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Consolidating parenting skills in children's facilities

Wzmacnianie kompetencji rodzicielskich w placówkach dla dzieci

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Abstract

The content of this paper is a report on activities in children's facilities and their ability to influence parenting skills in terms of institutional childcare at an early age. Children's facilities (infant homes, children's homes and children's centres) provide comprehensive care for children and parents in cases where, for various reasons, a child's all-round development is disrupted or their life is in danger. The main purpose of these facilities is to provide adequate childcare as well as to support families when restoring basic functions. On the basis of a survey conducted in children's facilities, the most frequent difficulties in exercising parenting skills are identified, and subsequently, information on the extent to which children's facilities contribute to the development of parenting skills and help in the rehabilitation of a family is outlined.

Key words: child, family, parenting skills, institutional care

Streszczenie

Niniejsza praca stanowi raport z działań w placówkach dla dzieci oraz ich umiejętności wywierania wpływu na kompetencje rodzicielskie w zakresie opieki instytucjonalnej nad młodszymi dziećmi. Placówki dla dzieci (placówki dla niemowląt, dzieci i ośrodki dla dzieci) zapewniają wszechstronną opiekę dla dzieci i rodziców w przypadkach, w których z różnych względów kompleksowy rozwój dziecka jest zakłócony bądź jego życiu zagraża niebezpieczeństwo. Głównym celem takich placówek jest zapewnienie odpowiedniej opieki nad dziećmi, a także wsparcie rodzin w procesie odbudowywania ich podstawowych funkcji. Na podstawie ankiety przeprowadzonej w placówkach opieki nad dziećmi określono najczęstsze trudności związane z kompetencjami rodzicielskimi, jak również informacje dotyczące zakresu, w jakim placówki dla dzieci wpływają na rozwój kompetencji rodzicielskich i pomagają w przywróceniu rodziny do normalnego stanu.

Słowa kluczowe: dziecko, rodzina, kompetencje rodzicielskie, opieka instytucjonalna

INTRODUCTION AND THEORETICAL FRAMEWORK

or many of us, being a parent means one of the most beautiful, but at the same time most difficult stages of a human life. It is generally believed that a family (whether biological or foster) should be the best and most natural environment for every person's life. It should provide its individual members with a necessary and loving background, ensuring conditions for the optimum development and upbringing of a child (Kraus, 2008).

However, situations frequently arise in which, for various reasons (e.g. alcoholism, psychological immaturity of the parents, drug addiction, imprisonment, homelessness, unemployment, unsuitable housing conditions, domestic violence or the child abuse and neglect syndrome), a family is unable to perform its functions, leading to its failure.

If a child grows up in such an environment, the negative influences may endanger not only their development, but also their lives (Vágnerová, 2008).

In the Czech Republic, relationships between parents and children are regulated by Act No. 89/2012 Sb., the Civil Code. Parents take full responsibility for their children, comprising a set of rights and obligations for taking care of minors. These particularly concern care of a child's health and physical, intellectual, moral and emotional development. When exercising these rights and obligations, parents must not endanger the child's health and overall development, nor should they compromise their dignity. If parents violate these duties in any way, a court may impose restrictions on their parental responsibilities (e.g. parental admonition, appointment of a supervisor). Parents may also give up their child at their own discretion or, for serious reasons, a child may be taken away from them by decision of the

Serial No.	1	2	3	4	5	6	7	8	9	10	11	12
Capacity	45	77	45	126	26	33	45	45	25	31	25	35
Number accepted	18	33	14	88	8	9	18	18	10	15	12	25

Tab. 1a. Capacity and number of children accepted due to social indicators

Serial No.	13	14	15	16	17	18	19	20	21	22	23	24
Capacity	135	28	85	20	42	60	65	25	25	21	35	35
Number accepted	68	28	61	12	20	30	33	12	13	11	8	20

Tab. 1b. Capacity and number of children accepted due to social indicators

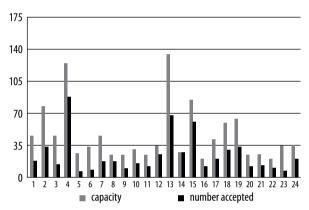


Fig. 1. Capacity and number of children accepted due to social indicators

court and subsequently placed into foster or institutional care (Novotný *et al.*, 2014).

Institutional care for children at an early age in the Czech Republic is provided by infant homes, children's homes and children's centres. These are special facilities for children within the health sector. They are typically founded by a regional authority or municipal authority in the relevant field. Their principal activities are to provide medical, health or social care to children who have been abandoned, whose development has been threatened or who have been abused or ill-treated, to children with varying types and degrees of disability as well as to ensure assistance for mothers giving birth in secret and to offer counselling or direct training for parents facing difficulties with

Reason for acceptance	Number	%
Alcohol and drugs abuse by parents	25	24
Insufficient financial resources — poverty	17	16
Unsuitable housing conditions	29	28
Inadequate childcare	30	29
Illness of the mother (parents)	2	2
Cultural differences in the style of upbringing	1	1
Total	104	100

Tab. 2. Reasons for the acceptance of children into institutional care

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Possibility of cooperation	Number	%	
Yes	24	100	
No	0	0	
Total	24	100	

Tab. 3. Possibility of cooperation with mothers (parents)

childcare (Pemová and Ptáček, 2012). Their main aim is therefore in particular to provide endangered children with proportionate comprehensive care and to find suitable solutions which seek to return children to a family as soon as possible, whether with their biological parents or foster parents. A child's stay in residential care is understood to be purely temporary and is not intended to be a permanent or long-term solution to a child's fate, but must rather be considered as help for children and their parents (Bubleová *et al.*, 2011).

Facilities for Children Requiring Immediate Assistance fall under the competence of the Ministry of Labour and Social Affairs (MLSA) and are mostly established as part of a particular children's facility or separately. Their main goal is to provide the possibility of rapid relocation of a child in case of an emergency or crisis, based on a court ruling, a request of a municipal authority with extended jurisdiction, or a request of the parents. Novotná and Burdová (2007, p. 181) state that: "Facilities for Children Requiring Immediate Assistance provide protection and assistance to children who find themselves without any kind of care or whose lives or positive development are gravely endangered, whether it is a question of children who have been physically or mentally maltreated or abused, or children who find themselves in an environment or situation where their fundamental rights are threatened in a serious manner. Protection and assistance for such children consists in satisfying basic necessities, including housing, and in the provision of medical care from medical facilities, and psychological and other similar essential care."

Interdisciplinary childcare is provided by trained staff made up of qualified paediatricians, paediatric nurses, physiotherapists, social workers, psychologists, special education teachers and sometimes even speech therapists. At the forefront of the whole team's interests is not only an attempt to create optimum conditions for the healthy growth of a child, but also making an effort to rehabilitate a family. In some cases, the breakdown of a family and the subsequent placement of a child into foster care can therefore be avoided (Zajíčková, 2012).

The activities of children's facilities therefore consist not only in assisting their little clients, but also in supporting

Means of cooperation	Number	%
Conversation	18	55
Practical activities	15	45
Lectures	0	0
Total	33	100

Tab. 4. Means of cooperation

Provider	Number	%
Social worker	21	35
Psychologist	10	17
Special education teacher	11	18
Medical staff	18	30
Total	60	100

Tab. 5. Who provides support and assistance

families who find themselves in an adverse life situation and are not capable of coping on their own. A very important and decisive element for parents, however, is a genuine interest in the child and an effort to resolve the situation (Dunovský, 1986). Within such facilities, they can make use of comprehensive services. Parents (particularly mothers) are offered regular counselling and direct training in the required childcare. Outpatient services can be used, and it is often possible to allow parents to stay with their child directly in the facility, which has proven to be beneficial. Interventions focus on the acquisition and in particular long-term maintenance of parenting skills. Direct education is provided by paediatric nurses, a psychologist and a social worker as well as by a special education teacher. In many cases, it is also possible to avoid children being taken away from their own families and to prevent their subsequent placement into institutional or foster care. However, for various reasons (for example, the presence of addictive substances, a differing style, or immaturity etc.), parents are sometimes not interested in honing and consolidating their parenting skills. Unfortunately, this greatly reduces the chance of children being returned to their own families.

OBJECTIVES OF THE SURVEY AND METHODOLOGY

As part of the dissertation (Dokoupilová, 2014), a survey was carried out in children's facilities. The objective of the survey was to ascertain the most common causes of a family's failure in childcare and in what way a children's facility contribute to the development of parenting skills.

The available information has been obtained on the basis of questionnaires which were distributed to all facilities for children of an early age operating in 2014.

Based on the objectives of the survey, the following questions were established:

 Question 1: What is the most common reason for the failure of families (mothers) in coping with basic parenting skills?

Form of support	Number	%
Outpatient	16	43
Residential	17	46
Outreach	4	11
Total	37	100

Tab. 6. Form of support

Frequency of cooperation	Number	%
Multiple times a day	15	62
Once a day	4	17
Multiple times a week	4	17
Once a week	1	4
Total	24	100

Tab. 7. Frequency of cooperation

- Question 2: What form of support and assistance does the facility offer to parents (mothers)?
- Question 3: Which members of staff most frequently provide parents (mothers) with the necessary care aimed at acquiring parenting skills?

The research was conducted in 24 facilities for children in the Czech Republic. The results were taken from the answers of the heads and social workers in these establishments (women).

RESULTS OF THE SURVEY

The information obtained from the survey was subsequently entered into tables and accompanied by a brief summary. Question 1. What is your facility's capacity (how many children can you accommodate)?

Question 2. How many children, out of the total number within the last three years, have been accepted due to social indicators (failure to cope with basic parenting skills)? Discussion: An overview of the total capacity of a given facility and the number of children accepted due to social indicators (failure to cope with basic parenting skills) for the last 3 years has been obtained from the above tables and graph (Tab. 1a, Tab. 1b, Fig. 1).

Question 3. What is the most common reason for the failure of families and the acceptance of children into institutional care? (Tab. 2)

Discussion: From the answers of respondents shown above, it is evident that the most frequent reasons for the acceptance of a child into a facility for reasons of social indicators were in particular inadequate childcare proportionate to age, unsuitable housing conditions and the presence of drugs and alcohol among parents. A further cause was insufficient financial security of the family. There were only 2 cases where a child was accepted due to an illness of the mother (parents) and 1 case where the reasons were related to differing cultural styles and upbringing.

What complicates cooperation	Number	%
Unreliability of mothers	14	59
Insufficient staff	6	25
Lacking training room	2	8
Influence of the family on the mother	2	8
Total	24	100

Tab. 8. What complicates cooperation

Question 4. Does your facility offer the possibility of direct cooperation with mothers (parents) who are not able to cope with an adverse life situation on their own? (Tab. 3) Discussion: From the answers of the respondents it can be observed that all the facilities have a 100% possibility of cooperating with mothers (parents) and helping them to cope with a difficult situation in which children find themselves for various reasons.

Question 5. By what means do you most frequently cooperate with mothers (parents)? (Tab. 4)

Discussion: The most frequent form of cooperation with a mother (parent) reported by the respondents was a means of training practical activities and a subsequent conversation. In no cases was the use of lectures stated.

Question 6. Which staff members most frequently provide support and assistance to mothers (parents) when coping with demanding situations? (Tab. 5)

Discussion: As regards the provision of support and assistance to mothers (parents), respondents reported that the members of their expert staff who most frequently provide such care are in particular social workers and medical staff. These are followed by special education teachers and psychologists.

Question 7. What form of support are mothers (parents) provided with? (Tab. 6)

Discussion: From the information presented above, it can be stated that cooperation is most frequently provided in the form of residential support and assistance (accommodation of mothers/parents in the facility itself) as well as through outpatient services. Occasionally, outreach services are also provided.

Question 8. How often are you able to offer cooperation to a mother (parents)? (Tab. 7)

Discussion: According to the information obtained, facilities are capable of offering cooperation to a mother (parents) multiple times a day in 62% of the cases, in 17% once a day, in 17% multiple times a week and in 4% of the cases only once a week.

Question 9. Please, could you write down what, from your point of view, most complicates your cooperation with mothers (parents), and conversely what may help you? (Tab. 8)

Discussion: Respondents were given the opportunity to specify what they consider to be the main obstacles which affect their cooperation with mothers (parents). In the majority of cases reluctance and unreliability on the part of mothers was reported, reasons related to the lack of personnel were then dominated, and in the last place, the influences of an extended family and the inability to provide a training room designated for jointly accommodating a child and parents in the facility were reported.

CONCLUSIONS

The survey carried out in children's facilities shows that the most frequent cause of the acceptance of a child into institutional care is the insufficient provision of parenting skills (inadequate care in relation to a child's age, unsuitable

housing conditions, substance abuse and the lack of financial resources).

Children's facilities aim their help and support not only at children, but in particular also at their parents. At the forefront of their interest is an effort to help parents, under the guidance of professionals, to obtain sufficient knowledge relating to routine childcare and to become capable of maintaining and applying these acquired skills in their daily lives. Thanks to such an intervention, it is possible to rehabilitate a family and to thereby reduce the possibility of children being placed outside the care of their biological families.

Parents are given the opportunity to make use of the expert services of these facilities not only in the form of outpatient services, but also residential. This has proven to be much more effective owing to the possibility of more controllable and long-term training of parents within the facilities themselves. Difficulties in the area of cooperation between experts and parents, however, are indicated in Tab. 8, which shows that a hurdle in the potential development of parenting skills is often the unwillingness and unreliability of the parents to care for a child in an adequate manner. Unfortunately, it is often extremely difficult to influence such factors.

Conflict of interest

The author does not report any financial or personal affiliations to persons or organisations that could adversely affect the content of this publication or claim to have rights thereto.

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References

Bubleová V, Vránová L, Vávrová A *et al.*: Základní informace o náhradní rodinné péči (Basic Information About Adoption and Foster Care). Středisko náhradní rodinné péče o. s., Prague 2011.

Dokoupilová I: Institucionální péče a speciálněpedagogická podpora matkám v náročných situacích (Institutional Care a Special Education Support for Mothers in Demanding Situations). Dissertation. Palacký University, Faculty of Education, Olomouc 2014.

Dunovský J. Dítě a poruchy rodiny (Children and Impaired Families). Avicenum, Prague 1986.

Kraus B: Základy sociální pedagogiky (Basics of Social Education). Portál, Prague 2008.

Novotná V, Burdová E: Zákon o sociálně-právní ochraně dětí. Komentář (The Act on Social and Legal Protection of Children. Commentary). Linde, Prague 2007.

Novotný P, Ivičičová J, Syrůčková I *et al.*: Nový občanský zákoník. Rodinné právo (The New Civil Code and Family Rights). Grada, Prague 2014.

Pemová T, Ptáček R: Sociálně-právní ochrana dětí pro praxi (Social and Legal Child Protection in Practice). Grada, Prague 2012.

Vágnerová M: Psychopatologie pro pomáhající profese (Psychopathology for Helping Professions). Portál, Prague 2008.

Zajíčková I: Stav speciálněpedagogické péče o děti s postižením v kojeneckých ústavech (Status of Special Educational Care for Handicapped Children in Infant Homes). Bachelor dissertation. Palacký University, Faculty of Education, Olomouc 2012.