Cross-National Understandings of the Purpose of Professional-Child Relationships: Towards a Social Pedagogical Approach

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A reassertion of the value of relationships in UK practice with children in care is underway after a period when outcome focused work obscured their importance. But little is specified in the training requirements for foster carers or residential care workers about how to construct and maintain high quality relationships. This paper presents evidence from a study of understandings of professional-child relationships in three continental European countries that are informed by social pedagogy and from social pedagogues working in England. Four purposes of relationships are identified that hinge on questions of whether the relationship is about facilitating another objective such as building children's skills, participation in society, taking action on their behalf, or about being together in an ethical encounter. The paper then discusses the role of trust in relationships and the deployment of the self. It concludes by identifying four practical indicators for social pedagogic professional-child relationships. They should be: present and future orientated; founded on practical actions; they require awareness of how the worker uses their 'self'; and a supportive organisational environment.

Key words: *Social pedagogy; relationships; instrumentality; personal self; children in care*

Introduction

There is considerable evidence that positive experiences and outcomes for children in public care are enhanced by relationships with professionals with whom they come into contact. Trusting relationships have been found to support educational attendance and achievement (Jackson & Martin, 1998; Jackson, Ajayi & Quigley, 2005), reduce the risk of sexual exploitation, of children going missing from care, and are 'the most effective tool for keeping children safe from harm' (Office of the Children's Commissioner, 2012, p. 8). Relationships are also said to promote resilience (Houston, 2010), participation in cultural and sporting activities (Gilligan, 1999), and enhance stability (Dearden, 2004). In the resurgence of interest in professional-client relationships, most attention has been paid to social work as an occupational group. Munro (2011) argued that the necessary centrality of relationships for high quality child protection practice had become obscured in organisationally driven, rational technical approaches in social work.

UK social workers, arguably, are not the central figures in relational work with children in public care. Munro (2011, p. 27, p. 32) found that social workers have 'minimal' relationships with such children and there are often a 'bewilderingly large number of people' involved in any one child's case. About 75 percent of the approximately 67,000 young people in care in England are placed with foster carers; the remainder are living in a variety of institutional and community placements including around 8,000 young people in residential settings (Department for Education, 2012a.) For the most part, relational responsibility falls to foster carers and residential workers, for whom, in England, there is no dedicated and unique body of knowledge informing relational practice.

In England, National Minimum Standards (NMS) provide the regulatory framework for practice in both foster care (DfE, 2011a) and residential care (DfE, 2011b) and a national benchmark for practice, although not one intended to 'prevent development of a particular ethos' (DfE, 2011b, p. 5). Initial training for this group of practitioners is limited. Foster carers are required to demonstrate that they meet seven national standards within 12 months of being registered as a foster carer. These standards concern: i) principles and values; ii) the professional role; iii) health, safety and healthy care; iv) effective communication; v) child development; vi) safeguarding; and vii) developing the self (DfE, 2012b). Since 2011, residential care workers have been required to hold, or be working towards, a Level 3 Children and Young People's Workforce Diploma and work under the management of a leader with a Level 5 diploma in leadership for children's and young people's services. Little is specified in either NMS about what kinds of relationships are desired.

The National Standards for foster care state that relationships between foster carers and fostered children are of 'central importance' (DfE, 2011a, p. 3). Beyond this, foster carers must help fostered children maintain a relationship with their birth parents, wider family and friends (DfE, 2012b, p. 3), enable children to develop and practice skills to build and maintain positive relationships (Standard 3.3), make positive relationships with children, generate a culture of openness and trust whilst also being alert to signs that a child is at risk of harm (4.3), promote the health of fostered young people including their sexual health and relationships (12.1a). Strikingly, nothing is mentioned about foster carers' and young people's everyday relationships in the foster family.

Within children's residential homes, similar topics are covered. Relationships with family members and friends should be maintained and developed (Standard 10), children should develop and practice skills to build, maintain and enjoy 'sound relationships' within the home as part of promoting positive behaviour (3), staff, of both genders, should make positive relationships with children such that there is a culture of openness and trust (17, 4), and young people who are preparing for independence should be supported to establish positive and appropriate social and sexual relationships of their own (12) (DfE, 2011b).

Official guidance, then, considers relationships 'central' and expects them to be 'sound' and 'positive', enabling a culture of openness and trust. There is a presumption that relationships underpin work with children, but there is little in the guidance to indicate how relationships contribute to the desired outcomes for young people or how they are constructed and maintained. Moreover, the existence and operation of national standards has not prevented an emergent sense of crisis about the quality of experience children in care enjoy. It would appear that relationships are not good enough to ensure that children in care achieve 'the security, support and schooling they need to reach their potential and lead a happy and fulfilled life', according to Alan Johnson, former secretary of state for Education and Skills (DfES, 2007, p. 3). In 2009, the House of Commons select committee report on children in care singled out relationships as responsible for the lack of positive outcomes for children: 'the failure of the care system to replicate or compensate for the stable relationships that most children have with their parents is one of its most serious and long-standing deficiencies. Even when all the right frameworks and structures are in place, it is the quality of relationships that will determine whether a child in care feels cared about on a day-to-day basis' (House of Commons, 2009, p. 27).

The aim of this paper is to contribute to the development of understanding about professionals' day-to-day relationships with children when they are in public care using data from three continental European countries and from England. It identifies four purposes of relationships and in particular investigates instrumental and ethical perspectives on relational practice.

A comparative study design

This paper considers evidence from an ongoing study of the understandings of relational practice with children in the care of the state in Belgium, Denmark and Germany[1] . The aim of the study was to investigate how relational practice was conceptualised from the perspective of professionals who were experts in the field of working with children and young people, with a view to contributing to the debate in England about how to improve relational practice and make placements away from home more successful (Hetherington, 2006). The three countries were chosen to reflect differences in the organisation of, and cultural approaches to, practice with children compared to England. According to Esping-Andersen's (1990) categorisation of socio-economic philosophies underpinning health and welfare benefits systems, Denmark is one of a group of states in the universalist 'social democratic' tradition, while Belgium and Germany are categorised as 'conservative'; they structure delivery of services very largely through non-government organisations. England belongs to the third group of countries, known as 'liberal', where there is a high level of expectation that individuals make their own provision for health and wellbeing. Gilbert's (1997) comparative analysis of child welfare systems argued that there were two main groups of countries: those that have a 'family service' orientation, and this includes all the conservative and social democratic countries, and those that have a 'child protection' orientation, which corresponds to the liberal welfare regime. Hence, in this study, we have data from three countries with a 'family service' orientation, who deliver their services in two different ways: through the public sector and through non-governmental organisations. We are also able to make some points of comparison with a liberal 'child protection' country, England, which treats family support and child protection as discrete systems and is more crisis orientated (Hetherington, 2006).

The three continental European countries were chosen for their tradition of social pedagogy. Social pedagogy (and its variants) is an approach that can be described as 'education in its broadest sense' (Petrie, Boddy, Cameron, Wigfall & Simon, 2006, p. 2) – that is, the approach to social problems is viewed in a broadly developmental perspective where 'care' is a part of what is on offer – but which is also concerned with social and cultural integration and political emancipation. Nine principles of social pedagogy have been discerned, within which the centrality of professional-child relationships has been noted (Petrie et al., 2006, p. 22). Denmark, Belgium and Germany all have policy frameworks for children in care which reflect the social pedagogic tradition, and they have occupational models of 'social pedagogue', 'pædagog' or 'orthopedagogue' for staff who work with children in care in residential and community settings.

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[1] The study was funded by Anglia Ruskin University Faculty of Health, Social Care and Education, and ethical approval was given by the Faculty Research Ethics Committee.

Data sources

Intensive interviews with key stakeholders were held in each of the three countries and with social pedagogues who had trained in Germany and worked in residential care in England (Cameron, Petrie, Wigfall, Kleipoedszus & Jasper, 2011). The latter group was particularly able to identify differences between their own knowledge and practice and that of their English colleagues. In each country, a well-established colleague was asked to arrange interviews on the researcher's behalf with experts from research, professional education, practice, policy and trade unions who held clearly articulated perspectives on questions of theory and practice in work with children and young people.

In total, there were 43 study participants. Eight were from policy, nine from research, five from professional education, 16 from practice (including six social pedagogues based in England[2]) and five from trade unions. All interviews were conducted in English. A lack of confidence in English language meant that, in Germany (but not in Denmark and Flanders), there were difficulties finding suitable candidates to interview and most interviews were conducted in pairs or trios in order to assist with clarifying questions and meanings of responses. Study participants were drawn via opportunistic snowballing by the key contact in each country in as few administrative areas as possible. This was to minimise any variations in policy, and its implementation for children and young people, across areas. In Belgium, the focus of enquiry was Flanders, the largest of its autonomous regions, and, in Germany, fieldwork took place in Hessen and Baden-Württemberg. In Denmark, fieldwork was in Copenhagen and the immediate area around it. The interviews in England were drawn from across the country, depending on where the social pedagogues had been employed and had settled.

Each interview followed a broadly similar schedule that included: perceptions of the wider discourse around children and young people and those in care of the state; concepts, theories and how they relate to practice; practice itself; and the organisation of practice. Interviews were recorded via contemporaneous note taking and/or digital recorder, typed and returned to study participants for checking and amendment. Analysis proceeded by: i) compiling country based reports, synthesising the data from each set of interviews and available national level documentation, adding to already compiled background reports; ii) writing summaries for each country and circulating these to study participants; iii) thematic analysis guided by the main areas of the interview schedule; iv) comparative analysis in a country context. The data presented here, a fragment of that collected overall, concerns perspectives on the purpose of relationships and the role of trust in a 'good' relationship.

The purpose of relationships

Responses to an open question: 'What is the purpose of the child-professional relationship?' were organised into four main categories. The categories imply a range of roles for the professional and illustrate a range of underlying concepts about the relationship, discussed below.

Building Skills
Fourteen participants referred to relationships as 'a vehicle for the development of the self and skills'. The child or young person is envisaged as a person whose social being requires additional

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[2] Both 'social pedagogue' and 'pedagogue' are used to refer to the main occupation working on a day-to-day basis with children in residential settings.

skills in order to participate in society and the professional role, through advising, modelling and being together, in a non-judgemental way, can help them gain confidence, strengthen their abilities, support their development and learn norms of social behaviour. Study participants from all four data sets referred to this purpose of relationships; examples below are from Denmark and Flanders. A Danish researcher illustrated this approach to building the self and skills through sharing everyday 'lifespace'[3]:

> *A young boy has a psychotic father who can change behaviour suddenly. He is not aware of the severity of his illness and gets angry that the children are taken into care by compulsory order. The dilemma for the practitioner is how to work with the father – 'it's a delicate thing'. It's difficult to say 'it's too dangerous, we take the child away', but at the same time they don't wish to put the child's well-being at risk. The social pedagogue goes to stay with the boy in their house and finds activities that he could do with the father (e.g. watch TV). The professional needs to analyze the situation so they don't put themselves in danger. At this point the professional needs to have developed a very close relationship with the father. … Both the boy and father are distressed. The pedagogue sits together with them and is sad together with them.*

> *The decision is made in the professional team through a lot of discussion about: what it means, what can we deal with, how much pressure can the father stand. The team supports one professional to work on the case.*

Another example of building skills in a Danish young person was of a 14-year-old boy who was placed alone with five pedagogues for five years. The study participant, a researcher, said:

> *They started from the beginning, teaching him how to get up in the morning, wash, place things in the room, he had a strange way of piling up things on the floor. And they took all the fights with him, but they were genuinely interested in him. <u>Everything</u> from the beginning – after approximately one year he began to trust them. He could pick the one he trusted at a time. [They] did lots of interesting things together.*

Further comments on the 'building skills' perspective were that 'relationships are a kind of tool in the positive development of children … they don't grow spontaneously in the right direction, but you can help them grow' (psychologist, Flanders) and that relational work supported the workers' role in identifying 'what are the needs to go on again with your life. Supports, stimulates, leads, in team together. As much as a person needs and he wants … the professional has to work with the strengths of young people and the family to give new hope to the future' (trainer, Flanders).

Key elements of the 'building skills' purpose can be discerned. First, professionals identify the 'dilemma'. Using the term 'dilemma', rather than 'problem', puts the matter of concern into a position where two or more sets of concerns have to be resolved, from a position of more or less equally valid perspectives. The term 'problem' suggests a hierarchical approach where one party, often the professional, 'knows' the solution and requires the other party, the client, to achieve it. Second, the pedagogue shares lifespace with the 'client' or 'service user'. They immerse their personal and professional self in the physical surroundings of the young person or family. This might be achieved in a residential home or through going to stay with a family as in the example above. Sharing the lifespace begins with establishing genuine interest in, and curiosity about, the young person. It means creating opportunities to build mutual interests, doing things together that are both meaningful for and revealing of the everyday knowledge, dynamics and routines of the young person or family. The choice of activities may be led by the young person and also extended,

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[3] Lifespace is a term coined by Lewin (1936) to refer to the totality of all the influences on a person in a given moment in time; both physical and social reality shape an environment, but a person's perception of the 'space' in the here and now is highly individual.

in terms of learning opportunities, through the suggestions of the pedagogue. Sharing the lifespace also provides time and opportunities to empathise with the young person, referred to in the example above as they 'sit together' and are 'sad together'. A third aspect of sharing the lifespace is the opportunity it provides to reconstruct daily life together, with predictable and normative routines that are modelled by the pedagogues and, given time, learned by the young person. This is an essential part of equipping a young person to live in society as an (inter-)dependent adult, so has to closely parallel practices in society.

Most importantly, the work of the pedagogue is within a professional team which together supports, analyses and reflects upon the practice and its progress. As noted above, the team will discuss what the actions and interactions mean, what pressures the parties are under and how the young person's wellbeing, skills and capabilities for coping with life may be further enhanced.

Being supportive – an ethical encounter

In contrast, the second purpose, identified by six study participants, was that professionals' relationships with young people were without an ulterior purpose. Instead, it was important to see relationships as providing an opportunity to be supportive to a young person, for the professional to 'work at the notion of human dignity', to 'be there' for a young person and to create an environment where a young person perceived the adult to 'be special' to them. A practitioner/manager of a children's home and family support services in Flanders, for example, said the purposes can change depending on with whom they work:

> [What is] appealing to me is a general purpose to work at the notion of human dignity. This is very broad but very important. The way they [resident young people] are dealt with and the way they are dealing with others … it's not about changing behaviour. … Our philosophy is not behaviourist or focused on rules. We are focused on settings and creating places in which people can come to reflect and do things together. Find ways to engage. Even if there are problems with parents.

A researcher from Flanders argued that relations are not instrumental:

> You enter a relation. The rest you can't predefine, you have to look then at what happens. You can't pre-structure what we are going to get out of it. If you do structure or try to predefine, the relation becomes an instrumental thing. The professional will say 'if we have a good relation, then the client will do what we want' – it makes participation easier. So I question whether that is what we want from participation. Perhaps it should make it harder. The relation is necessary, and perhaps the only thing you have to do is install that relation. As a starting point. The rest is to be defined within what is happening there. Of course what is the quality of care, what we think we will work or help or solve. The relation has no purpose, because purpose leads to an instrumental dimension. … We say you have to be trustworthy … [and] once you have the trust of a client, they will tell their problems, which can be addressed by the professional. … [On the contrary] it can be important to be able to say 'bugger off'.

In this perspective, which might be termed an ethical encounter because of the primacy given to relations in the 'here and now' and not to what might be achieved at some future point in time, the worker is positioned as having an expertise in 'entering' a relation and allowing the relation to unfold on the basis of ethical principles. Such ethical principles involve honest appraisal of a situation and its demands without necessarily taking further action but instead 'being there'. The Flemish researcher gave an example from an earlier study where a professional talked 'about a [problem] case. He said about a girl of Turkish parentage who came to the office regularly, cries about how difficult it is to live between her parents' culture and [her] Belgian peer group. I asked "what is the problem?" And he said "I can't refer to a psychologist, because we don't have any specialists". He says "it can't be enough to come and cry in the office". So I said "stop trying to look for something else". He was being there for her. It might be enough'.

In the ethical encounter, the 'here and now' has meaning, and the actions of the professional convey that 'you are worthwhile [and] just as I find you important, you mean something to me' (psychologist, Flanders). Another way of putting this is, in the words of a Flemish trade union representative: 'it is important to follow these young people from a pedagogical perspective. A large number of professionals really connect with the children. They see what the children need – and this is frustrating, to see what they need but to not be able to fill the responsibility you have. In general the young people and the professionals connect'.

The idea of professionals and young people in a 'connection' and 'being there' is arguably at a different level from meeting need or building skills, although there are similarities in terms of professional actions and environment. Even more than in the first 'purpose' discussed above, mutual meaning making is the fore. As a professional educator in Flanders said, 'the pedagogical way is to go with the child and through their difficult situations'.

The relational role of the professional is to work at the communication with the young person and create the conditions for communication as well as look after their physical needs (or 'care'). This approach foregrounds 'having room to get in touch with children' but was acknowledged by study participants as in conflict with what they perceived as relentless managerial pressure on predefining goals and working to time specified contracts.

A researcher in Flanders commented that the 'whole idea of "being there" demands room to encounter people'. But 'there is a risk of cutting out room for encounters, because we have to reach goals. For instance, in family support, we have to have a plan with goals' and a timescale. If a crisis emerges during the timeframe, 'we have to make up goals that have not really been discussed with the parents. Then we say we have to develop goals as a goal'. He also referred to 'economic pressure to have a short intervention': the 'whole managerial pressure on goals puts pressure on … encounters without predefined goals'.

Dahlberg and Moss (2005) draw attention to this tension. They argue that the managerialist search for uniformity and predefined outcomes is a 'human technologies' approach symptomatic of societies that seek to be in control of citizens. There is a fundamental conflict between the rhetoric of valuing diversity and individuality on the one hand and the technologies of government, principally, standardisation, on the other. Following Levinas they argue that the effect of standardisation is to try to grasp the Other (the individual who is 'different') to make it into the Same, to 'seek to understand through a framework of thought I impose on the Other' (Dahlberg & Moss, 2005, p. 79). Smith's (2011) reading of Bauman's analysis of modernity makes a similar point. Social work, under conditions of modernity, has narrowed horizons, focusing on rules and less on moral purpose and should be reconceptualised 'as a moral rather than an instrumental task' (p. 13).

The idea of relationships as non-instrumental ethical encounters focusing on respecting dignity and making connections is a considerable challenge to relational practice in the current era of control and accountability that participants said was fast gaining ground, especially in Flanders.

A vehicle for participation
A third purpose given by study participants was of relationships as a vehicle for participation in society. A union representative from Germany framed this perspective as 'the professional gives the opportunity to have a voice. The key word is to give opportunities, to use opportunities; you have to create the good conditions'. A practitioner from Flanders considered the first principle of practice was 'to give the child a grip on his own life, so that he can develop and go further, with or without his parents … [the practitioner should identify] possibilities for action, give [the] child a voice'. A researcher from Flanders was clear that relationships with young people in youth work are 'to support young people's emancipation. To work with the autonomy of young people. To create

opportunities, through participation in the youth movement, for learning about leadership and organisation'.

Emancipation through participation in the structures of society, which includes all the services that children attend as well as governance of society, was a predominant theme in Germany and Flanders but threaded through many accounts. Milova (2008) compared participation of children and young people living in residential care in Germany, France and Russia. She found that participation in the form of involvement in everyday life decision-making was very common in Germany, compared to the other two countries. Involvement in decision-making extended from personal life decisions to joint decisions regarding matters such as relations with parents and school engagement, to participation in community forums such as weekly group meetings. This approach, following the theories of Winkler (2000), is designed to give young people the skills for negotiation, and making choices, that are essential for independent life as an adult.

Gaining understanding of the problem

The fourth, and most commonly referred to, category was that of relationship as a way to gain a professional understanding of the child's problem. The role of the professional was to gain the trust of the young person so that they were able to tell the professional about their difficulties, that with this knowledge they would be able to make changes in the young person's life, and/or make relationships with birth parents bearable. This purpose, somewhat instrumental in character, was mentioned by participants in all the country data sets.

A social services practitioner from Germany thought the purpose was 'to get a change from before … if there is no relationship, if they don't believe I have a good idea, it's difficult to get them to do something different or even to tell them something about themselves … The big issue is how can we speak together … It's important he tells me so I can understand'. A manager in a children's home in Denmark thought that 'it's very important that the child can have confidence in one special grown-up to help with anything. [That they] trust you will treat their information with care'. One of the social pedagogues working in England considered the relationship as a way 'to achieve change with the young person. To gain trust, to find out the underlying issues the child presents'. As a practitioner one 'mainly sees child behaviour but doesn't have knowledge about what is underlying it'. With a relationship the young person can 'express their self differently, disclose the issues arising. Without a relationship you can't achieve long[er-term] changes', and, as another social pedagogue said, 'without it you can't work with them … they don't listen. If you have a relationship they want to spend time with you'.

The implication for the professional role was to be very active, reliable, and as one practitioner in Flanders said, 'very often the child is impressed by what we know – and that it's straight – that they can trust what I say is what I mean. It has to be open communication'. She went on to say that the purpose of the pedagogues' 'work with child is that the relationship with their own family is bearable. Or is improving'.

The role of trust in a 'good relationship'

The responses of social pedagogues who had worked in England to a question about defining a 'good relationship' largely focused on the topic of trust. They introduced points of comparison with their knowledge of residential child care in England. One social pedagogue said 'trust is the most important thing. If they don't trust you, there is hardly anything you can do. They have experienced so much rejection by those they loved, if they do not trust, it is very hard to make progress'. Trust is conceptualised as necessary in order that the young person would want to work with the adult,

whether on the level of living together in the home or on the level of their 'underlying issues' which need to be addressed and/or resolved.

Across all four data sets, perceptions of trust were the most frequently mentioned characteristic of 'good' relationships. Trust was evident when children, young people (or parents) 'told their problems on their own', where the worker represented 'someone they can tell about problems', where they 'can talk about abuse', and 'if they have a problem, they trust you, come to you about it'.

Three main practices were given to support trust relations. First, practitioners had to show authentic interest in the young person. A professional educator from Germany said 'the child has to feel they (the professionals) are interested in and serious about wanting the relationship'. A psychologist/researcher from Flanders said the child has to 'feel he is someone worthwhile' through the relationship. A key aspect of authenticity was mutuality. A Danish researcher reported that, in her study of life in residential institutions, young people found it important that professionals with whom they shared daily life, such as social pedagogues, supported mutual exchange of information. She said:

> *Many institutions have very strange policies, such as the social pedagogue is not allowed to say anything about their private life. They are not allowed to answer 'are you married?', or 'do you have children?' Children find this mystical. They say everything about their life, but they don't get [similar information] back. 'Ordinary' people, not professionals. They [young people] don't want to participate in therapy actively, they want to go to the cinema, play games, walk.*

The principle of mutuality was also raised by a German social pedagogue who had been working in a residential children's home in England. She said it was important that 'we can speak to each other without shouting. Shouting indicates no respect. If we can disagree and show the reasons and tell why we disagree ... good relationships are mutual'. Another German social pedagogue expressed this mutuality in terms of 'respect for each other. If you disagree that we can see each other's perspective. That we can talk ... in times of crisis there is still a chance to talk'. Finally, a researcher from Flanders argued that good relationships were responsive and supportive, characterised by transparency, honesty and respect.

A second practice to support relational trust was about working in an environment characterised by reliability and continuity. A social services practitioner from Germany said the young person should 'not feel like a hot potato being thrown around. There are problems if residential care workers do not stay for the whole week, if they are on rota or part-time and don't work every day. Some workers live there; but mostly, at least in the beginning, the relationship is fragile'. A social services practitioner in Denmark said that, while he did not see the young people he was responsible for very often, all contact was characterised by predictable principles:

> *R: How do you get the trust?*

> *SSP: Talk on phone (I always tell them they can call). If the young person calls, I ask them if it's ok to call the foster family, then talk with the foster family and ask if they can manage the situation. It is very important for the child to see that we act on their views.*

A third practice to support trust was taking action on behalf of young people. This was expressed by a German union representative as the professional's role to create opportunities for young people: 'So the child has the opportunity to say what they would like, what they value ... they have *Orientierungsmittel' (opportunities to find orientation).* Orientation refers to the professional's role to have an 'overview about different fields of life as an adult, so you can show you have an orientation, with knowledge, networks, opportunities. You can share it with the child. It is not about telling them what to do but to show there are opportunities'.

A Danish researcher put this in terms of 'supporting their participation in their development' in coherent ways and on concrete matters. She gave an example of asking a child, aged five, what is the worst thing in this house?

> *'My bike has a puncture' – what to do with this information? The professionals won't fix the bike, they say: wait until Thursday, Martin is coming on that day, and he can fix it. But the kid bicycles all the time together with his friends, so everyday life depends on his access to a bike – so a week is a major thing – he can't participate. To make coherence, how can we work much harder on 'bikes' or other practical matters that facilitate children's participation? How can he bring his bike to his home when he is visiting his parents? Focus not so much alone on what he's experiencing but on how we work practically to support coherence and participation in daily life.*

This example shows that good relationships require both system flexibility and individual commitment and motivation to take action, including where this means disrupting system routines. Critically, the relational is about not just dialogue but about recognising practical matters of importance and taking action. Doing things together around practical matters can be considered an example of a 'common third' (Husen, 1996). For this study participant, the action is not doing things for children but enabling their participation in daily life and so in society through addressing concrete and practical issues. A Danish educator supported this action orientated part of relationships. She said:

> *The mantra is relations, [you] have to make relations … And it takes time, and a year passes, and it's very important years for the child. I teach the students to be aware of how they can use the relation to sit and do homework, make the situation focus on school. Because a lot of [residential care] institutions say … we take care of the behaviour, and school takes care of the school. But with your own child, it would be you doing the homework and making tea to help the child do the homework.*

Moving away from accounts about trust, three study participants referred to attachment theory as being a way of understanding 'good' relationships, and one referred to being equipped to work with 'uncomfortable truths' emanating from children's life circumstances. Space precludes a more detailed discussion, but the relative absence of responses referring to attachment theory is a contrast to discussions about social relations with children in care in the UK, where, in the words of one study social pedagogue, 'everything was about attachment'.

Discussion

For the English public care system to promote high quality day-to-day relationships, a better understanding is needed, woven into the requirements for practice, of how relationships with children in care are constructed and maintained. Using data from Denmark, Flanders and Germany, this paper has explored a broadly social pedagogical perspective on the purpose of relationships practised within child welfare systems characterised by a family service orientation. The data showed four 'purposes' of the professional-child relationship and a central concern with the concept of trust. The purposes – termed here building skills, being supportive, creating conditions for participation in society or gaining a professional understanding of a child's problem – hinge on two broad perspectives about the professional relationship with a child.

The first perspective is that a relationship between a professional and a child is necessary in order to do something, whether that is gaining information, taking action, introducing therapy or other specialist services. It is broadly a professional-adult-expert led approach to relationships or, in the terms of one of the study participants, is instrumental; there is an ulterior motive. The second perspective is that the relationship is necessary in order to be together, to live together in an institution or family setting, and that it is a mutual encounter, respecting the rights of the Other to

be other. It is characterised by mutuality, and the future outcomes of a relationship cannot be prescribed in advance. The ethical encounter position is a useful reminder of an authentically rights based approach, where the relation is seen as dynamic and unpredictable and not amenable to framing by outcomes prescribed in advance. It could be seen as a basic social pedagogical position – to meet the child where they are at and focus on the here and now – but it is striking that the ethical encounter perspective was not the one most frequently represented in the data. It is possible the explanation for this lies in Murphy, Duggan and Joseph's (2012) argument that person-centred relationship-based social work is incompatible with the managerialist environment of contemporary social work, which is increasingly dominant in the countries where data was collected.

Whether instrumental or encounter, the professionals' deployment of the self is an important aspect of relational practice. Social pedagogues often refer to a three-way orientation to the self: professional (formal knowledge), private (knowledge that is not shared) and personal self. Milligan (2009) found that notions of the personal self in particular are often underdeveloped in UK residential care practice but crucial for developing authentic relationships. Deployment of the personal self is not just a matter of using personal characteristics such as humour and having a positive attitude, although these are important. The personal self also refers to the use and interpretation of the professional role and to skilful judgment of sensitive and appropriate closeness to young people and distance from them. This is not easy to achieve: the most commonly given characteristic of a 'bad' relationship in the current study was about closeness and distance. As one German social services practitioner expressed it, where

> *The worker is too close. If staff are not professional but feeling like they are a family member and seem in competition with the parents. If they are closer to one young person than others in a group. They need to 'step beside' children and have distance. If they feel too much, if they get mixed up with the parent role, it's difficult. You are a professional and it's not your child. Some team members who have been there a long time can be too distant or too close.*

The debate about closeness and distance was said to dominate student debate about the use of self on Danish social pedagogy professional education courses. One Danish educator put the dilemma as one of knowing that a young person in care will need someone to make them feel special, yet being unable to ensure that they do:

> *Whether a member of staff or pedagogue or neighbour or some other person. It is a paradox if you say their job is to give love but can't make that something that you have to do. But the other way round, you are not allowed to love the children, then that is bad too. So you have to manage that in the way you organise things, if it happens it is good. If not there is not much you can do. You cannot organise so that everyone will find their person. Some places it is culture, there are some young people [who] are very difficult to love. Some young people can't have [a] close relationship, will always push away.*

The study participants have clear suggestions for dealing with the dilemma: to 'step beside' and have distance; and to ensure the possibility is there for young people to experience closeness in the way an environment is organised, but to acknowledge that closeness to a special person cannot be guaranteed for all.

Returning to the two perspectives outlined above, they reflect different philosophical traditions within broadly social pedagogical and family service oriented systems. They reveal enduring questions – is it better to focus on 'doing' and run the risk of imposing a professional perspective on a young person's expertise in their own life, or to focus on 'being' together and run the risk of not attending to the urgency of a young person's acquisition of socially required skills, or educational qualifications, that aid their practical possibilities in society. In practice, there is overlap between these two perspectives. For example, when building skills was described as involving a considerable amount of shared lifespace, it focused on 'being together' over time, through which

the young person learned how to be in relation with others, including the social pedagogues. In addition, although the directions of the two perspectives are different, both rely on 'installing' the relation from the beginning. Many study participants discussed this in terms of establishing trust between the parties.

Trust can be defined as 'respect for competence', having 'faith in [someone] because they seem to know what they are talking about' (Sennett, 2012, p. 170). According to Luhmann (2000, p. 94), trust is a 'solution to a specific problem of risk' but requires a familiar world within which confidence about expectations can be assessed. Trust is the starting point for negotiating the rules of proper conduct in a world characterised by complexity and uncertainty. For Luhmann the conditions for trust are: mutual commitment; easily penetrable situations with the possibility of communication; and absence of demand, as trust can only be offered and accepted. Trust also has to be earned, while lack of trust reduces the range of possibilities for action.

Study participants identified three main conditions for trust in a professional-child relationship. To those discussed – authentic interest and mutuality, reliability and continuity, taking action on behalf of young people – we might add a fourth from the data on what makes a 'bad' relationship, and this is the importance of a professional's deployment of their personal 'self' and in particular negotiating closeness and distance. These conditions imply an active and thoughtful, reflective and analytic role for the professional in constructing and maintaining a relationship. They also convey implications for the organisational context for the relationship. Importantly, the relationship does not take place in a vacuum but in an institutional or family setting and, moreover, is often not 'the' relationship but takes place in a dynamic, group context of multiple relationships. Some conditions of the trust relationship fall not just to individual professionals but also to their employers and, arguably, wider society. Just one example might be the condition of 'reliability and continuity', through which prism all decisions that affect the lives of children in care should be scrutinised to avoid placement change, for example.

Conclusion

To address the 'serious and long-standing' deficiency of the English child welfare system to facilitate high quality relationships, I have argued that we might learn from continental European neighbours. There are perhaps four practical indicators to describe combining relational 'purpose' with establishing 'trust'. First, the relationship is present and future orientated. This means it is about the 'here and now', and how actions, promises, dialogue in the present accumulate to build up a predictability about the professionals' competence. Second, the relationship is founded on concrete, practical actions, often taken together, that start with what matters to the child or young person. They are the experts in their own lives and know what is important to them. Third, the professional is not an empty vessel but has a personal self, which must be consciously and reflectively deployed, as a human being, working in teams, and convey their personal characteristics. He or she must also be able to 'stand outside' the relationship, and analyse its boundaries, usually with support from colleagues in order to be sure it is authentically supporting the young person. Finally, there has to be organisational support for constructing and maintaining relationships, not only to ensure continuity and reliability, by avoiding disruption, but also to support spontaneity and joy by tolerating risk, encouraging creativity and, where judged necessary, learning to cope with unpredictability.

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