Everyday life in focus in residential child care

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Introduction

This paper is based on a study of relationships within a community-based residential establishment in Denmark. The residential unit involved in the study receives children from 4 -17 years, though the average age is 14. Admission on an emergency basis is possible and often used. However, most children are in long-term care (1-2 years) and a few of them for the rest of their childhood. The unit has two sections, each with six children. The sections work separately, but they are within the same house, connected by a corridor and they share playgrounds, meeting rooms and office facilities. Eleven young people were interviewed. Two of the young people, aged 14 and over, still lived in the residential unit, while the rest of the interviewees had moved out of residential care and lived independently. All the statements included in this paper are from the latter group. The study was conducted in cooperation with Karen Zobbe and published in Schjellerup Nielsen & Zobbe (2003).

Three young people, who formerly lived in residential care, talk about residential life:

It was good that you could take your bicycle and ride home [to my parent's home] ...you had your friends in the neighbourhood, and you also went to the local school so, well it was essential, really.

It was like this! if you didn't do something! they kicked you out of the door, you were supposed to be active either with leisure activities or calling someone or it could be just going to the public swimming pool.

The positive side was that I knew the neighbourhood. I knew where to go if I wanted a soft drink ... that matters a lot, when you have so many other things in your head. That you don't need somebody to accompany you to go to places, or drive you. And I knew which leisure activities were available, if I felt like it. I knew where the parties were if I felt like that. . .well I felt like I was home.

The residential setting where the young people lived is situated in the neighbourhood of their parents' home. All the children in this unit attend local school or local day care. The
manager of the unit attaches great importance to the children's relationships to different social arenas outside the unit. She emphasises this as an important part of the work from the viewpoint of social pedagogy:

Our task is to maintain the good relationships that they have. If they don't have any, then they need help to foster them. To get them to take part in a leisure activity, have some playmates or friends ... it is for example about celebrating their birthday here and also seeing to it that they participate in birthdays out there. It goes both ways to push them out to get relationships and to help them maintain these. This also goes for interests, and to attract peers to come here, so it becomes natural to bring home playmates or have someone staying overnight at weekends. We want them to have a leisure activity in the neighbourhood and they cannot go together, that is a part of our values, they can have the same interest but not on the same team, it should not be like 'here come the ones from the children's home'.

The statements of the young people and the manager alike are about having ordinary relationships, in spite of living in a residential care establishment, and to interact in the same social arenas as their peers. This paper discusses the role of residential child care arrangements from the viewpoint that children socialise in a variety of social arenas. The paper will include recent research and discuss this in relation to guidelines and demands in child welfare policy in Denmark.

A recent review of effort and impact in residential child care (Schjellerup Nielsen, 2006) points out a consistent theme in the studies that suggest a risk of institutionalisation and thus a need for cooperation between different social arenas and social services and to create mediating links to obtain an everyday life for the children, which includes social arenas outside the residential establishment. The recommendations of the review are similar to other studies (Egelund & Hestbrek, 2003; Andreassen, 2003). While on basis of the studies it has not been possible to state definitively what constitutes best practice, nevertheless the review paints a clear picture of the practices that have a good probability of being effective:

- There should be extensive cooperation with school and local community, as well as the social services, and schooling should take a major priority;
- Treatment in residential care contributes to and matches the social and cultural competences required in order to interact in different social arenas while living in residential care as well as afterwards;
- Residential care units should represent a predictable and clear but warm combination of structure and culture.

As to how residential care arrangements can help create competences that increase the life chances of the children and their societal integration the studies recommend: a) links between the residential care setting and the outside community, b) good inter professional collaboration, c) cooperation with and involvement of the family in the child's everyday life, d) working with aftercare when the children move back home as well as when young people start an independent life.
The key issues for social pedagogical work with children in residential care in this paper will thus be family cooperation, homeliness (as in feeling at home), school and leisure life, and friends and social networks. These are issues of a general character in social pedagogical work with all children in any setting, not just residential child care.

**Everyday life in different social arenas**

Socialisation for children today is wide-ranging in terms of interaction with many different social arenas. Socialisation does not just happen in the family, or (for children in residential care) within the residential setting, in the way that traditional primary socialisation is usually understood. Changes in society have produced childhood conditions that entail new social challenges for children, which need to be managed in the everyday life of the children (Dencik, 1999).

Important social arenas for school-age children are family, school, friends, leisure time and their neighbourhood. These social arenas are just as crucial for children in residential settings. A key principle which informs Danish social services law is that all children have the need for a variety of everyday life experiences in order to develop. The law governing the residential placement of children makes it mandatory to provide developmental opportunities that give the best possible childhood in order to obtain the same developmental potential as their peers. The local authority in cooperation with staff from the residential unit writes a ‘plan of action’, preferably ahead of or within the first two months of the placement. The plan identifies different points of focus which include important socialisation arenas for the child, as the plan has to establish goals with regard to:

1) the child's general development,
2) family conditions,
3) schooling,
4) health,
5) leisure time and friendships, and,
6) any other relevant circumstances.

In the Danish Placement Reform policy (Anbringelsesreformen) issued in January 2006, it is a stated aim that admission to out-of-home care is not just about removing a child from an unacceptable situation at home, it is also about contributing to helping the child in getting on with his or her life in the best possible way. That is, an objective that wants to strengthen vulnerable children's life chances through working within the above-mentioned focus areas.

**Family involvement and cooperation**

It is characteristic for many of these children that admission to out-of-home care has weakened the bonds with their family. They often feel lonely and isolated, as they are without supporting networks and it is not easy for them to create new networks (Egelund & Hestbrek, 2003). As the children are often occupied with thoughts about their family, the development of cooperation with the family and ensuring that the child feels that their parents are still significant, are crucial to create coherence between the life with
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their family and everyday life at the residential unit. The role of the staff should focus on mediating between child and family rather than on completely taking over the care function. Research shows that when residential child care units work together with the family, it is a key factor in positive development during residential life. Conversely if the parents are not involved or integrated in the pedagogical work it is the greatest single barrier in terms of maintaining positive development during placement when the child returns to the family (Schjellerup Nielsen, 2006).

Schwartz and Madsen (2003) demonstrated that the residential setting can be understood as a part of the family’s network. The unit can be part of a joint arrangement of care for the child, where the parents participate in the everyday care work with the child. The purpose of a joint arrangement is to connect the different social worlds of the child instead of dissociating them. In this way, admission to out-of-home care is not seen as the main solution only; it can be a solution for a shorter period if the situation breaks down at home. The placement is thus seen as a supplement, either as a solitary arrangement or in cooperation with other social service arrangements. The everyday life of the child is in focus, as great importance is attached to the maintenance of the child’s different customary relationships.

To feel at home

As one of the young people states at the beginning of this paper, it is crucial that you feel at home at the residential unit. While a child is resident there, the unit is the child’s home as it is there that the everyday life of the child is lived. Sadly, in Denmark, many placements have a character of being temporary as opposed to an overall sense of being homely. To take a child into care can enhance the feeling of breakdown and being rootless or ‘homeless’, which is why the general purpose of many residential child care establishments is to provide a safe and homely environment, with stability and care. A residential child care setting is by definition a public institutional arrangement which seems to reflect a public life rather than a private life in an understanding of how a ‘home’ usually appears. The children’s rooms are in principle private, while the other rooms or spaces in the unit are public. Research shows that everyday life in a residential care unit is characterised by routines and structures that are adapted to the entire group and that the children require respect for their privacy (for example, to be able to be on the phone privately; to spend time alone with friends; peace and quiet to get on with homework) (Egelund & Hestbrek, 2003). The following statements from young people show that they have different experiences of the unit in terms of being a home or a family like environment. Two of the young people emphasise communal or caring traditions, as being important in creating homeliness:

[It] is an institutional setting, but they have made an immense effort to make it seem as a home. They pulled us out of bed in the weekends to have brunch together...it is the homelike traditions that makes it so wonderful. It doesn’t have to be like an institutional setting, where everything is scheduled....it is not, but sometimes they would say: ‘You are not going anywhere tonight’, then you lost your temper, but that also happens at home, your mother also tells you that ‘you
should not go out tonight, you have been out every day this week, you can stay home tonight’.

To me it is my family....though it is an institutional setting they do an incredible amount to make it look like a home. And that is what I really miss, that we watched a video every Wednesday, there were holidays both at summertime and skiing holiday, and outings and during the weekends we bought sweets, lit candles, played games.

Two other young people that lived in the same residential group felt there were too many people assembled in one place, and that the rules were undifferentiated:

It is obvious that I would make the unit more homely ... I think there are too many people - it seems very much as after-school care - I would prefer to divide the unit....to have a place with more tranquillity, a place where you cannot run about....it is a very big place, if you have to live there for a longer time.

It seemed more like after-school care to me. Well, that’s something that a family’s about, when you are older you can watch a film once a week....but if we for example went to the cinema, it had to be a film that we could all watch.....and then it is the smaller children that get to decide and then it’s going to be Bambi or something like that.

On the basis of a study in several small-scale residential child care establishments in Denmark, Højlund (2006) demonstrated the dilemmas when residential units define themselves as a home and when they make use of homeliness and a family-like concept as a pedagogical strategy. Tensions occur, for example between closeness and distance, or intimacy and alienation. This is because homeliness is perceived by the children as togetherness and sincere personal engagement, while the role of the staff is blurred in this concept, as in reality their role is governed by their job description and working conditions. The pedagogical staff aim at providing an authentic home, while the children to a greater extent focus on authentic relationship. Højlund refers to pedagogical staff who state that the idea of homeliness is not consistent with the many rules and decrees of a public system. A residential care unit is a part of the public system, and this interferes with the good intentions of being homelike. Hence the notion of homeliness struggles against something else. The difficult task for the staff is to locate the effective but still warm combination of structure and culture that research shows is effective in pedagogical work. (Schjellerup Nielsen, 2006).

**Schooling and leisure time**

Research identifies many problems in the prioritisation and establishment of children’s schooling while they are looked after. Children who have had multiple placements have often also had many school disruptions. Collectively, research emphasises the relevance of increased cooperation across disciplines, as well as a call for a particular focus upon the schooling and educational needs of the children and young people in residential care, including support and help to do homework as well as informal aspects like having positive
expectations and motivation. To get support in school is a constituent element in successful adaptation after the discharge (Schjellerup Nielsen, 2006).

Studies that have compared leisure activities of children in residential care with peers in general show a great difference in application and frequency among the two groups. Children in residential care spent less time in public arenas and to a greater extent they use activities at the residential establishment than in public. To children who do not live in residential care, friends have a great influence on their more frequent use of leisure activities, while children in residential care often require that one of the staff are present. Improving leisure and friendships for children in residential care requires both active pedagogical effort and the participation of the children. However, a recent review from the Danish National Centre for Social Research on leisure time for vulnerable children (Dahl, 2007) shows how children in residential care seem to get more help in participating in leisure activities than other vulnerable children do. The review concludes that leisure activities have a positive connection with vulnerable children's wellbeing in school and/or with their personal wellbeing. Leisure time, formal as well as informal can serve as breathing spaces for vulnerable children in a complicated everyday life. The friendships and social networks that the children create in connection with leisure activities have significance rather than the actual activities themselves.

**Friendships and the residential group**

It is not only social networks and friends outside care which are important for the children. When children move into a residential care unit they have to be a part of a new children's community. The relationships with the staff are 'scheduled' and replaceable, whereas the other children are permanent fellow-residents. The community in a residential child care unit differs radically from other children's communities as it entirely consists of children with a variety of difficulties and care needs. Also, because it is full-time, it is somewhat like a family or sibling relationship. Some of the young people put it this way:

I felt it was fine. The same young people, peers and that was okay....It was not like siblings....it was evident that it was a different kind of relationship we had.

I think we were like flatmates. It was like we had something together and we had something in common. We all had problems and a reason to live there, so we had like something in common that stuck us together.

We had such a love-hate relationship [in regard to the smaller children] from Monday till Friday you just wished them all dead. But when we got to Friday, there was just cosiness in the sofa, the smaller children climbed up on your lap and farted and it was all forgotten. I think it is the same with siblings, you really hate them- still you wouldn't be without them.

From studies in residential child care in Denmark, Stockholm (2006a; 2006b) points out that group life with the other children is of great importance for children in residential care. She shows how the children's desire to be part of something and to belong is so strong that it becomes the motivating force in their interaction and striving for
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togetherness. As a consequence of admission to residential care the children have often had to sever all ties with other social networks. Group life, however, is made up of unequal social positions, a sort of social hierarchy, where one has to know one's place. This requires struggle, negotiations, acquisition of specific competences and understanding of unspoken rules of the resident group. Stockholm (2006a; 2006b) puts forward the argument that the children spend all their energy to position themselves. It is not until they know their place in the resident group that they are open to pedagogical treatment, though on the other hand the dynamic that is within the resident group could profitably be included in the pedagogical work. Rather than just focusing on the development of the individual child, focus could be on both the dynamic of the entire resident group and on involving the group's influence upon the individual child in the pedagogical work.

**From ideal to reality**

The author's ongoing research queries the inclusiveness of the system outside residential care. Local schooling and leisure activities for children in residential care predominantly paint a picture of non-integration. The children either do not have relationships with other children outside, or they have relationships with children like themselves (marginalised) or with children that also live in a residential care establishment. This research emphasises the importance of interaction in a variety of social arenas; however, creating links between these is additionally problematic as these social arenas are apparently not accessible to the children. The arenas where the vulnerable children are supposed to have the same developmental opportunities as their peers are areas where it is difficult for the children to find an equal place. Thus it is necessary to rethink traditional routines and ways of practice in the normal as well as the special system if social pedagogical work wants to take research, child welfare policy and today's circumstances for the socialisation of children seriously.

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**References**


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