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CHILD WELFARE

Child welfare is concerned with the social administration of children's lives in organized welfare states. The aim of child welfare is to promote children's development, safety, and well-being. Contemporary uses of the term child welfare tend to refer to services related to adoption, the prevention of abuse and neglect, and living in state care. Social work is the profession most directly responsible for the delivery of child welfare policies in collaboration with teachers, health professionals, and parents. Child protection is the most recognizable service in which children's welfare in enacted, although child welfare is much broader including the state's responsibility for children's economic prosperity. The entry provides an overview of the emergence of child welfare from an international perspective. It looks at different theoretical approaches that inform the practice and organization of children's welfare. Finally, it looks at research on children's experiences of child welfare services.

The Emergence of Child Welfare Internationally: An Historic Perspective

Three movements have shaped child welfare historically. The first is 'child saving', the idea that children are relatively powerless to act for themselves and that adults in authority are responsible for their welfare. 'Social investment' ideas have also shaped child welfare, the idea that children are the future capital of a nation. Finally, from a rights-based perspective, child welfare is considered to be an inalienable right and children are social actors who can contribute to their own welfare.

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The emergence of organized child welfare is closely linked to industrialisation, modernization, and the birth of the nation state, yet the roots of child welfare predate this period. For example, Foundlings Hospitals were set up across Europe from the 13th century onwards. Until that point orphans, children born outside of wedlock, and poor children were often abandoned. Foundling Hospitals existed to save children from abandonment, or even infanticide, to care for them in the absence of parental or extended family care, and to ensure their education and transformation into productive citizens. Run by philanthropist and charitable missions, Foundling Hospitals represent pre-statist approaches to child welfare.

The First and Second World Wars were instrumental in the shaping of contemporary child welfare in Anglo-American contexts. As historian Hugh Cunningham notes, referring to the UK context, 'in war time people looked to a better future ahead, and the future was the children' (2006, p. 178). The need to invest in children's health, education, sense of citizenship and to focus on 'children's best interests' achieved a rare political consensus. As such, children in capitalist societies started to be understood as embodying the future and 'a close identification between childhood and the destiny of the nation' (ibid) was forged.

Since the late 1980s, and with the ratification of the United Nations Convention for the Rights of the Child (UNCRC), children's entitlement to welfare came to the fore. In the Convention welfare cuts across rights of provision and protection in childhood, as for example in the case of state provision of the highest possible standard of health and treatment in the case of illness (Article 24), and/or state protection from violence, abuse and neglect (Article 19). Children's participation rights, which state that children's views must be solicited, listened to, and respected in all matters affecting them, also play a role in their welfare. The children's rights

movement has recast our understanding of child welfare as both a national and international issue, as might be the case for example in transnational adoption and/or children's work and labour movements. Critiques of children's rights approaches to child welfare highlight the foregrounding of the individual child at the expense of thinking about welfare as an interdependent set of relationships between children, significant others, and institutions. Further critiques challenge the balance of children's rights in practice arguing that protection rights often eclipse children's rights to participation, in what could be described as a perpetuation of earlier child saving approaches.

In contemporary post-industrial economies child welfare is currently undergoing drastic re-organisation. The emergence of neoliberal economic policies in the 1980s saw the beginning of the marketization of public services throughout the 1990s and 2000s, and the outsourcing of state responsibilities, including in child welfare, to the charity and private sectors. Such trends were confounded with the 2008 Financial Crisis which paved the way for over a decade of Austerity policies. These socio-economic and political developments have had detrimental consequences for state provision of child welfare in many countries. For example, in the UK, state funding to women's shelters and the under-resourcing of prevention services for children leaves children (and their mothers) who have experienced domestic violence in extended precarious circumstances, unable to leave home and escape perpetrators. At the same time, the profession of social work, a key actor in the shaping of child welfare, is undergoing radical restructuring in terms of the education of future social workers as well as the organisation of services, as current socio-economic trends implicate social work in privatisation.

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Models and practices of child welfare largely depend on the socio-economic and political configuration in different countries and regions. The model of child welfare found in the U.K. has been described as an *institutional* model of child welfare. A comparative look at child welfare across the world can unsettle received wisdom of both childhood and welfare. In Europe child protection legislation and policy varies considerably across different countries with not all countries claiming centralised frameworks. Children's welfare in social democratic societies, such as those found in Scandinavian countries, suggest a more *developmental* approach to child welfare in which provision for children is embedded within extensive family social policy ranging from early state nursery provision to shared parental leave.

In the United States, where there is no universal welfare and local provision varies considerably across federal governments, a *residual* model prevails which favours minimalist state intervention. The residual model necessitates social entrepreneurship and innovation in the design and delivery of children's welfare. The *Harlem Children's Zone* is an example of a community child welfare model describing itself as a 'cradle to career' intervention.

Meanwhile, anthropological research sensitises us to more informal child protection and welfare practices as such alloparenting, child fosterage, clan fostering, and nurture kinship across the Global South. Multi-sited ethnographies of adoption also highlight the different meanings and practices of welfare, as anthropologist Rachael Stryker extensively documents in her ethnographies of transnational adoption experiences of Russian children by U.S. parents. Other examples include the indigenous, participatory interventions in Ethiopia for the prevention of, for example female genital mutilation, where child welfare is linked to issues of civic education, women's economic support, food security, environmental protection, and elder care.

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Different Theoretical Approaches for the Practice of Child Welfare

Child welfare is an interdisciplinary area of knowledge and social work, which underpins child welfare practice, has been influenced by behaviourism, psychoanalysis, intervention science, Marxism, feminism and post-colonial studies alike. Approaches to child welfare can be categorized as being therapeutic, scientific, and/or societally focused. The dominance or combination of approaches tends to follow broader trends in the social construction of childhood, social problems, and proposed responses providing different conceptualizations to social issues, children, parents, social workers, and the state, and offering diverse avenues of action.

Early models of child welfare were influenced by developments in child psychoanalysis. The work of Anna Freud on the one hand, and John Bowlby on the other, are of particular note, as is the synthesis of both traditions in the work of Peter Fonagy and Mary Target. Anna Freud and colleagues' work in London during and following the Second World War, ushered in a culture of listening to children. In contrast to her father's approach to psychoanalysis which relied on cultivating a relationship to the past, Anna Freud argued that children's cares and concerns related to their lived experience in the 'here-and-now'. Accounts exist in the literature of the ways in which Freud and her co-workers tried to understand children's seemingly idiosyncratic behaviours and musings. Instead of trying to persuade children of the moral rectitude, or otherwise, of such expressions, they tried to understand the ways in which such expressions provided a window into the child's inner and outer worlds.

Likewise, John Bowlby contended that children's encounters with the outside world where often responsible for their psychological experiences and emotional

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disturbances. Bowlby was particularly interested in children's relationship with their primary care giver – typically their mother – and together with Mary Ainsworth pioneered research into relationship attachment in childhood. The pair, separately and together, posited children's need for a secure base from which to explore the world. Through experimental research, understanding of different attachment styles and their consequences was developed and more contemporary research, such as by Fonagy and Target, has continued in this tradition contributing to our understanding of child and adult 'mentalisation' processes – the imaginative activity of understanding another person's mental states, an ability thought to be rooted in early secure caregiving relationships. This body of work continues to influence child welfare practices because of the compelling evidence in post-industrialised societies, where the concept of attachment has taken root, between the breakdown of mentalisation processes and patterns of abuse and neglect. Drawing on such approaches children and their parents are conceptualised as thinking, feeling, acting beings. In this model, social workers are trained to work intergenerationally, being mindful to relationship breakdown, and using themselves in the process of repair.

The attachment approach has been criticized from feminist, sociological, and anthropological perspectives. Early critiques focused on the overemphasis on mothers in the attachment process and the implications this had for women who alone were held responsible for the child's present and future well-being. More recent sociological critiques have also centered on the overdetermination of the relationship between attachment and brain development. This is a relationship that has caught policy-makers imaginations and spurred the early intervention movement. However, it is still a relationship that is being investigated and is much less definite than its popularization would suggest. These sociological critiques also stress how class,

poverty, material life conditions, and structural inequalities fall out of sight when the individual and interpersonal psychological issues take center stage. Anthropologists have also pointed out the cultural decontextualization of much research on attachment which takes the nuclear family, and the mother-child relationship, as its basis and ignores the many different family formations and child-care arrangements that exist globally.

The scientific method has also impacted on the practice of child welfare. Bowlby and Ainsworth's work provides an early example of empirical research in child welfare. The intermingling of science and child welfare however predates them. The hygiene movement of the early 1900s emerged in response to high infant deaths and mothers were the focus of philanthropic (friendly visitors), and later state interventions (social workers) to keep babies and houses clean and orderly. Health visitors existed in parallel to the emerging profession of social work and, backed by science, intervened into poor and working-class family homes. The discipline of psychology, following its own historical trajectory and efforts to become a legitimate natural science, soon joined scientific discourses of child welfare and the rise of expert advice in child rearing started to emerge. Developments in public health and medicine have further contributed to contemporary trends in the practice of child welfare. The evidence-based medicine movement, with its rejection of professional hierarchy and authority, turned to experimental design as a way of providing an answer to what worked in therapeutic interventions, as well as to support decision-making for the rationalisation of resources in the newly founded 'cradle to grave' welfare state.

Skepticism over the outcomes of psychotherapeutic approaches to child social work practice and the organisation of child welfare at national levels, sparked an

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appetite at a policy level for more evidence-based approaches to the practice of child welfare. Evidence-based child welfare practices are an approach to intervening into children's lives which only uses evidence derived from experimentally designed research which has shown a practice to be effective in changing behaviours and improving outcomes for children. Today a number of national and international evidence synthesis organisations, such as the Dartington Social Research Unit, are in existence working at the interfaces of psychology, criminology, and social work, to produce knowledge for state and philanthropic funders of 'what works' in addressing complex social problems and to guide investment strategies for children living in care, experiencing abuse and neglect, and offending.

At the time of writing, the relationship between neuroscience and child welfare is also at a high, with a number of well-known child welfare charities, such as, for example, the now closed Kids Company and the Early Intervention Foundation in the U.K., drawing heavily on physicalist understandings of the child (e.g. a damaged brain) to shape fundraising and legitimise intervention strategies. Such approaches to shaping child welfare remain controversial for privileging one research design, the randomized control trial, as the 'gold standard' of knowledge creation, and for excluding other ways of creating knowledge and learning about children's lives, what effects them, and how children and their significant others create protective relationships and experiences. Many social problems that children face which compromise their welfare, as well as the various therapeutic and community approaches that have been developed to respond to those compromises, do not lend themselves well to experimental designs that ignore the major structural issues (e.g. poverty) that contribute to chronic social problems.

Finally, understanding children's views and experiences are increasingly

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implicated in the practice of child welfare. While the details of children and young people's lives have to a greater or lesser extent fascinated social researchers as noteworthy experiences in their own right, the introduction of children's rights discourses in the early 1990s as a result of the establishment of UN Convention on the Rights of the Child in 1989 and its subsequent ratification globally (with the exception of the U.S., South Sudan, and Somalia), lead to burgeoning of societal approaches to understanding children's welfare from the child's perspective. Children's rights have ushered in critical and radical approaches such as recognition theory and social justice perspectives both in child welfare research but also, and perhaps more importantly for children, in everyday child welfare practice. A child's right to be consulted and involved in decisions that affect them, has shaped thinking of children's welfare over the last 30 years (however, problematic, at times partial, and other times incongruent with expert views of the child). Such an approach has seen the rise of children's advisory groups at all levels of child welfare policy and practice, of monitoring and evaluation of service design and delivery, and of more child-focused curricula in the training of social workers. Where the involvement of children is successfully practised, children themselves become co-constructors of knowledge about their lives and co-designers of appropriate support systems for difficult times.

Children's experiences with child welfare services

Engaging with children's experiences of child welfare bring a further angle to our understanding of the topic. A study by Elsbeth Neil who looked at the experiences of children in the UK who were placed for adoption under the age of four, suggests

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that children are active in making sense of their experiences; while some children had not yet started to think about their adoption others found it unproblematic. At the same time, half of the children in the study, associated their adoption with complicated emotions of loss, sadness, and rejection by birth families and such tensions were exasperated when adoption broke down. The research shows children experiencing and navigating a pull to be with their birth families, especially mothers, even as they know the impossibility of such an outcome, and the push to find belonging with new families.

Other research by Julie Selwyn and colleagues for the UK government explores what happens 'beyond the adoption order'. The research shows that children and young people are often not involved in the decision-making processes in the run up to adoption and feel excluded. Such research also shows the ways in which being adopted might impact on other parts of a child's life especially where the match has been precarious and disruption in the adoption has been experienced by the child. Research of children's views of institutional care also provides a nuanced picture of the ways in which children experience care away from birth families. In one study by Evelyn Khoo and colleagues, children in one Mexican institution described the place as 'almost home' and 'almost family', at the same time as children highlighting their everyday temporalities (school, homework, sport, and extracurricular activities) which hardly differed to those of peers living with their birth parents.

Children are also providers of care. In many parts of the world, and in sub-Saharan Africa in particular, relationships of care have been reversed on account of epidemics such as HIV/Aids, and many children and young people end up caring for their parents. Morten Skovdal's extensive research in the region reveals children and young people's various strategies for balancing growing up, family relationships,

managing a household, nursing, and providing palliative care for chronically ill and dying parents as these experiences unfold in a particular moment in children's lives as well as across time. Insights like these into children's lives can help to provide services and organise social support that is more likely to resonate with children and young people.

Paying attention to children's experiences of their own welfare can challenge received wisdom and usher in new ways of thinking about child welfare. For example, programmes designed to support children and young people who have experienced domestic violence have long held that part of the psycho-educational message conveyed to children should be that they are not to blame for the violence typically experienced by their mothers. However, the most comprehensive study of children and young people's perspectives of domestic violence carried out by Audrey Mullender and colleagues suggests that efforts around reducing self-blame are probably misplaced. The children and young people participating in that study where quite clear about where blame should lie - with the perpetrator(s), and demonstrated age-determined understandings of the power dynamics they had experienced in their family homes.

Research on children's economic and social capital contextualises the importance of wider social and cultural participation, as well as the role of friendships, family and community, in children's welfare. Tess Ridge's research on children living in poverty describe themselves as 'not having enough money' and report that inadequate family income curtailed their participation in cultural life with their peers (e.g. through the consumption of goods and services), as well as being responsible for inadequate housing (e.g. overcrowding) and stress on family relationships. Ginny Morrow's work, also in the U.K., shows how children's

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relationships, their family and friendship networks, as well as where they lived, mediate their well-being with close friendship groups and mothers key in providing emotional support. Moving home had the potential to disrupt supportive friendship networks but living across two homes (e.g. in the case of divorce) was not considered disruptive by the children who reflected on the multiplicity of relational and material resources that offered (e.g. two of everything). Nevertheless, and despite informal experiences of participation in family and community settings, as in other studies, children reported unsatisfactory experiences of participation in institutional decision-making practices such as school councils, which were deemed by children a good idea poorly implemented and with little impact. Taken together children's views and experiences suggest that *both* relationships and the contexts in which they are lived out, are important and shape their lives. For practice, such findings would support the further development of what Anna Gupta calls 'poverty aware practices' within a more social model for social workers and social support.

Sevasti-Melissa Nolas, Goldsmiths, University of London

Cross references: adoption, abuse and neglect, sexual exploitation, mental-health, participation, provision, child poverty, child protection, childhood publics, photo-voice, well-being, young carers.

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