in young adulthood (Boreczki 2003, Somlai 1997, RácZ 2012, Homoki 2014) reveal the connections between the structure, composition, functioning of the family, and the development of the personality of the child, consequently, the successful integration into society. In the case of the cared people assisted within family and child welfare centres and services, due to the multiple disadvantages and endangered conditions they face, it can be regarded as a fact that these multiple disadvantages push most of them towards social exclusion by the time they reach adulthood. Intervention into the life of dysfunctional families, and the removal of a child from his/her biological family is undoubtedly a difficult process for every affected child and parent, causing ordeal and suffering, and generating processes hard to reverse. (Newman 2010)

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In those cases, when the family does not function well, when groups ensuring the sense of belonging are lacking, eventually family relationships are destructive, then the members of the family do not have anyone to turn to with their personal problems and difficulties. Intervention is possible depending on the way how the problem is objectified, in other words how it is manifested in everyday life. The possible objectification levels of the problem are the following: physiological, mental, relational, social, cultural level. Due to their age, whenever the interpretation of pathological symptoms displayed by children and intervention are necessary, social work carried out by involving actors who are important in their lives, both on family and other social levels, is inevitable in order to efficiently solve certain problems. *“In our interpretation, systemic social work is a helping activity embedded into a process, which, since it is centred on needs and problems, is characterized by flexibility and recursion. Whenever a change of a certain extent and direction occurs on one of the levels, that change will have an impact on the system of the resources acting on other levels too. Erroneous functioning may cause problems on social, community and individual levels alike, therefore support can be provided efficiently only by taking into account the entire system.”* (Homoki 2014: 12) *“Human ecology puts the emphasis on the relationship between humans and their environment, and regards humans and the environment as parts of the same system. In order to satisfy their needs and solve their problems, humans need to move, establish relationships within this system, all this giving birth to community adaptation between the physical and the human environment. It is obvious that these relationships evolve differently under different natural and artificial conditions, and humans satisfy their needs and solve their problems in various ways.”* (Dávid – Estefánné et al. 2008: 6)

The success or difficulties of services aimed at preserving the family’s unity are largely determined by the dynamics between the cooperating organisations: with certain partner institutions cooperation is easy and smooth, with others it can be irregular, in certain cases we might be confronted with hostility and rivalry. Case conferences focusing on specific cases can be very useful regarding these difficulties, and disagreements can weigh less in the light of the common goals. (Bányai 2018)

2. Model programs for supporting parenting

In what follows we present the main features of the programs developed and implemented by the professionals of family and child welfare institutions in five locations of the research (Budapest, Sopron, Pécs, Szekszárd, Szentes), by shortly presenting the aims and content of the programs.

a) Developing parental skills model program (Budapest)

The aim was to develop the conscious self-knowledge, self-control of parents, to consolidate children’s resilience and make them aware of it, to design methods through which positive shifts can occur in the lives of parents and their children. A further aim was to introduce tools for supporting parents, which, by complementing intensive family care (individual case management), can function as an efficient family centred service.

During group sessions organized for parents, besides receiving advices from professionals, participants can become familiar with the life strategies of other families as well. The main method applied in groups is drama, which reveals the causes of dysfunctions within a family from a new perspective and provides new tools for overcoming difficulties.

b) BeST model program (Sopron)

The aim of the model program is to experience the efficiency of the resources encompassed by parental activity and the supportive participation in the life of the child, by applying the Family Group Conference, as a restorative technique; in addition, the aim of the 8 session group for the development of parental skills is to increase parental communication, motivation and self-awareness. Feedback is given during individual counselling held simultaneously with group sessions.

The Family Group Conference is a meeting of family members – the enlarged family, friends, neighbours etc. –, summoned in case of a problem, in order to solve that problem and work out a plan. What is special about the Family Group Conference is the possibility which empowers families to solve their own problems. Although decisions are taken along the advices of professionals, and the approval of concerned service providers is needed, the family and its close environment has the central role in working out the best way to solve the problem, in taking decisions, while the responsibility of executing the decision also relies on the family.

c) “*We help you to help!!!!*” model program (Pécs)

The model program includes the training of professionals participating in the program, occasions like *Education consultancy, Family consultation, Parent consultation* providing the possibility for feedback, in addition to six other programme components focusing on the problems of families and children.

Among the objectives of the “*Family program*” component carried out with intensive family care the following are mentioned: empowerment, the strengthening and unravelling of the acting capacity of the individual; the releasing of the inner capacities relying in the individual; the enhancement of the coping abilities of clients; the development of parental skills and abilities (practical advices in housekeeping and managing a household, advices regarding the upbringing of children in terms of satisfying physical, spiritual, intellectual and emotional needs, child nutrition counselling, support in putting into practices these advices); conclusion of the legal protection status and of the foster care, preventing the taking away of children from their family.

Fostering *parental skills, the development of parental personality*. During the implementation of the “*Children in the divorce crisis*” programme component the objective was to make the parents aware of the fact that the quality of the divorce process has an impact on their relationship with their child, on their education style and methods, therefore it has a long-term effect on the mental wellbeing of their child.

The objective of the “*Children’s secrets and enigmas*” programme component was to offer parents comprehensive knowledge on the features, specificities and way of function pertinent to the age of their children. The focus of the group is on normative development, touching upon the most frequent issues occurring in a specific age. The aim is to explore the phases of each specific age during group activities (pre-schooler, school age, adolescence).

The aim of the “*Colour over*” project component was to develop the self-awareness of participating teenagers and young people.

“*Escape room*” – the aim of the project component carried out in an external location was to develop in a playful manner cooperation in a crisis situation, efficient communication and problem solving skills.

d) *Parental skills development through the intensive cooperation between family supporter and case manager in a multi-team setting model program (Szekszárd)*

The aim of the model program was to actively establish the contact with the families during the conclusion of the contract, to induce motivation during the setting down of conditions, to map in detail the informal and formal social network of the families using social diagnosis, to train, to develop consciousness embedded in reality, to build up intensive cooperation between professionals, to develop the capability to think within a new system, which allows for the professionals and the participating families openness, a new mindset, flexibility and activity in order to experience change in a positive manner.

The components carried out within the program:

- Training for parents and professionals: the definition of the target model before the launching of the program
- The intensive introduction of the social diagnosis
- Operating a “multi-team” setting – joint brainstorming of several professionals in three phases of the program
- For professionals: intensive family care
 - the co-working of the family supporter and case manager, which allows for the elaboration of the cooperation,
 - weekly, pre-planned case conference teams in a new structure.
- Social work in group, organized on three levels:
 - for children below 10: playing/development group, above 10: skills development;
 - for parents:
 - a group for creating conscious parental identity related to upbringing the children,
 - housekeeping skills also in the form of social work in group.

e) *The Intensive Skills Development and Family Support (KINCS) model program, Szentes*

The aim of the program is to develop and model an innovative tool used primarily to develop parental skills through techniques applied separately in family and child welfare service, a tool which includes in a complex way the social, political, social work and therapeutic interventions, respectively the individual, group and training methods.

A further aim of the program is to make this method, if it proves to be successful, adaptable by other organisations providing family and child welfare services, thus these organizations could perform their caring activity and manage problems more efficiently, could offer a more effective support in the needed changes, on the other hand, by developing parental skills, communication determining the parent-child relationship could become less conflicting and more efficient.

The model program displays its complex impact by the succession of three program components:

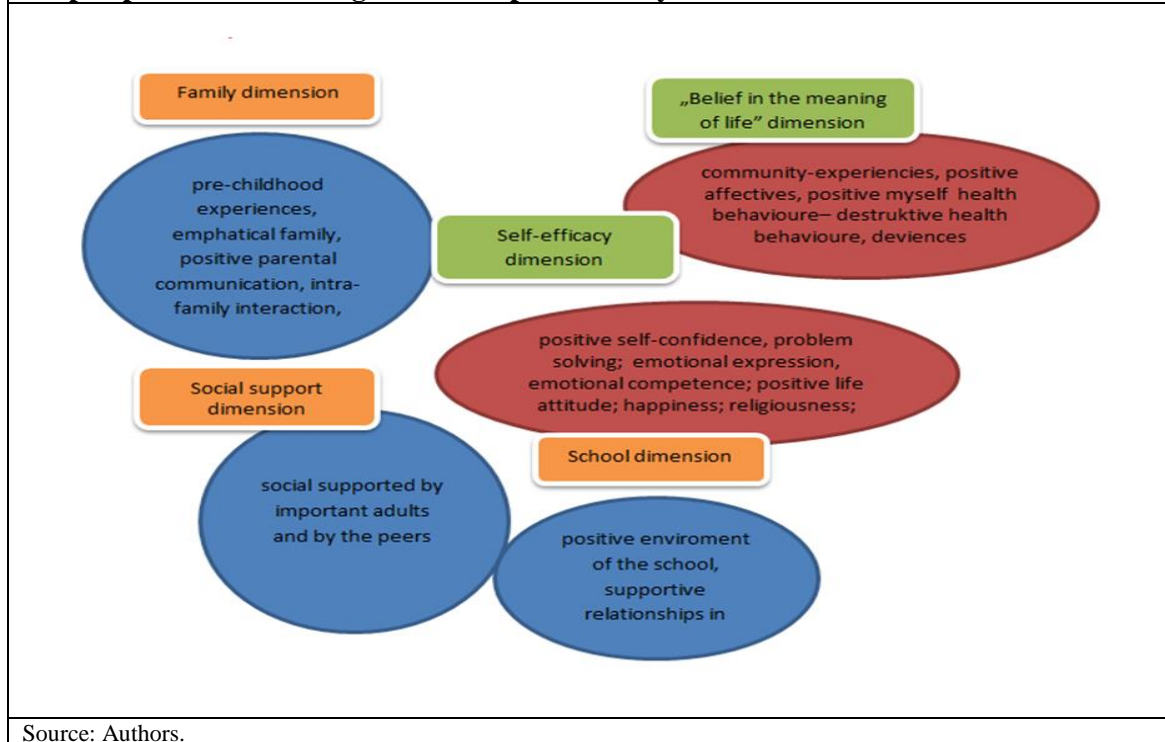
1. During weekly training sessions organized around topics determined by the life conditions of the participating families, and chosen from 10 areas, the parents receive theoretical knowledge, which is processed together by group members led by two professionals.
2. The professional who is providing support for the family (the case manager or family helper) helps the parent in practice, in situations adjusted to the theme of the training, starting from a pre-defined topic, at least two times, for 3 hours each time, in the home or immediate environment of the family (grocery, school, kindergarten etc.), and holds joint consultation together with the signalling system professional.
3. The parent tries out the methods already tried out with the professional by individually solving a task determined in advance, then calls on the supporting professional in the institution, gives an account of the experience, finally they analyse it together.

3. Research results

3.1. The findings of the assessments of parental skills and child resilience

The common starting point of the various definitions of the term resilience is “flexibility”, which, as a social science paradigm, can be interpreted as a specificity, which makes the individual capable to thrive despite of persisting difficulties, and severe traumatising effects. Any intervention, which has a positive effect on the factors determining resilience, is conducive to the resilient struggle against persistent difficulties in the lives of the child or youth. Therefore, in case of efficient interventions targeting family functioning, parent-child relationship, and family interactions, the enhancement of child resilience would most certainly be detectable as well, even after a short period of time. The objective indicator of the efficiency of the professional work can be the change identified in parental attitudes and child resilience, which, beyond the strengthening of the participants to this process, can facilitate feed-back towards collaborators from associated fields, since due to the applied measurement tools, those areas are revealed, where positive change has started. We created a model on the basis of the results (Homoki 2014) of the first Hungarian child and youth resilience research in child protection (2012/2014) (N=371); the alignment of resilience factors is shown by Figure 1.

Figure 1. The system of internal and external factors in the resilience model created from the perspective of the Hungarian child protection system



Our research regarding the efficiency of the presented model programs applied measurement tools based on the variables of the Hungarian child and youth resilience model (Homoki-Czinderi 2015: 72); we developed an efficient and easy to apply resilience scale in order to measure a complex phenomenon (Homoki 2018).

The assessment of the resilience of children included in the model programs was carried out with two different occasions, prior to the programs and after the closure of the programs.

Among the children respondents (N=209), 93% live with their biological family, while at the time of the research, from the children belonging to the families included in the model programs, 7% of the respondents were living in foster care.

Within the examined age group, children aged 12-13 are overrepresented among respondents (41%), 21% of them are children aged 10-11, and 16% of children aged 14-15 filled in the form; the rate of adolescents aged 16 is 13%, and 8% of the respondents are nearing majority, being aged 17-18. The rate of infants is 10%, the rate of toddlers below 2-3 years is 14%, the rate of children of kindergarten age is 24%, while children attending primary school are overrepresented with 42% of the sample.

The rate of families raising three or more children in the sub-scale is 43%. The rate of parents having one or two children is somewhat higher than the rate of families with older children (57%).

Resilience measurements show that among children aged below 10 years, the rate of children displaying higher resilience level increased with 10% as an effect of the targeted model programs; this increase can be shown, though is less significant (3%) in the case of children aged over 10 years.

When examining the results of the measurements regarding parental skills, the results show a positive shift. Concerning the extent of the development, the programs had a greater impact on the way how parents relate to each other and to their children.

Table 1. The average values of the parental attitude scale and sub-scales before and after the programs, in case of children aged 10-18

In case of parents of children aged 10-18:		Average	Average diff. (after-before)	Degrees of freedom	Standard deviation	Standard error
Parental attitude scale with 15 items	after the model program	50.78	+0.98	75	6.423	0.737
	before the model program	49.80				
Parental attitude sub-scale – interaction, communication within the family	after the model program	22.58	+0.19	83	3.585	0.391
	before the model program	22.39				
Parental attitude sub-scale – attitude towards the child	after the model program	11.74	+0.29	81	3.101	0.342
	before the model program	11.45				
Parental attitude sub-scale – relationship between the partners	after the model program	16.88	+0.36	87	3.070	0.327
	before the model program	16.52				

Source: Authors.

Table 2. The average values of the parental attitude scale and sub-scales before and after the programs, in case of children aged below 10

In case of parents of children aged below 10:		Average	Average diff. (after-before)	Degrees of freedom	Standard deviation	Standard error
Parental attitude scale with 15 items*	after the model program	56.30	+1.28	83	4.152	0.453
	before the model program	55.02				
Parental attitude sub-scale –interaction, communication within the family	after the model program	24.04	-0.03	83	3.585	0.391
	before the model program	24.07				
Parental attitude sub-scale – attitude towards the child	after the model program	13.14	+0.22	81	3.101	0.342
	before the model program	12.92				
Parental attitude sub-scale – relationship between the partners*	after the model program	18.96	+0.72	87	3.070	0.327
	before the model program	18.24				

Source: Authors.

3.2. The experiences of professionals and clients related to the model programs⁵

For the professionals leading and implementing the model programs at all five locations it was important to enlarge the range of services provided by their institution. They were searching for methods and tools of offering help, through which they could step out from the role of a child protection official, they could foster direct work with the clients, in the same time they could prevent the starting of authority procedures, respectively could reverse the already launched procedures. In the preparatory phase, the factor identified as the weakest was the chance to involve clients and maintain their motivation, which was formulated in each model program location. The concerns regarding this were not unfounded, as it indeed proved hard to induce active participation at clients; however, due to the diverse motivational techniques and the flexibility of program components, finally they succeeded to involve into the programs a sufficient number of clients in each location.

The core objective of the parental skills development, besides inducing a responsible parental attitude, was to make parents able to set limits for themselves and to respect these, and to allow them to develop mainly regarding age appropriate communication with their child and regarding conflict management.

“We have a very functional team in our institution, even so it is hard to make them come. We need to provide them motivation and remind them about meetings on a daily basis. This requires a lot of energy from each colleague and from us too, to achieve a minor result, but it’s not impossible. Personal relationships and the internet are very useful in this.”

⁵ In the qualitative part of the research we worked with Balázs Freisinger.

Through the program components the client–helper relationship got strengthened and received a new foundation; as a result of the partnership cooperation, the resistance of the clients significantly eased, which greatly enhanced the efficiency of the common work. Additionally, professionals had the chance to let their helper and supporter role prevail, pushing to the background the control functions.

“I think it is a very good program. I can tell that there were a lot of situations, where I found out many things about the clients I didn’t know till then. About childhood, or past events. About the family, on whom they can count, what they can expect to, what are people’s difficulties, what are the deficiencies. All these came out. My difficulty is that besides family support it is hard to implement it. Even if I’m doing the same thing, but doing it with 25 families, no chance.”

“We wanted something new, something we didn’t try out or do, so we wanted a tool with which we could address the families. And it turned out in our town and in other locations alike, that we need to take into account the entire family. We tried out all kinds of prevention programs, but exclusively destined to children: in school, during leisure time activities, together with the patron etc. It wasn’t efficient, because if we don’t manage to get the parent move, then we can’t guide so efficiently the child alone.”

The program leaders considered as an important result that the parents, rapidly overcoming their initial reserve, had many positive experiences, benefiting not only from the professional work, but also from the power of the community.

“The program influenced the relationships between the colleagues as well. Whenever we work together with a family, or lead a group together, this impacts our relationships with the colleagues as well, we get to know each other better, we get closer to each other. Thus the work of providing support also becomes more efficient. Obviously, whenever a person registers to the program, he or she is already interested in it somehow, and the discussions, the weekly regular meetings around this issue contribute to the building of the community.”

On the basis of the accounts of the professionals, one of the most important achievements of the model programs was univocally the persistent experience in practice of the common work in a team. The other significant discovery was the volume of opportunities surpassing any previous expectations and the efficiency relying in intensive family care. From a systemic approach, we have to highlight that the professionals participating to these programs acquired new knowledge and innovative tools during the thorough and targeted trainings, and while putting into practice and adapting this new knowledge to specific individuals and context, they could gain vast experiences. This professional development, and the motivation enhanced by success are definitely useful in avoiding professional burn-out, besides the fact that they represent a professional capital of inestimable value if any of the program elements would be applied in the future. From an institutional perspective, the most important outcome, besides the significant improvement of the life quality of the clients, is that the range of the provided services was enriched with new, successfully tested tools and methods, adapted to local resources and special needs.

“I see that since the professional has a more comprehensive view on the life of the family, and can be more empathetic with that specific situation or context, through which it might be difficult to interrupt even a process of putting under protection, so by acknowledging the difficulties, we are able to build up a method, through which more substantial support and more efficient result can be achieved in their lives.”

Among the clients invited to the model program, the rate of families subjected to procedures of including members of the family into the protection system was significant. In the case of these parents,

it was an important motivation that successful cooperation could lead to the ceasing of the procedure, which, by the way, did successfully happen in many cases. The parents were aware of this possibility, and this fact fostered their willingness to cooperate and their being actively involved in the programs.

When asked about continuity, sustainability, visions, and the aims of the activities, the parents highlighted the improvement of their relationship with their children, and related that they would definitely manage certain conflicts easier, and that they acquired knowledge and experiences which could be used in the future as well in the upbringing of their children. The young people also pointed out that the ability to interact with their peers, and their willingness to cooperate underwent a substantial development during the program, and besides self-confidence, their positive view of life got also improved.

“I’m happy for this program, because I’m interested in many things. (...) Giving advice, then activities, then I also mean that we have to fill in what we are buying, separately for each day, to see if it’s worth. So to see if an item could be replaced by something else for example. I meet similar families, with whom we are on the same level in hierarchy, they’re just as indigent as I am, it’s just they raise the kid somehow differently. The composition of the family is different, so we can learn from each other things that appear nice to us.”

Most of the respondents specified among the positive aspects the friendly atmosphere and professional content at group activities, the professionalism of the experts and their confident, partner-like attitude towards them. Many respondents accounted that they could feel their own person too important, and they could manifest themselves not only through their being a parent and through their parental performance and success.

“He/she helped me a lot in cleaning too, we’re folding the clothes. We hanged the clothes on the coat-stand. We’ve been sweeping, dusting, everything. It’s a must do because of the children too. Do the washing, the cleaning, the cooking. I’ve learnt a lot, we’ve been talking a lot. Mainly about cleaning, parenting, children.”

The power of the community, the strengthening of the relationships network are important outcomes mentioned repeatedly not only by parents, but by young people as well. Generally the participants considered as a great success that they rapidly became accepted members with full-rights of a community, and that they can maintain the relationships created during the program in the future as well. Besides interactions implying help and support, many deeper relationships, friendships were born as well.

“We had good discussions. I got closer to the carer. We got along well, but with the others too. And I got to know new people too in the program. It was good. I had good experiences.”

From the perspective of the clients, the biggest difficulty, and in the same time, the most important strength ensuing from overcoming it during the program was that they became able to surpass their aversion to change and new forms of support. They became able and willing to identify and share their own problems, to ask for and accept help. Cooperation with the family carers and case managers became truly intensive also only after an initial resistance, but after the clients rapidly acknowledged the multiple possibilities relying in this method, they used the available help and support successfully.

Table 3. The strengths of the model programs: professional developments and the efficiency of empowerment

Strengths	Professional developments	Empowerment
<ul style="list-style-type: none"> ▶ Competent team ▶ Well-developed program components ▶ Adequate addressing of the target group. ▶ Good atmosphere, openness of clients, despite issues related to the number of participants ▶ Make the best of group work, while maintaining the focus on individual problems 	<ul style="list-style-type: none"> ▶ Advancing self-reflexion ▶ Enhancing professional consciousness ▶ Advancing the elucidation of professional roles, competences and boundaries ▶ Fostering the abilities of intra- and extra-organisational cooperation ▶ Possibility to re-define success / <i>social work</i> ▶ Preventing burn-out 	<ul style="list-style-type: none"> ▶ Enhancing self-confidence of clients ▶ Strengthening parental and child roles ▶ Advancing unambiguous, targeted communication ▶ Enhancing the efficiency of the empowerment process ▶ Improving life quality

Source: Authors.

Conclusions

The quantitative and qualitative results of the research univocally show positive change in case of each model program (Budapest, Pécs, Sopron, Szekszárd, Szentes). We can state that the introduction of the new services and methods was definitely useful, according to the clients as well, both regarding immediate results and the supportive power effective in the future as well. An important strength of the programs is that they contribute to the consolidation of the network of the clients including the supportive community, and relationships with families in similar situation and life conditions.

The range of tools used by professionals working with families and children is definitely broadened, thus family care can become more efficient in the Hungarian practice.

When comparing the average values of child resilience and parental attitudes at the program locations before and after the programs, the highest positive difference was revealed at the locations where complex programs and several program components were simultaneously implemented. Factors enhancing resilience were among the program objectives, and the theoretical basis of the implemented programs can contribute to the increase of the efficiency.

On the basis of our qualitative results, we can state that according to the opinion of the professionals, the developed programs are adequate for the efficient management of family problems, for preserving or restoring the functionality of the family, through the broad strengthening and complex development of parental skills. A further important result of the program is that the intensity of work relationships, and the efficiency of information exchange between colleagues were increased, and all in all a real network was developed through the cooperation of the professional community.

One of the most important novelties of the programs is that in the case of the involved families, for the sake of a more intensive cooperation, the carer leaves behind the minimum requirements of protocol, and gets actively involved in the life of the families, first as a participant observer, later as a helper, which reveals the arising of a new type of social work with families in field work.

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