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By Student
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Editorial

Welcome to Issue 7 of Spark.

Welcome to Issue 7 of Spark. This is a short special issue of papers from students of Early Childhood Studies studying at Level 4, Level 5 and Level 6. We hope you find this edition interesting and we are looking forward to hearing any comments you have about this issue of Spark.

Victoria Moss, Samantha Scott, Ashling Dodds, Ellie Webb, Sarah Yearsley (Student editors)

Education and Early Childhood Studies

We would like to thank out-going student editors Victoria Moss, Samantha Scott, Ellie Webb, Ashling Dodds and Sarah Yearsley. Their commitment and contribution to Spark has led to publication of three issues this year as well as the development of a handbook for new student editors. If you would like to get involved as a student editor please contact us via A.Daly@ljmu.ac.uk or D.C.Gallard@ljmu.ac.uk

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Sarah Burgess

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The Experiences of Children as a Result of War and Conflict

This piece will critically examine childhood in the context of war and conflict; looking specifically at the current crisis in Syria. Many key issues arise as a result of conflict; including, loss of life, loss of homes, destruction of public services, poor living conditions, poor physical and mental health, lack of education, money and food (Pherali, 2014). UNESCO (2012) profess 35% of people in Syria are aged 14 years and younger; meaning there is an inevitable, large-scale impact on children. Throughout this paper, I will discuss the effects on education, health, and wellbeing in detail; as well as the potential long-term consequences. Additionally, I will discuss international support and interventions which have been established and assess their effectiveness.

Children are viewed differently in different societies. In many Western countries, children are viewed as dependent and incompetent. This differs greatly from some cultures, where children begin to work, marry, and start families from an early age (Montgomery, 2013). As a result of this vast differentiation between perspectives of childhood, it is difficult to observe other cultures in a non-ethnocentric manner. Ethnocentrism is a term used to describe the use of peoples' own ethnic or cultural values and standards (language, customs, and religion) to judge another culture (Wagner, 2009). Using this theory, one can surmise that certain types of intervention in warzones may not be entirely

appropriate or well received by the country in which they are placed. Therefore, international governments and organisations must take this into account and discuss what assistance is required within that culture.

Education and child welfare is highly regarded in Syria. The education system was once prosperous. It experienced the highest literacy rate in the region and the number of girls enrolled in school was almost equal to that of boys (Ford, 2014).

Moreover, UNESCO (2012) provides statistics which show over 90% of children in Syria were enrolled in school prior to 2010.

Despite this, only 30% of children had learning materials, such as children's books, at home (UNICEF, 2013). Additionally, preprimary education is uncommon; with only, approximately, 11% of children attending between 2008 and 2012 (UNICEF, 2013).

To provide a cross cultural agreement which supports all children, the United Nations developed an International Convention for the Rights of the Child. These comprehensive rights aim to support and protect every child under the age of 18. Article 38 within the treaty states governments should do all that is possible to protect children during periods of war/conflict. It states no person under the age of 18 can be forcibly recruited as a child soldier. Additionally, article 22 states refugee children have the right to special protection and support by their host country and international organisations (UNICEF, 2014). However, children's rights are often overlooked by fighting parties in warzones (Pherali, 2014).

In warzones, many children witness violence; this can have a long term impact. Palaiologou (2008) discusses the relevance of the work of Bandura conducted experiments where children observed adults displaying either violent or non-violent behaviour. Children who had observed adults modelling violent behaviour were more

likely to act violent and aggressive themselves. Fleming (2014) concurs by stating if children who have witnessed the violence of the Syrian conflict are not educated and rehabilitated, there will be a cycle of violence for generations. On the other hand, it could be argued that just because children witness violence, it does not mean that they, themselves, will display those behaviours. Bronfenbrenner outlined an ecological approach which proposes different structures around the child work alongside and impact one another to influence children's values and view of themselves (McDowell-Clark, 2010). He proposed children's immediate family are the most influential social structure around the child. This insinuates parents' values and actions within the war will influence their child's perspective most.

Wars and conflicts occur for many different reasons. Taydas, Enia, and James (2011) propose the causes of war cannot be determined as one thing, but they are a complex accumulation of many reasons. There must be plausible, potential gains which outweigh the possible loss (Levy, 2011). Speier (1941) acknowledges political issues, such as corruption, are often triggering factors in the onset of war. War can be categorised by its motives (e.g. war of residence/independence or civil war against governments or military powers). A more common type of modern warfare is war against terrorism (Pherali, 2014).

The conflict in Syria began to grow in 2011, when pro-democracy supporters began to protest against President Assad's authoritarian leadership of the country. Since then, the violence has grown between Assad's supporters and opposition, with over 190,000 people estimated to have been killed so far (Rodgers, Gritten, Offer, and Asare, 2014). Men, women, and children fled from their homes to avoid the violence, which has left many civilians injured or dead and destroyed countless homes. These families have either been internally displaced or have sought

refuge in countries including: Jordan, Lebanon, and Turkey. There are currently 3,206,525 registered Syrian refugees (on 16/12/14), (3RP, 2014); nearly 40% of which are under the age of 11 (UNHCR, 2014). Many of these families live in cramped, makeshift camps with little sanitation, food, shelter, and no education or health systems.

War and conflict can have countless effects on children. They are often involved in child labour, begging on the streets, condemned to early marriage, trafficked, or even recruited as child soldiers and trained to kill (Brown, 2014). Pherali (2014) asserts it takes a minimum of 15 years for a country to overcome the physical effects of war. However, Akbulut-Yuksel (2014) found that the detrimental effects on people, especially children, can last for generations.

Mansour and Rees (2012) opine the effects of war can begin prior to birth. There are significant correlations between children born in warzones and low birth weight; especially when mothers have recently experienced loss. Young children born prior to the onset of war are also more likely to be below average weight and height in adulthood (Akresh, Bhalotra, Leone, and Osili, 2012). This may be due to stress, malnutrition, and lack of healthcare services (Akbulut-Yuksel, 2014). This information was acquired through large scale research programmes, investigating children from warzones in Ethiopia, Palestine, Germany, and England. It, therefore, provides a vast cross section of children from different cultures, time periods, and who have experienced different types of conflict.

Furthermore, conflict can have long lasting economic effects and often leaves many families in poverty. This is due to loss of resources, jobs, homes, infrastructure, and poor health.

Additionally, the impact on schools causes children to grow up

uneducated; thus reducing their potential earnings in adulthood, (Akbulut-Yuksel, 2014).

In addition, families in Syria are said to be living in constant fear of attack (Rodgers, Gritten, Offer, and Asare, 2014). There is a large scale, detrimental psycho-social impact. Jones (2014) discourses many require mental health support. One of the most prevalent anxiety disorders which people effected by war suffer from is Post Traumatic Stress Disorder. This is an umbrella term which includes a number of negative responses following traumatic events. Some symptoms include: disturbed sleep; flashbacks; uncharacteristic anger/aggression; detachment from people, interests, and activities; hypervigilance. Symptoms are often chronic and acute and affect children's everyday lives (Piotrowski and Range, 2014). Qouta's (2010) research found that the only factor which could protect children's mental health throughout war and conflict is their mother's firm belief in the cause. However, Wollaston (2014) converses with Syrian children whose parents have a firm belief in the cause. He found these children were still suffering, had lost hope and happiness, and were living in constant fear. The Red Cross has launched a programme which aims to provide emotional and psychological support for men, women, and children affected by the Syrian conflict. They are providing funding for trained experts to provide specialised counselling, designed to help people cope with trauma and rebuild their lives (British Red Cross, 2014).

Chan (2014) opines many hospitals and health professionals have been directly targeted throughout the violence; with 57% reportedly partially or fully closed (WHO, 2014). Professional support for pregnant women is much less readily available; as a result complications in childbirth are more likely to result in death or permanent harm to mother and/or child. Moreover, pharmaceutical companies have been greatly affected, resulting

in shortages of essential medication (such as that prescribed for cancer, diabetes, and infections). Likewise, immunisation programmes have been affected as a result of the conflict. Evidence of this can be observed in the returning of Polio to the country for the first time in 14 years (Jones, 2014). In 2013, UNICEF, the World Health Organisation, and Syria's Ministry of Health began to work together to provide 2.4 million children with vaccinations against measles, mumps and rubella, polio, and other preventable disease (Rashidi, 2013).

Additionally, the World Health Organisation is providing health supplies, medical equipment, nutritious food, and medical professionals. They have launched a response plan designed to help those in need of humanitarian assistance in 2015. They will place a particular focus on those living in rural areas; many of whom have to travel up to 160km to the nearest hospital (WHO, 2014). Similarly, UNICEF has developed a 'WASH' programme, designed to provide children with safe drinking water, sanitation, and hygiene facilities (UNICEF, 2008).

Education is an incredibly valued commodity worldwide; especially to children who have experienced conflict and loss as it provides them with hope for their future. Education systems often come under attack during periods of war and conflict. This may be because organisations regard them as tools for the opposition to gain power; if civilians are uneducated, they are vulnerable. Some are also destroyed in support of communist idealism. In more violent warfare, schools have been attacked because they are regarded as sanctuaries for children and families; they provide hope. This instils a great sense of fear in communities; thus enhancing organisations' control (Pheralli, 2014). Furthermore, female education comes under attack in some warzones. In Pakistan, Malala Yousafzai was shot by Taliban militants for campaigning for females' right to education. In the region in which

Malala lived, the Taliban had destroyed many girls' schools and attacked girls who still attended. The constant threat of attack stopped many girls from attending school (Husain, 2013).

It is claimed that educating the children of Syria is the only way to rebuild the country (Fleming, 2014). If the children of Syria are left to grow up without intervention they will grow up uneducated, unskilled, and incredibly frustrated; thus creating a generational cycle of violence. Schools have been targeted in attacks across Syria. More than 4,200 have been destroyed; leaving many children without means of education (Ford, 2014). Furthermore, Fleming (2014) claims only 1 in 5 Syrian refugee children in Lebanon attend school. This number drops to less than 1 in 10 as children reach secondary school age. This is largely due to lack of availability of schools and teachers.

The United Nations have developed the initiative, No Lost Generation, designed to support children affected by the Syrian conflict. It has raised hundreds of millions of pounds which is being used to fund education, child protection, and counselling services for children in Syria and countries of refuge. As a result of this initiative, the number of children attending schools has increased by over 300,000 from 2013-2014. However, this level of funding has been deemed inadequate as it does not reach enough children. This year, over 2 million Syrian children remain unenrolled in schools (Ford, 2014). Brown (2014) professes host countries are endeavouring to provide refugees with an education in their countries. Teachers are working double shifts to ensure Syrian children are educated, alongside local children. However, these children experience great stigmatisation within their communities and schools. The trauma they experience as a result often forces children to leave school; leaving them, once again, with no means of education.

Qouta's (2010) research into children involved in the Palestinian conflict found that, in general, experience of war had no long term effects on children's intelligence and creativity (if they remained in education). However, children's concentration, memory, and attention were found to be effected. Children who were passive or had experienced low-level trauma were found to have reduced levels of concentration, memory, and attention. Conversely, children who had experienced high-level trauma were found to have heightened concentration, memory, and attention. This insinuates that high-level trauma focuses children and improves their cognitive abilities. Despite the definitive results of this study, the effects on children experiencing different types of conflict, of different cultures, and on those who do not attend school during conflict have not been investigated.

In conclusion, war and conflict can have many detrimental effects on children of all ages. Their education and, therefore, future employability are effected greatly due to the loss of schools and displacement. In turn, this increases families' chances of falling into poverty. Additionally, the loss of medical services has impacted upon children's health and wellbeing. Many have developed psycho-social disorders as a result of witnessing violence and destruction or experiencing the loss of loved ones. Numerous international organisations are working together in an attempt to assist children in overcoming the trauma they have experienced. Moreover, governments and individuals are donating large sums of money to support these organisations in their plight.

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Gabriella Newman

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Compare and contrast a range of early year's settings in the UK focusing on one type of early years provision in England to explain in detail how policy has influenced this provision

Within this paper it is intended that a wide range of early years settings will be discussed, alongside targeting on one type of early years provision specifically within the United Kingdom in detail to explain in more depth about what this provision is, and how it has been influenced by policy. Policy is important as it is a framework that we are required to work within, and it is often considered incontestable because both the public and practitioners feel powerless to challenge it (Pugh and Duffy, 2013). The main provision which will be focused on in detail in this essay is the Sure Start children centres programme, which was introduced by the Labour Government, through their policies towards child development and early years education during the 1990s. This radical change toward a more childcare focused government policy is due to the rise in high availability of different provisions, and a clear establishment in the early childhood programme (Pugh and Duffy, 2013).

Throughout the UK there is a wide range of provisions for early year's children. Examples of some of these could include, day nurseries, playgroups and pre-schools, registered child-minders, out of school clubs, holiday schemes, family centres, nannies, and crèches. Arguably, there was very little provision for early years before 1997, and the introduction of the National Childcare

Strategy in 1998, which later led to the introduction of Sure Start children centres programme, began the transformation of better quality and accessible childcare within the UK (Miller and Hevey, 2012). However, this can be argued in many different ways due to the high demand for many different provisions for early years during modern times. Although many of these are not free for all children, other childcare provisions such as, crèches, and nursery schools offer well qualified and experienced staff, flexible hours and services, and a high quality with different professionals available. According to Pugh and Duffy (2013) the playgroup movement began in the 1960s due to the high demand of full day care to meet the needs of full-time working parents. Initially, this shows how the National Childcare Strategy (1998) did have a great impact on early year's provision within the UK, however other settings were already available for children who needed similar services beforehand.

The idea of Sure Start Children centres were first introduced under the Labour Government of 1998, through the Department of Education and Employment (DfEE) which introduced the National Childcare Strategy. Arguably, Sure Start's main aim was to target the poorer areas within the UK and concentrate on the very young children and their families (Miller and Hevey, 2012). The characteristics of a standard Sure Start children's Centre were initially well qualified and experienced staff with a high quality of different professionals available, along with flexible hours and services which were open to all children under four and their families. Besides this, Sure Start Centres within the UK are usually free to attend, supporting the Labour Government's approach of attempting to target poverty within the early year's settings. Arguably, when the National Childcare Strategy was introduced, the need for early childhood services grew in the period which followed (Baldock, 2010), showing that the

establishment of the Sure Start Children Centres (2004) was arguably what the UK needed within the childcare sector at that particular time. When Sure Start was initially established it ran 250 programmes which involved 150,000 children. Arguably, Sure Start also brings a range of services under one institution, as "there was a strong emphasis on avoiding the stigma associated with highly targeted social programmes... ensuring generous resources were aimed at the poorest areas" (Miller and Hevey, 2012, Pg. 17).

Ultimately, Sure Start's main aim is to improve the outcomes for all children within the early year's age range, alongside their families. This integrated service better meets the need of all families to provide intervention for children with additional needs (Baldock, Fitzgerald and Kay, 2013). However, in the last decade Sure Start children's centres have started to become less frequent in many areas due to some disadvantages in the overall policy and the services that they provide. An evaluation of Children's Centres by the National Audit Office (NAO) in 2006 showed that fathers, ethnic minorities, and children with disabilities were not yet allowed access to all services which were meant to be enabled free access for everyone across every centre in the UK (Baldock et al, 2013). It was not until the Coalition Government came in power in 2010 that it led to closure of over one hundred and twenty-five centres. This led to the new coalition government expressing stronger obligation to addressing issues of child poverty through better quality targeted childcare (Miller and Hevey, 2012).

Through my own experience I have been involved with several early year's provisions, including child minding services, nursery settings, and an out of school scheme. In comparison to the Sure Start Children Centres, the out of school club which I was involved in invited children from ages four to six to attend.

Alongside this, the organisation was not free for the children to attend, as it was seen as an extra curriculum activity for the young children's parents or carers to allow them to attend. Sure Start was later developed and changed through the Childcare Act (2006), however the out of school club which I was involved in was effected by the 2007 Children's plan, which effectively met the needs of the parents. Baldock et al (2013) argued that this was to intentionally make schools the heart of the community and integrate other services around these schemes, such as the one I was involved in. Furthermore, this would hopefully improve services for both children and parents as it gave full time working parents more free time, while they knew their children were being looked after to a high standard (Baldock et al, 2013). The facility within which I was involved also had members of staff who were of a high quality, however these people were volunteers from the surrounding community and therefore were not as qualified and experienced as those involved within the Sure Start programme. However, many of their own children attended the group and it was clear to see all of the adults were very professional and had a clear rapport with every child within the group. However, it was also shown that those attending the group were from a high working class to an upper class background and therefore did not fit into the category of which the Sure Start Children's Centres were arguably trying to diminish. According to Pugh and Duffy (2013) the main aim of both the Green Paper and Children Act (2004) was to improve the success rate of all children.

As previously mentioned the two main policies which affected Sure Start Centres within the UK were the National Childcare Strategy (1998) and the Childcare Act (2006). The policies which came with the National Childcare Strategy linked closely to the development of the Sure Start Centres as its main aims included; twenty-five early excellence centres, neighbourhood nursery

programmes, and OFSTED inspections of nursery places for four year olds (Baldock et al, 2013). Similar to this, the Childcare Act (2006) led to the development of children's centres throughout the UK, which was influenced by an early intervention programme in the United States forty-years ago, called Head Start. Another main policy which influenced change within the UK policy which also links very closely to the change and development of the Sure Start Children's Centres within the UK is the Early Years Foundation Stage (EYFS), which was introduced through the Labour Government of 1997 to 2010. The Coalition Government which came into power during the spring of 2010 introduced the Families in the Foundation Years (2011) which set up proposals for a refurbished Early Years Foundation Stage through the Tickell Report (Pugh and Duffy, 2013). This linked closely to the development of Sure Start Children's Centres within the United Kingdom as it mainly focused on children's development, linking parents and carers within the settings, working with professional staff, and working alongside the education sector. Arguably, the EYFS influences Sure Start children's centres as it is the leading framework for early years within the United Kingdom, and it "sets the standards that all early years providers must meet to ensure that children learn and develop well and are kept health and safe" (DfE, 2014, pg. 5).

Another policy which has influenced Sure Start children's centres is the Birth to Three Matters framework, which was introduced in 2003. The Birth to Three Matters is "a framework of effective practice for those working with children aged birth to three issued by the Department for Education and Skills (DfES)" (Baldock et al, 2013, pg. 170). David et al (2003) state the framework integrates young children's development into an emotional and social context. Arguably, there are four main areas that the Birth to Three Matters framework focuses on, these being a strong child,

the skilful communicator, the competent learner and a healthy, active child (Johnston and Nahmad-Williams, 2008). This is true when looking at the framework alongside the Sure Start children's centres of today as they help develop children's early independence through a variety of different classes and settings. Alongside this, Sure Start children's centres also have onsite nursing facilities, which links to the healthy, active child, as well as the strong child. Arguably, Sure Start children centres also offer a range of effective schemes which help children and adults alike who are suffering from extreme cases of economic and social difficulty (Lochrie, 2007), which is linked directly to the Birth to Three Matters framework and its focus on children's development within an emotional and social context. The Birth to Three Matters framework was effectively replaced by the Early Years Foundation Stage (EYFS) in 2008. Baldock et al (2013) states that the five aims shown within the framework were generally effective when assessed within an Ofsted Report in 2008.

In conclusion, Sure Start children's centres have changed distinctively in the last decade. The three key policies which have been shown to have affected the Sure Start children's centres the most are the National Childcare Strategy (1998), the Childcare Act (2006) and the Birth to Three Matters Framework which led to a revised Every Child Matters policy in 2003. All of these policies link closely with the Early Years Foundation Stage (EYFS) which, through the Labour Government and consequent Coalition Government in 2010, has had a great impact on the introduction and following development of the Sure Start children's centres within the UK. All of the above policies have been shown to affect the children centres scheme in some progressive way. For example, the National Childcare Strategy updated many of the old children centres schemes and policies, directing them to focus

primarily on the areas of socio-economic deprivation and effectively abandoning the universal service which it had previously promised. In addition to this, the Childcare Act (2006) was the development of childcare centres which introduced the prospect of having a Sure Start programme within the UK, mirroring the United States of Americas successful system of Head start. Finally, the Birth to Three Matters framework brought

together aspects within the community to allow for a universal

system of benefits, which had also been promised through the

Sure Start programme.

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The role of heredity and environment in human development

According to Every Child Matters (2012) children exposed to particular risk factors are more vulnerable and these issues can be rooted to the background of their parents, their environmental situation and attributes of the children themselves. Thus, considering the nature vs nurture debate, known as the transactional approach; it is a question of what determines how a child is to grow up, the genes the child is born with or the influence of their family, school and community. The transactional model was founded by Sameroff (1970) and it looks at the interplay between the child, personality experiences and their social and community resources (Sameroff, 2009). Children are exposed to many risk factors that may influence their development in life; development can be defined as the process underlying the change in capability and growth in the child. Some risk factors that might cause this are premature births, divorce and separation, and fostering and adoption. One of the main expected needs in typical development is that of attachment, the attachment theory which originated from John Bowlby in1958. Attachment is a strong and lasting emotional bond that connects one person to another. A baby needs a sense of security and emotional attachment. However, due to some risk factors this attachment cannot be established to its full potential resulting in the child developing atypically. Typical development in children gives a generic picture of progress compared to the same age peers; however, children who are exposed to risk factors do not

necessarily follow the same developmental stages as others. As a result, Holmes (2013) stated that children who either fall behind or jump ahead of typical peer progress, in areas such as physical, cognitive, social or adaptive life skills; are known as developing atypically. But it is to be noted that each child is a unique individual and therefore different.

Prematurity and other complications during pregnancy and birth are linked with a prominent threat of foetal and neonatal death is usually caused by injuries sustained by the central nervous system (Herbert, 2003), thus, bringing forth the first risk factor. As a foetus, the baby is already connected to its mother and so is influenced by the mother's mental and physical wellbeing. If a baby is born earlier than expected then it has been said that they are more likely to be vulnerable to organ injuries, death, chronic illnesses and neurodevelopmental disabilities (Behrman and Butler, 2007). It has been alleged (Goldberg and Craig, 1983) cited in Herbert, 2003 pg 64) that 20% of all premature infants are born to adolescent girls and that around half of premature births are due to hasty preterm labours but the exact cause of premature birth is not apparent. There are, however, many risks that can be taken into account when talking about premature births, these risks include; poor nutrition, maternal age, stressful life events, physical injury or trauma, smoking cigarettes, drinking alcohol or using illicit drugs (Mayo Clinic Staff, 2011). Women from deprived and low socio-economic situations are a predisposition to perinatal complications in which inadequate care has been taken whilst they were pregnant; this includes stress and malnourishment meaning they are more than likely to give birth to underweight babies. When a baby is born prematurely their development is instantly set back, the lower the birth rate the higher the potential the child has of having intellectual difficulties, problems with their stature, Sudden Infant Death Syndrome

(SIDS) as well as the possibility of having behavioural problems. It was stated by Fitzgerald, Karraker and Luster (2012) that the quality of parent to infant interactions further affects the infant's development of self-regulation and long-term outcomes. Premature children can also develop Respiratory Distress Syndrome (RDS) a few days after birth; 60% of babies that are born at or before 32 weeks suffer from this, although most survive with treatment. Some defects found in babies due to prematurity carry on into their later years, it has been noted by Luke (2002) that at the age of 5 years, more than one third of premature children were below the fifth percentile for established controls in weight; Imost one half were behind in height and more than one quarter were behind in both height and weight. It has also been alleged (Hall and Wolke; n.d; 6) that children were more than likely to show a high level of emotional problems between the ages of 6 to 13 if they had been born prematurely. Studies have shown (Kelland, 2012) babies who were born prematurely are at a much higher risk of developing mental disorders such as bipolar disorder and depression, researchers believe that the increased risk could be down to the little but important differences in cognitive development in babies who are born before the full 40 week gestation period. While this is a prevalent issue, Melnyk (2009) has stated that as long as developmental delays are spotted then there are many interventions can help with most premature babies. Although born early they do catch up, they just take a little extra time.

The second risk factor to be looked into is the consequences of divorce and separation on the development of children. Divorce is a difficult process to go through for parents but it is more than devastating for the children. Frequently children do not know what is happening and the uncertainty can cause disturbances, which may surface and may need attention in the future, divorce can

cause chaos and in chaos everyone suffers. Bienenfield (1987) stated that many children do not get to express their pain, frustration and anger the way their parents may get to. How a child's temperament is changed or enhanced is solely reliable on the types of experiences they go through, divorce often results in the children feeling useless, confused and isolated. It is more than likely (Herbert, 2009) that many children today are involved reluctantly in the before and aftermath of a divorce. On a whole children do not want their parents to separate and they may begin to think that their parents have not taken their feelings into account. For a child, according to Pickhardt (2011) divorce unsettles trust dependency on the mother and father who now act in an undependable way. Divorce and separation divides the family unit in which the child must then learn to transfer between one parent and another. If parental separation is handled correctly then any unfavourable effects can be reduced but with that being said if it is handled poorly and arguments are seen by the children it could have some seriously damaging effects. According to Thambirajah (2007) research demonstrates that poor family relationships and parenting are influential in reducing the risks of the chances a child has in having success later in life. Generally, children of separated parents will encounter greater poverty. One Plus One (2012) have stated that studies have shown that children whose biological parents have separated have poorer outcomes, in terms of emotional, social and cognitive development. Robber (n.d) states that following divorce, children are 50% more likely to develop health problems and develop psychological issues, compare to children that come from homes that have suffered loss through death. As in Erikson's theory of the 'Eight Stages of Development', Guttman (2008) states that the feeling of trust versus mistrust is the initial conflict that a young child faces and with divorce, which involves a child watching a breakdown between their parents most significant and intimate

relationship, means that dealing with this breakdown is crucial for the child to be able to build trustworthy relationships in the future. On the other hand, it has also been said (Bowden and Greenberg, 2010; 35) that not all children will inevitably suffer long term harm from breakdowns of family relationships and that if there is a good relationship between parents then most children are able to re-adjust to the new family situation. Furthermore, Mayville (2013) asserts that research has shown that with correct parenting strategies, parents have the ability to positively affect their child's mental health and well-being following a divorce.

The next and final risk factor to be discussed is the consequences on development for children who have been adopted/fostered. A baby's first cry is the initial call to its mother. "The adoption method separates the effects of nurture and nature by studying adopted apart genetic relatives (to assess the role of genetics) and by studying genetically unrelated individuals bought together by adoption (to assess the role of family environment" (Herbert, 2011; 119). It has been noted by Child Welfare Information Gateway (2006) that over 250,000 children are to enter foster care within any given year. Leathers et al (n.d) stated that for many of these children, adoption is likely to provide placement stability and long-term family ties that are not provided by foster care, especially when children are placed with nonrelatives, which is the case for 76% of foster children. According to Kail (2013) dealing with attachment is difficult; foster parents want to provide safe and protected homes however, it is possible that they will not have the child long enough to be able to ascertain continuity. In addition, because children in foster care have not been able to form attachments, they are less likely to form ones that will not be broken. There are a lot of social and emotional impacts on a child who has been adopted, children develop a sense of who they are and much of this comes from their families and from the

relationships they have with people in their lives. However, for an adopted child (Child Welfare Information Gateway, 2009) creating their identity is a lot more difficult. Many will struggle with selfesteem issues and think about reasons why they were adopted; these emotional issues can interfere with their education. Many children who have been adopted show a complex group of challenging and difficult behaviour within the home, school and the community. It has been argued (Lansdown, Burnell and Allen; 2007; 53) that the common link of the difficulties and their solutions is in the inter-subjective experience of the mother and the child pre-birth. Bowlby's attachment theory according to Robinson (2011) emphasises the child's primary need for feelings of security and safety which go further than the physical and into the areas of the child's mental health and their emotional wellbeing. For that reason, Brodzinsky and Schecter (1990) alleged that fostered and adopted children need support that will help them develop the ability to control their emotional experiences and then re-programme their neurological prototype so that it will help them manage better in complex and changing environments that they will face daily.

And so to conclude, the terms nature and nurture are used for the roles of heredity and environment in human development.

According to Powell (2013) scientists believe that people behave as they do due to genetic predispositions and this is known as the 'nature' theory of human behaviour but on the other hand, other scientists allege that people think and behave in a specific way because of how they are taught to do so, this is known as the 'nurture' theory. Whilst a child's genes may increase the chances that they will behave in a certain way, it does not make them do things, which means that children still get to choose what they will grow in to. Personality as an example is a heritable trait that is often studied in twins and adoption. If environment (Sincero,

2012) did not play a part in verifying an individual's behaviour, then identical twins theoretically, should be exactly the same but many studies have shown that identical twins are never exactly alike. However, Diffen (2013) argued that adoption studies also measure the strength of shared family effects. Adopted siblings only share their family environment. The studies showed that some adoption cases indicated that by adulthood the personalities of adopted siblings are no more similar than random strangers; this means that there are no shared family effects on personality by adulthood. These results, according to Diffen (2013), imply that "nurture" might not be the predominant factor in "environment". There are a lot of risk factors that children may be exposed to, risk factors that are due to either nature or nurture and these factors may make them fall behind or jump ahead in their development. It is important that these risk factors are kept to a minimum as much as possible so that the child can develop at the right stages. However as has been stated before by Brodzinsky and Schecter (1990) with help, children are able to reprogramme their neurological prototype so that no matter what risk factor they may have to face, if caught early enough the correct interventions can be put in place which will then help them to manage better in complex and changing environments that they will face on a daily basis.

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Services for Children and Families: Professional approaches and theoretical underpinnings.

"Every child should be kept safe, sadly not every child is" (Department for Children, Schools and Families, 2009 p.1). The protection of children and their families has always been a key priority for many leading professionals and is manifested through various government policies and campaigns. Timpson MP (2013) provides evidence which shows that between 2012 and 2013 there were just under 600,000 children in England who received help or were referred to local authority social services due to an increase in concern about their welfare. Reid and Burton (2013) emphasizes the importance of every practitioner keeping up to date with the current legal developments and policies in order to provide the best quality of care for vulnerable people. When the coalition government came into power they set up a number of reviews into services for children and families and vowed to improve these services. In this assignment I will analyse and critique government policies as well as focus on the theoretical underpinnings that make up the foundation for different approaches used by professionals on a daily basis who work with children and families. Mayhew (2004) implies the theoretical Foucauldian concept of 'Governmentality' stating that governments only try to produce citizens who are suited to accomplishing those polices created, however Rose (1996)

shows a conflicting idea and addresses that governmentality will only work if the individual is compliant and able to be governed.

By 2020 the Government has aimed to eliminate child poverty in the UK focusing primarily on reducing social exclusion and improving the conditions of deprived areas where a lower socio economic status is apparent (Judge 2014). However Karelis (2007) highlights the idea that most anti-poverty policies reflect those who are financially stable and policy makers should take the position of disadvantaged families and focus on short term goals rather than long term effects. With the main focus being placed on environment and how it influences the child this has links to Bronfenbrenner's (1979) ecological approach, explained by Watts (2009 p.504) as being similar to that of "concentric onion" peels" meaning the theory has many successive layers these being the microsystem, mesosystem, exosystem and the chronosystem, all of which explain ways in which the child is influenced by those around them. Eamon (1999) considered the idea that within the microsystem of the home the event of poverty has a negative impact on family dynamic including the child's socio emotional functioning because some parents may take out their frustration on the child resulting in inconsistent, and harsh parenting practices. This supports the developmental approach, explained by Zastrow (2009) as a way of encouraging social interventions to improve economic situations.

This approach involves the government being proactive and using their money in order to help those in need. Under Section 17 of the Children Act 1989 it highlights the duty local authorities have to promote and safeguard children who are in need. A way of achieving this was the announcement of Sure Start Centres in the UK. Glass (1999) highlights one of the main aims being to work alongside parents and children in particular those who are from disadvantaged backgrounds to promote all aspects of their

development and meet their needs through interventions and support services. However this went downhill in 2008 where political priorities changed and financial difficulties saw many budget cuts leading to the closure of Sure Start Centres and local authority support for many disadvantaged families. Swarbrick (2014) felt this was worrying and argues that hard to reach families may suffer as many viewed Sure Start Centres a place of safety and refuge for them. However in contrast, Woods-Gallagher (2014) saw the closures of these centres as an opportunity for more professionals to go into the home and work with families one to one. She believed that evidence is important in a context of budget cuts and policy change. A report by House of Commons (2012) found that leaders of these centres were more positive about the new way of working in clusters meaning the closure of individual centres and professionals all working under the one roof, which the Government sees as a beneficial way of reducing admin costs and a way to ensure a range of professionals with different skill sets are at close proximity.

Many professionals including family support workers use empowerment which is a strength based approach in order to find the best route for a family. Lee (2013) suggests that this approach differs from most others as it focusses on the positive as opposed to the systematic approach which tends to focus primarily on the shortfalls within the family in order to avoid a crisis intervention. Empowerment interventions advised by professionals may include parents going to different classes or counselling to work with other appropriate professionals for support. However it is imperative the correct support be given primarily Barlow and Jones (2014) developed this idea when they suggested that approaches to supporting parenting needs to take account of parents needs first. It is important to deal with the most serious issue first as parents are not going to be willing to learn if their

own personal issues such as addiction or a mental illness are not treated first and foremost. Furthermore Jones (2014) states that the empowerment approach is about encouraging families to think of different ways of thinking and not just about doing things for them and to empower the family to work together and build confidence with the help of the professionals. Theoretically this relates to the Vygotskian theory of learning as well as his idea of scaffolding. Seghal (2005) suggests that social interaction between others and the ability for them to learn skills through guided participation has a profound influence on cognitive development. Seghal expands on the contrast however of Piaget's theory of cognitive development which suggests that development is a goal which leads to an endpoint whereas Vygotsky believed that individual development can be analysed and focusses more on the process and journey instead of an end product to be obtained.

Greene (2011) implies Rogers (1961) theory of personality development which explores the humanistic viewpoint and supports the strength based approach, suggesting that everyone has the potential and inner drive inside them but their improvement is dependent on the way an individual views themselves. From a Rogerian perspective, professionals should facilitate suitable conditions where families can feel safe to explore and reflect upon their own personal experiences. This gives individuals the opportunity for self-actualization and promote positive self-regard and value. Thyer, Dulmus and Sowers (2012) explains that the Rogerian genuine respect that the professional has for their client allows for the client the opportunity to take the lead within the working relationship by permitting them to choose the topics of discussion, methods and counsel their own intervention. The professional must apply accurate empathy when appropriate as this employs a better

balance of power between the family and the professional working alongside them. Ewen (2013) states that self-actualisation is similar to actualization in regards to the Rogerian theory however it does not become noticeable until the individual feels psychologically safe and their esteem partially enhanced.

Ewen (2013) highlights the idea that self-actualisation is only found in people who are older, as the younger generation are developing their own sense of identity. These needs described as the individual 'preparing to live'. Maslow (1987 cited by Theis and Travers, 2001 p.25) describe self-actualised people as those who are real, not caricatures meaning that they have a sense of awareness and have an accurate perception of their reality. Furthermore, Greene (2011) states that Maslow outlines personality differences being a key point in whether the individual reaches their full self-actualisation potential.

One of the most frequent assessment tools used is the Common Assessment Framework known as 'CAF' which is outlined in the Children Act 2004 in particular Section 10 inter-agency cooperation and Section 11 Safeguarding and Promoting the Welfare of Children. Barlow and Jones (2014) emphasises within family support early intervention is crucial and not to be overbearing, she states that "it is all about our approach, they can refuse us but social work is a statutory service and it is then out of our hands". The CAF is completed by the professional working with the family in the first few weeks of contact which identifies specific strengths and weaknesses and takes a holistic approach of looking at the family. This supports the early intervention approach, ensuring professionals notice the earliest possible signs of a child being at significant harm or risk, and can put measures in place in order to support them. Quayle (2014) states that "intervening early leads to better outcomes, and if the intervention is too late this would then go to Level 4 and social

workers would take over, which is something we aim to avoid". Brandon, et al (2006) cited in Turney, et al (2011 p.3) explains that one of the main reasons the CAF was introduced was to change the stance of professionals focusing on the difficulties that children and families are facing and be able to put preventative measures in place to stop these from occurring.

Adamson and Deverell (2009) however contradict this point as they suggest that professionals have found that the completion of CAF does not guarantee that supplementary needs will be met as this is dependent on resources and funds available to them.

Easton, Gee, Durbin and Teeman (2011) explore the findings from The Local Authority Research Consortium 'LARC' in regards to the benefits of CAF include many improvements to child engagement education and that also it leads to better outcomes at lower costs.

By way of illustration, Schreiner and Sherraden (2004) assert cost-effectiveness analysis as being an essential way of evaluating different interventions as it is implied that by spending time with one client takes time from another client. This method compares outcomes with costs however highlighted by Woods-Gallagher 2014) when discussing interventions "it is often payment by results with the need to prove we can save money in the long term". This in practice is cost benefit analysis which places a monetary value on the increase in well-being, being a result of the changes in savings.

During Government reviews it was apparent that there was a desperate need for professionals to work and communicate more effectively with one another on the front line. The highly applicable green paper Every Child Matters was published in 2003 after the tragic death of Victoria Climbié, where many social workers and other professionals failed to prevent her death.

Garrett and Lodge (2009) examine Lord Laming's 2003 report where he says that integrating professionals through multidisciplinary teams was one of the key points to work on and enhance in order to prevent another failing on behalf of a child. This child centred approach uses multi agency working as a way of protecting the child allowing their voice to be heard and has shown many advantages to improve real life chances of children and young people who use a variety of social care services. However, multi agency working is not a new way of working and has been re-evaluated many times through the development of government policies.

Parton (1985) suggests a case study of a 7 year old girl Maria Colwell who was killed by her stepfather in Brighton in 1973 despite multiple interventions from social services, caused moral panic within staff which then led to a number of policy changes including the introduction of multi-agency case conferences and formal reviews, which are still used today only under different terminology. According to Woods-Gallagher (2014) she has witnessed times when "lots of different professionals are put in the same building for multi-agency working, but all they are actually sharing is the toilets and the lifts, not the work". Furthermore she implies that there is an assumption that all data is shared however this is not the case and the lack of communication between different services can be detrimental to the outcomes of a child's future.

Theoretically this has links to panopticism outlined by Foucault (1977) where children can be seen as captive shadows being observed by adults looking for irregular or risky behaviour.

However the gaze of the professionals can be clouded as parents learn to understand the 'norms' that professionals are looking for in terms of child protection and safety and they can train children to adhere to these. Jones, Holmes and Powell (2005) continue to

say that adults may be more concerned about their own reputation and status that they disregard the needs of the child. By potential perpetrators using this panoptic gaze they can develop imaginative ways to become undetected by professionals and take advantage and control over what they want the professional to see. Woods-Gallagher (2014) accentuates this as she said "as worrying as the child who cries is the child with the frozen smile". This highlights social workers knowledge of child development and questions Bowlby's 1969 attachment theory mentioned by Ainsworth (1992) as he implied that interactions between parent and child had a significant role in their child's development and emotional attachments. Swarbrick (2014) claims that "social workers cannot monitor families", thus Foucault's panoptic gaze, it is therefore extremely important professionals communicate and collude on every visit had to the family in order to gain a true holistic view on family life and interactions.

Foucault (1970) cited in Waller, Witmarsh and Clarke (2011) studied ways in which professionals can accept their differences and work together cohesively. His theory that some professionals may feel threatened or overpowered by others focusses on the idea that scientific knowledge is given 'the stamp of truth' (p.145), meaning that in terms of a multi-agency approach to a Team Around the Family meeting for example, could give Children's Centre staff or a Nursery assistant the perception that the staff from the NHS are experts and their opinions are not as valid. Barlow (2014) states that "We use Team Around the Family meetings now where many professionals consult their ideas on interventions and what they think would be best for the family", however a Foucauldian lens implies that all members need to consider which 'regimes of truth' are affecting their practice as the

way things are written and spoken then can become objective and true.

Although professionals are trained in protecting the rights of the family and child, this can sometimes be conflicted with Government laws and guidelines which ultimately overrule their judgement. The Children' Right's Alliance for England 'CRAE' explores Article 3 of the UNCRC which states that professionals must make decisions which have best interest for the child at the core, however after further inspection in 2008 the UNCRC voiced concern that newly qualified social workers were in need of systematic and formal training as they did not have the adequate knowledge about the UNCRC to do their job effectively. Also by adopting a more child centred approach to social work means that the UK would reflect current international children's rights standpoints. According to local social worker, Swarbrick (2014) states that "social work is about interpreting the law on a daily basis", an example would be when it is acceptable to leave a child home alone. The law does not specify an age limit of when a child can be left unsupervised, however it becomes an offence when the child is purposely left at home and it places them at risk of harm or neglect. The National Society for the Prevention of Cruelty to Children (NSPCC) provides a list of guidelines for parents to use however professionals and parents can collide when judgement differs. Furthermore, Gast and Patmore (2012) found that within the Munro Report many practitioners complained that practice has become primarily focused on performance management criteria and compliance with guidelines rather than using these as a basis for creating strategies to help children more effectively.

To conclude, it is evident that government policies highly affect the way professionals work and this can be seen through the approaches professionals adapt when working alongside children and families. The voices of a variety of professionals are used throughout to explore different viewpoints. Finally, Lord Laming's 'Child Protection in England Report' cited within the Department for School Children and Families document (2009) highlights that the support received on the front line is what matters to families most and only a confident and strong workforce can make the best decisions and provide effective provision. This can be seen through Bronfenbrenner's ecological theory that the protection of children lies within a wider community and it is therefore everyone's role and responsibility to keep a child safe.

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Authors should ensure that their articles use

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Headings and subheadings should be in bold, aligned left and not underlined.

Quotations that are longer than four lines in length should be indented from the left hand margin and have a clear line space from the text above and below the quotation. The date and page number should be inserted at the end of the quotation

All references should be made using the Harvard system.

These guidelines are based on the Faculty Referencing Guidelines.