Towards an Integrative and Inclusive Child Protection Practice

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ABSTRACT:
The core aspect of the child welfare and protection thought focusing on the family and channelling community resources, is that in order to preserve the unity of the family, it is necessary to widely introduce from the local community the services into the family's life, thus mobilizing the internal resources of the family, and acknowledging parenting, as a social value. Integrative child protection safeguards and maintains the family's responsibility focused on care, while it promotes the protection and widespread social acceptance of the rights of the child. Giving support is understood as a multidisciplinary and multidimensional process, aimed at the promotion of the well-being of children, the improvement of the life quality of each member of the family, and on long term the social integration of families with multiple problems. The present study examines which are the new directions in the Hungarian child protection system centred on social inclusion and foreseeing a system of complex services. In order to perform this inquiry, we present the professional experiences of two model programs: 1) parental skill development programs; 2) mobile application supporting the successful social integration of children and young adults in child care. The success of the presented innovations in child protection is further enhanced by the fact that these initiatives are built on the cooperation of several actors, addressing target group members (children/young people and their parents), professionals working in child welfare and child protection system, representatives of associated fields, and decision-makers. The joint identification and interpretation process of various issues include researches applying complex methodologies, developed for the assessment of the results.

KEYWORDS: child protection targeting social integration; professional innovations; good practices; multidisciplinary, multidimensional helping process; complex services system.

JEL CLASSIFICATION: I31; I38; J13; J18.

Hacia una práctica integradora e inclusiva en la protección infantil

RESUMEN:
El aspecto central del pensamiento de bienestar y protección infantil centrado en la familia y en la comunidad, es que para preservar la unidad de la familia se debe introducir ampliamente desde el entorno los servicios en la vida de la familia. Es decir, movilizar los recursos internos de la familia y reconocer la crianza de los hijos como un valor social. La protección integral de los niños protege y mantiene la

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responsabilidad de la familia centrada en el cuidado, al tiempo que promueve la protección y la aceptación social generalizada de los derechos de los menores. El apoyo profesional se entiende como un proceso multidisciplinar y multidimensional, dirigido a la promoción del bienestar de los menores, la mejora de la calidad de vida de cada miembro de la familia y, a largo plazo, la integración social de las familias con múltiples problemas. El presente estudio examina cuáles son las nuevas direcciones en el sistema húngaro de protección de la infancia, que se centran en la inclusión social, y prevé un sistema de servicios especializados de atención social. Para ello presentamos las experiencias profesionales de dos programas de referencia: 1) programas de desarrollo de habilidades parentales; 2) aplicación telefónica de apoyo a la integración social exitosa de menores y adultos jóvenes en el cuidado infantil. El éxito de las innovaciones presentadas en la protección de la infancia se ve reforzado por el hecho de que se trata de iniciativas basadas en la cooperación de varios actores, que se dirigen a los miembros del grupo objetivo (menores / jóvenes y sus padres y madres), así como, profesionales que trabajan en el sistema de protección y protección infantil y profesionales de campos asociados. El proceso de identificación e interpretación conjunta de los factores de protección incluye investigaciones que aplican metodologías complejas, desarrolladas para la evaluación de los resultados.

PALABRAS CLAVE: protección infantil orientada a la integración social; innovación profesional; buenas practicas; ayuda multidisciplinar, multidimensional; sistema de servicios especializados.

CLASIFICACIÓN JEL: I31; I38; J13; J18.

1. INTRODUCTION

The professional activity of any social worker is inevitably determined by the acquired theoretical background. By the very nature of their work, one of these unwontedly prevailing determining factors is the knowledge and rationale regarding human nature. Within this theoretical framework, social workers identify humans as being determined by the community or by themselves. Thus, a theory followed consciously or unconsciously during practice is either individualism or collectivism. The trends within philosophical anthropology, cultural anthropology and medicine we refer to throughout the study invite us to a more nuanced and less differential or divisive approach than the 'either-or' approach. Being determined by the community appears to be prevailing, but only when contrasted with the Western common thought. Its representatives do not refute the role and significance of the individual. On the contrary, they acknowledge the primary egoism of the individual, but emphasize that in order to shape and preserve their individuality, they need communality and community with the Other/Others. It is important for a social worker to be aware of this fact from various aspects: on one hand, when determining their goals, on the other hand, when deciding about the choice of the methods and tools to be used when pursuing these goals. Last, but not least, it is important also for the efficiency of their work, in order to be able *to focus with and on the client, to cooperate with all affected and responsible parties, to reflect and act within a system.*

The present study attempts to examine which are those new trends within the child protection practice in Hungary, which have at their core social inclusion, and advocate for a system of complex services. The first part of the study deals with the concept of human being in general, then, as we advance from the general towards the specific, from the abstract towards the concrete, human being is replaced in our reflection by the client, in particular the parent as client. By embedding the arguments of various disciplines into social work theory, we argue that in order to achieve an efficient, inclusive child protection, the following are indispensible: we need to become acquainted with the client; we need to take into account the mental, physical and cultural factors determining their character; instead of unilateral correction, we need to acknowledge change relying in interaction; the cooperation with various actors needs to be voluntary and mandatory; and all this has to be seen in a systemic approach. In order to illustrate this, we briefly present the professional objectives and results of two model programs: 1) parental skill development programs; 2) YounGo, a mobile application supporting the successful social integration of children and young adults in child care. While analysing the model programs and the ways they pursued their objectives,

we explore the professional principles and values the programs are built on, the way how they display complexity, and why they can be regarded inclusive. In conclusion, we highlight the characteristics of the multidisciplinary and multidimensional supporting process from the perspective of literature review and the model programs, in order to improve the life quality of the target groups of child protection.

2. The concept of human being and social work

2.1. The social worker and the theory

Pragmatism as philosophical movement is surprisingly present in social work as well. Partially. According to a pragmatic thinker, the truth of a theory relies on its usefulness in practice. They do not deny the necessity of theory, but recognizes its authenticity with certain conditions. In turn, the basic approach of a social worker devoted to pragmatism is different to that, and has a more restricted content. According to their belief, their work requires rather common sense than theory (Woods, 1994, p. 33). This approach is intensely, though not consciously (or not assumingly) determined by pragmatism, which considers theory as irrelevant. According to methodological experiences, this attitude is rather common in Hungary. Services are provided according to the common sense, and not on the basis of various theories. At a first glance. Common sense applied during practical work is always backed by a conviction underpinned by a set of arguments, an approach, an attitude, a way how the acting person interprets things, people, or events. And this is theory – let it be a set of knowledge and rationale acquired during education, transmitted by the parents or community, or otherwise acquired. One has to differentiate between the unavoidability of theories and the action based deliberately on theories. While the existence of the former would have to be based also on a theory, the arguing for the general prevalence of the latter is confronted with pragmatic facts. The pragmatic social worker does not question the theories, their validity or actions based on them, but the action *consciously* based on theories.

2.2. The social worker and the human being – ontology

One of the classifications of social work applies the theoretical differentiation between case management, direct support and community-related approach. Pragmatism still accepts this differentiation, however, it would see no sense in examining the influence of philosophical anthropology, or more precisely, in discussing it in detail. Rightfully – in case of a self-serving intellectual curiosity. Nevertheless, when asked about their views and thoughts on humans, they would give a detailed and, let the case be, structured and systematic answer, applying a philosophical argumentation as well. The social worker cannot practice their profession without having a contoured interpretation of the world and of humans. Reflecting on the world is philosophy, irrelevant of the depth and sophistication of such thought. Of course, only thought in its broadest sense upon the world conceived in its broadest meaning can be regarded strictly as philosophy (Sellars, 1962, p.1). Human being is present, no matter of which field of philosophy we are speaking (at least as a subject.) However, it is the philosophical anthropology, which is engaged specifically in examining human nature (Orthmayr, n. y.). Ontological inquiry, thus metaphysical thought is indispensable to the exploring of the human nature[1]. While doing so, we are at the core of the debate between the Platonic and Aristotelian version of realism[2]. According Platonic realism, the particular individuals of mankind are communal beings, while according to Aristotelian realism, the human individuals are undividable (individual) beings. Accordingly, regarding the (ontological) essence of human individuals, two prevailing approaches can be identified in the history of thought: individualism and collectivism.

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[1] In our argumentation we deliberately rely on the Aristotelian realism, and use the terms of the Aristotelian metaphysics.

[2] In order to use the accurate terms, we used the respective parts of the special series on humanities published on the website of the Eötvös Loránd University, see:
http://mmi.elte.hu/szabadbolcseszet/mmi.elte.hu/szabadbolcseszet/indexe947.html?option=com_tanelem&id_tanelem=1046&tip=0.

2.3. THE SOCIAL WORKER AND THE HUMAN BEING – PHILOSOPHICAL ANTHROPOLOGY

Philosophical anthropology cannot disregard from the metaphysical layer; thus, concerning the societal nature of humans, obviously both individualistic and collectivist approaches are present. Instead of individualism and collectivism, Haeffner (1989) highlights a different nature of the human being: interpersonality, consisting in the "constant, wavering interpenetration" of the Self and of the Other (Haeffner, 1989, p. 41). In this approach the individual (the Self) preserves his/her individuality and particularity, but obtains this individuality only in interaction with another person (the Other). The definition of the self as Self and his/her differentiation from the Other can be realized only through accepting the existence of the Other and by relating to it. Moreover, the development of the Self can occur only through belonging to the Other, by relying on the Other. The definition of the sociality of the human being by Haeffner does not reject the primary egoism, according to which the individual considers him/herself as the centre of the world, but allows space for the other as well, without whom he or she cannot become him/herself. In this process of becoming thus not only the human being needs to take into account the other, but to certain extent he or she needs to accept and rely on the other. The Self has this above described relationship not only with the Other, but with multiple Others. Their relating to each other is made possible by their common essence, their being humans. As we can see, human being can be understood as mankind (see above: secondary substance), but also as a particular being (see: primary substance), depending on perceiving human being in his or her broader environment or in his or her relationship with other human beings. In both approaches the convergence of existence and incidence can be detected, which is a well perceivable (limit) value to the human being/individual.[3] The reference and referral factor of significance and meaning is the human being/individual[4]. However, human being is not only a (limit) value for interpretation and meaning (fullness). He or she is able to shape existence and incidence, and to give meaning.

This is the point from where Landmann (1984) sets off when rejecting individualist anthropology, as a trend depicting human being only in its bodily and mental attributes. According to him, besides physical and mental attributes, human being has one more "organ": culture. But regarding (limit) value, his approach is not collectivist, but individualist, since it places, more precisely keeps the human being in the centre of everything.[5] Concerning human being, Landmann's theory is relativist and finally self-determinist, alike individualist theories. The difference is that he determines the human being not only as a physical and mental being, but as a being determined by culture and determining culture. Although individuals have cultural features (for individualists, these are bodily and spiritual features), but the essence of human being is that he or she is able to close up, to create an endless number of his or her culture. He or she is able, therefore is responsible too. It is important that human being does not have an eternally determined or inherited essence. Or, he or she does have, but that essence is not content-related, but structural: the ability to create him/herself. This has two implications regarding individual beings. First, that they do not have a content-related essence, a pattern they should fulfil, which would act as a reference and also as a purpose. Second – and this ensues from the first conclusion –, they cannot act rightly or wrongly. They cannot be better or less good, bad or less bad. It is not an insufficiency even if they do not live according to their essence, that is they do not use their ability to self-definition; it is sufficient if they adapt, meaning that they *take over* the culture. In this respect value judgement is irrelevant. Only results are relevant, more precisely the lack of success, the reference of which is survival. Or, to be more precise, the failure of survival, the reason of which is that they took over the culture, but failed to shape it according to circumstances (did not make use of this possibility to self-definition). In this approach, survival has an

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[3] Concerning convergent lines see: https://www.mathsisfun.com/algebra/infinite-series.html;
https://www.tankonyvtar.hu/hu/tartalom/tamop412A/2011-0098_analizis_lepesrol_lepesre/ch01s02.html.

[4] In what follows, we use the term human being, interpreting its various meanings depending on the context.

[5] It is true tough that he approaches anthropology with a view of understanding the human being, and not his/her place in existence.

existential meaning. The failure of survival means not only physical annihilation, but also a spiritual, emotional, moral, intellectual destruction[6].

Regarding the topic of our study, sociability does not mean either for Haeffner or Landman that the individual would share the same time and space with others; they argue that individuals are in relation and interaction with each other in their shared existence in time and space. The Other in Haeffner's thought is the culture for Landmann. Just as the Self is shaped by his/her relationship with the Other and reversely, the Other is influenced similarly as Self, culture also shapes the individual and the individual shapes the culture. To relate all this to social work: one-sided shaping and development, as expectation or possibility is a priori destined to failure. The efficiency of a social worker depends on the Other, the culture, thus on the client as well. If we consider efficiency as a professional requirement, it is indispensable to get familiar with the client, their mental, physical and cultural attributes, to take these into account, to acknowledge change occurring due to interaction instead of one-sided correction, and to acknowledge the obligation of cooperation with actors having an influence on or having responsibilities toward the client, and finally, to consider all these factors within a system.

2.4. SOCIAL WORK – CULTURAL ANTHROPOLOGY

The above mentioned classification of social work (case management – direct support – community feature) is in a casual relationship not only with the definition of the essence of the human being, but is closely related to the attitude toward human being (which, of course, ensues from the theories concerning the essence of human being). Case management reacts to the client/parent, as to a case, regarding it as a challenge, as the object of correction or intervention, as a type of problem, as a request for, beneficiary or refusal of a service. Typically, it does not regard the client as a being constructed by particular, physical and mental features and cultural influences; however, it undoubtedly thinks and acts within a system, although the parent is not part, but object of this system. The professional opting for or obliged to provide direct support cannot allow him or herself this deconstruction. The parent as an individual being is a given factor, and he or she needs to react to the parent's needs personally and directly, by providing support. Reaction is personal, because it is connected to the personality of the social worker, but it is not tailored to the client, as we will highlight it later in the study. Certainly, it is not based on a mutual relationship. Providing help within a professional framework implies a relationship burdened by multiple external expectations and obligations, in which it is not always the parent who determines the need of the child or his/her own need, and clients are often only passive actors to the intervention. Thinking and acting within a system has a secondary importance. Social work built on community-based approach is a process, in which the parent, the child and the social worker are involved not as beings isolated from each other, and not as interconnected actors either, but as beings reciprocally affecting each other. This reciprocal influence is not incidental, its framework is given by the social worker, as the social worker is aware of the divergence from the parent and the child, and of the distinctiveness between the parent and the child. Social work conceived from this perspective is not based on a priori rationale, but on sensuous experiences filtered through cultural anthropology. Jackson's (2017) basic presumption is that cultural anthropology cannot be practiced as an outsider, isolated from the cultures one intends to explore, positioning oneself in an observer's role. Referring to R. D. Laing[7], he believes that either complete detachment or full junction are not ontological possibilities. On the contrary, these dichotomies reveal that while human existence is deeply communal, it always entails the significance of particularity and solitude. Therefore, the cultural anthropologist cannot approach others' life and own space as to a laboratory. The professional needs to leave behind his or her being a researcher (particularity/distinctiveness), and let become him or herself the subject of an experiment; he or she needs to allow the world to "work on him or her", transforming his or

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[6] Provided that it was not destruction the (limit) value of self-definition.

[7] "(…) we are faced with a potentially tragic paradox where relating to others is an equally essential part of our existence, like our distinctiveness from others, but there isn't any particular person who would be an ineluctable part of our existence." (Jackson, 2017, p. 3).

her way of thinking and guiding his or her actions. He or she especially needs to restrain from reducing human lives to cultural representations, social norms and sets of values.

Green (1978) transposes into social work this specificity of cultural anthropology's approach by translating it to three requirements. According to the first demand, in order to form a proper opinion on a society or on a layer of it, one needs to learn to perceive the world as the members of that society do. Secondly, one needs to see holistically the way how people organize their world, by embedding it into a broader cultural context. Third, diversity is typical to every society, and the more a society is developed technologically, the more it is diverse. The importance of these requirements is given by the fact that both their rejection and acknowledgement determines the direction and goal of social work intervention. Green reveals this impact through the perception and treatment of child abuse and neglect. The protection of children from abuse is a unanimous and indisputable obligation. However, when examined from the cultural anthropology's perspective, this unanimity and certainty is undermined. He argues that child abuse and neglect do not have a theoretical definition applicable to all cultures. We do not even need to perform a comparison between different cultures, since even within a society having a legal regulation generally considered developed, like the one in the USA, there are many cases besides the unanimous ones and those in the news, where the social worker has to make decisions regarding intervention and its goals without disposing over a firm standard. The point of reference in such cases can be the acknowledgement of the values of their own professional sub-culture (see Fine et al., 2000), on the other hand the effort to understand the attitude language of the other party embedded into the other's own cultural context. The consequence of an ignorant attitude could be, for example, that despite applying multiple therapy methods (like family therapy, group therapy, development of parental skills, psychodrama etc.), the efficiency of the intervention would be incidental and accidental. This is due to the simple fact that these methods are rather part of the social worker's professional subculture than originating from the client's culture. The professional can set real goals and can elaborate/apply methods adjusted to these goals only if he or she takes into account the cultural specificity of the parent (which, in most cases, differ from the professional's culture). In order to illustrate this, let's examine a case analysis (Marvin et al., 2001). Sue Whitely was teaching in the same school for twenty years. During this time, the composition of the population in the town changed, it became much more diverse due to Mexican and Cambodian immigrants. The immigrant parents find employment in the local industry, and although the town was accepting them, a few people were concerned that the immigrant children would have an unwanted influence on theirs. Therefore, the school entrusted Sue Whitely to provide training for the parents regarding efficient child raising techniques. Sue was an excellent teacher, who had grown up and lived in a middle-class suburban area, thus she didn't have any experiences regarding people belonging to different cultures. Thus, she was not aware of the fact that her values, which were those of the dominant culture, are different than the values determined by the culture of the immigrant families. So, when she intended to present parental values, she started from her own, white-Protestant, middle-class values. Her basic starting points were parent-child dialogue, the necessity of the attachment of children towards school, that parents need to take part in the school life and to supervise homework. She decided to schedule the activities for after-noon hours, when children have extracurricular activities, and she sent a written note through the children. Twenty parents participated at the few first occasions, all being middle-class white people. It was clear that she could not reach out to her target group. She had committed several mistakes. Many immigrant children didn't attend any extracurricular activities, because they were needed at home. In many families both parents were working, thus none of them could spare time to attend the activities. Moreover, in these ethnic groups the oldest man has an outstanding authority, which excluded that he would participate at such programs. Finally, in most immigrant families people didn't read or speak English, thus the written note could not fulfil its purpose.

2.5. Social work – physiology – psychology

A unanimous definition of child abuse and neglect meets significant difficulties, while its necessity is not solely a theoretical issue. The difficulty is given by cultural and subcultural differences. Until a

definition accepted by all cultures is lacking, the goal, methods and targets of intervention become pliable and relative. This is especially true regarding parental responsibility, more precisely parental attitude. What makes a parental attitude abnormal? Is such judgement objective, or is it a judgement of somebody? Is parental responsibility determined by a single or by multiple factors? Accordingly, does intervention comes from and aim at the parent alone, or does it have multiple directions? Is "normalization" the task of the parent or social worker, or are other actors also responsible and entitled? We attempt to answer these questions starting from the concept of health on the basis of the volume edited by Hens et al. (2017).

Health is the ability to preserve life under certain conditions, while pathology implies a decreased ability to adapt to the environment. Given the fact that health and pathology are the system of relations between the organism and its environment, an individual and its functioning cannot objectively be considered pathological or abnormal. This is true despite the fact that since its arising as a science, by refusing the above definition, physiology attempted to set up those norms, according to which the functionality of a being can be regarded normal (healthy). It believed to find these norms in the statistical mean values deducted from empirical research. What is interesting about this method is that it qualifies the statistical average as an objective existence (with an ontological status). Therefore, the normality of a feature is given by the correspondence or divergence from this norm, weighted through measurement. Measurement requires a valid test or tool, which becomes valid when there is a causal relationship between changes occurred within the features and the results of the test. Thus, a property is needed, existing in reality as well, and a convincing theory describing the functioning of this property/phenomenon. Besides, a measuring tool is need, developed on the basis of this theory. Finally, a causal relationship needs to be detectable between the changes of the feature and the measurement results given by the measurement tool[8].

One of the difficulties in psychological measurements is caused by the fact that such measurements cannot comply with either ontological, underlying theories, or requirements concerning cause-effect relationship. For example, IQ tests measure an attribute, the real existence of which is not yet proved. It hasn't been convincingly proven yet, because there isn't any set of knowledge and reasoning (theory) which would allow for this. The measured attributes and the results of the test do not ensue from each other (causal relationship), but are correlated. Even if we were able to authentically measure psychological phenomena, we would need to answer anyway the question (alike in the case of physiological measurements): why and on what basis does anyone decide that a certain measured value is too high or too low? The problem is not given by the fact that the norms of psychological tests are determined on the basis of statistical average values. Their validity is called into question, because deviance from an average value implies a judgement in itself. Psychological measurement is a normative (estimating and judging) act by not taking into account the context in which the measurement was performed. Thus, psychology significantly deviates from the notion of health as described above, defining health as the ability of the organism to adapt to changing circumstances. Psychology points out the normality (health) or deviance from normality (pathology), abnormality of a person by disregarding context, not relating it to an objective norm, and on the basis of a measurement which cannot be considered valid. The assessment of normal/healthy and abnormal therefore is the result of a subjective valuation, and not of an objective one. Yet, the individual is a product of his or her own culture, thus health and pathology are underpinned rather by a social than by a scientific appraisal, if we define the notion of health as compared to a norm, and not by the adaptability to environmental conditions. This conclusion is especially true if the assessment

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[8] For example, it is possible to measure the body temperature, because a convincing theory exists stating that bodies consist of molecules; the molecules are in motion, and their motion results in energy called kinetic or heat energy; bodies with a higher level of kinetic energy can transmit their energy to bodies with a lower level of kinetic energy. Applying this theory to the measurement of the temperature of the human body, this means that the human body transmits its kinetic energy to the thermometer, due to which the volume of the liquid within the thermometer starts to expand until the temperature of the two bodies become equal. The process can be followed and measured through the scaled glass tube. However, all this proves only that a change may generate another change, and the former can be measured through the latter. It does not indicate to us whether this change true is abnormal. As we can see, even the validity of physiological measurements is highly problematic.

of a relation to a certain norm is performed by disregarding the given context. Since humans are part of a human ecosystem. As a consequence, they can be understood and assessed only within their context.

Applying the above deductive conclusion, this reasoning can be applied to the parent, as client as well. The normal and abnormal (healthy and pathological) parental functioning is not a measurement, but a survival situation. A parent's functioning is not abnormal (pathological) because it cannot be correlated to the optimal sphere of the "Normal Parent Assessment Scale". Parental abnormality is a psychological term in the sense that it can be considered behaviour, while one can always identify a mental phenomenon behind behaviour. And mental phenomenon and behaviour are both topics of psychology. If (healthy or abnormal) parental behaviour belongs to the field of psychology, then the statements regarding the normative assessment of psychological features are valid to parents as well. A parent isn't acting abnormally, because the results of a measurement revealed that the parent did not obtain the necessary points/level in a measurement system. We could see that there isn't a valid measurement method and tool, but the definition of the "normal" range of values is also based rather on a subjective decision than on objective facts. The parent cannot function normally, because his child has a reduced ability to adapt to the environment, which is attributable to the reduced adaptability of the parent. We need to stress upon the environmental factor. The parent is part of a human ecosystem not only as a human being, but also as a parent (Rubin et al., 2006), and this system strongly impacts his or her being a parent. This system includes the values, beliefs, legal requirements regarding parenting, but also includes social class, neighbourhood, kinship and the network of relationships, media, health and care system, the social services system, the peer community and school of the child, in the centre of all this being the parent and the child. The elements are part of a system, and as such, they are in interaction. This is important from two aspects: on one hand, the appraisal of the adaptability is possible only considering connections too, by mapping all elements and the influences and interactions between them; on the other hand, change cannot be fuelled towards a single element. It is especially important that the restoration of the adaptability cannot be the responsibility and obligation of a single element and connected agent. Since all this implies a system, intervention cannot be one-sided (of a single person), agents/actors connected to different ecological elements cannot be disregarded, and especially one cannot let out the sole and single sufferer from the deficiency of resilience: the parent. This is the only way how the efficiency of social work can be ensured: *by paying attention to and with the parent, cooperating with all the affected and responsible parties, and by reflecting and acting within a system.*

3. INTEGRATIVE CHILD PROTECTION

The regulatory environment grounded by the Hungarian Child Protection Act of 1997 makes possible and promotes both the direct providing of help, and case management (on the level of administration, service, and care). It refers the provision of direct help under the responsibility of the child welfare service, while in case of a more significant risk, the case manager intervenes, in order to repel risk factors on a higher, central level. In the dual model, theoretically parental skills development is possible both in individual and group format, but in practice, due to the high number of cases, there is no time for such actions targeting either prevention or correction built on complex methodology. This is precisely why the hereinafter presented parental skills development programs can be regarded as important interventions in terms of the set of values and objectives of child protection alike.

Optimal parenting implies a supportive, sensitive parental attitude, reacting to the needs of the child; it is emotionally expressive, efficient regarding upbringing, and optimising the development of the child. Not all parents are able to ensure all this under all conditions. Fulfilling parental tasks can be difficult and stressful, and could require support, which does not necessarily imply child protection intervention (Bromfield et al., 2012). In case of families with complex needs solution cannot come isolated, from a single service provider. The approach focusing exclusively on the individuals would fail to reveal complex needs and simultaneously respond to interconnected problems and needs (Kendall et al., 2010). The basic principle of family-centred, holistic services is to support the broad enforcement of the rights of children

and families and the satisfaction of their needs within the family. The principles centred on the integrity of the family are the following: 1) Family is the most proper setting for the upbringing of the child; 2) Families have the right to access resources and possibilities, which allow that children grow up properly within their families; 3) Families have the right to privacy, except if a child is endangered. In turn, the following principles focus on the right of children: 1) Parental rights are conditioned by the obligation referring to the protection and well-being of children; 2) Children have the right to equal chances in life, and to basic elements of development, like the sense of belonging, care, safety, access to possibilities, and a life according to the norms of the majority society; 3) Children in danger have the right to the protection of the community (McCroskey & Meezan, 1998, p. 55). In the practice of the Hungarian child protection, the entire system of the child well-being services aims at supporting the upbringing within the family, on the basis of the principle of gradualism[9]. However, recent types of services, acknowledging the necessity of handling complex problems and answers at system level, did not integrate into the set of methodological tools and theoretical background of child protection. The financing of specific programs is fragmented and incidental, access is limited within specific programs, and often a conceptual error can be detected on the level of planning and execution, namely that in order to compensate and diminish disadvantages, the services focus on the weaknesses of families instead of their strengths. Yet these conceptual or structural tensions in service providing increase the possibility that the child would be placed outside its home, thus the emphasis is moved from fulfilling the welfare, well-being function to the protection function. On the basis of the weight of problems and the stress level within the family, family-centred services can be divided into two main categories: 1) family support, and 2) family preservation. The former is connected to a normal stress level, thus to the enhancement of the safety within the family, while family preservation services were designed to support families facing high risks, eventually being in a crisis situation. These families are already within the sphere of child protection, thus the goal is certainly to prevent the removal of the child (McCroskey & Meezan, 1998).

Child protection programs built on a complex approach lay an emphasis on the strengthening of the role of the parents in order to achieve positive changes. It is important to note that families with complex needs are often socially marginalized, and it may occur that the source of their problems relies within their own family. However, there are a few factors that are worth considering when planning the intervention. On one hand it is important to deal with the social role of the individuals, as an impacting factor. When planning and providing support, the social network of clients and the community and peer resources are worth involving. All these factors are very important besides formal support, and after (beyond) providing support. In order to ensure the flexibility and comprehensiveness of a service, professionals' presence needs to be systematic and accessible, and they have to get familiar with and understand the cultural conventions of the clients. Even in the case of the best and most complex programs, inappropriate interventions may undermine the expected positive results, thus the successful professional outcomes (Terry at al., 2015, p. 28-30; Children's Workforce Development Council, 2011, p. 52-53). Two more aspects are worth to be highlighted; these were prevailing within the model programs implemented in Hungary, which will be presented in the following part of the study: 1) Decentralized and participatory management: this means that decentralized financing, administrative and management structures are fundamental in a community-based service system, and the different child protection and well-being programs have to promote democratic decision-making processes both on management and direct service providing level. 2) Social inclusion: the communities and the service providing organizations play an important role in ensuring the inclusiveness of local services and their reacting to the needs of excluded social groups (Davis, 2005, p. 29).

Assessments of complex programs reveal that those programs are successful, which, besides the direct support to parents, ensure positive experiences to the children as well, so which include simultaneously the primary and secondary target groups of child protection. One of the indisputable positive outputs of these programs is that parental roles are strengthened on the short term as well, and the child-raising

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[9] For more details on the specificities of the functioning of the Hungarian child protection system see Rácz, 2015; Balogh et al., 2018.

attitudes change. The attitude towards care also becomes appropriate, and the parent becomes able to apply positive disciplining techniques. It is outstanding also that the parent is able to turn towards his or her child, and gets to know the development process of the child, which creates emotional safety in the parent-child relationship. Regarding parents, this is coupled with an enhanced self-confidence besides the dynamic development of skills and competences (McCroskey & Meezan, 1998). In order to achieve good results, we need to regularly repeat the measurements, paying attention to the changes, to the evolution of the reactions of the actors, in the same time to the timely reaction from the part of the service providing systems. All this implies that besides the 'here and now' approach, the 'let's start from the beginning' approach has to be applied simultaneously, together with the approach 'built on strengths' (C4EO, 2009; Bromfield et al., 2012).

We have to take into account the difficulties too which could trouble the cooperation with the families. Such a difficulty is that in many cases the cooperation with the families is compulsory, so generally the family does not reach out to the service provider to the initiative of the parent, but due to the initiative of a member of the reporting system. The professionals step into the privacy of the families, and collect information on sensitive issues. They need to make efforts to acquire information of a proper quality and quantity related to concrete issues, and to use this information during their cooperation with the family. The professionals should be aware that service users may hold back information, if they are under pressure. The parents are afraid of child protection services, they are frightened to lose their child. The twofold role of the professionals also bears difficulties: on one hand they have to represent the child's interests, on the other hand they have to support the family as well in solving their problems. It often occurs that professionals attempt to achieve advancement and results by addressing the parents' fear. From the part of the clients, stigma, previous negative experiences and the ensuing anger and resistance also determines the willingness to cooperation besides fear. As on the side of professionals, the factors hampering work are the high number of cases and the extensive administrative work to the detriment of the case management. Respectful professional-client relationship has to rely on reflexivity, self-awareness and mutual involvement. Previous, paternalist child protection approach can be avoided through active, bilateral communication. This also implies that the professional cannot attempt to educate the client or to change their views on reality; but starting from the assessment of the client's situation, they should rather support the client in formulating and achieving goals which contribute to the well-being of the client and their family (Budd, 2005; DePanfilis, 2006; Pasquet, n. y.; Schreiber et al., 2013; Webb et al., 2014). In case of removing the child too, the parents give importance to the above listed child protection principles, i.e. empathic approach, that professionals should understand the situation of the family and the given context, that the professionals should continue to support the dialogue between the parent and the child, to their meetings in general, to allow time in order to comprehend and analyse the newly arisen situation, especially in the sense that they should not suggest that this could be a definitive situation, even if the time limits of change are not known. It is important that expectations remain unambiguous and consistent (Ross et al., 2017, p. 52).

4. Innovative approaches in Hungarian child protection

In what follows we present two innovative solutions designed according to the above presented child protection principles and values[10]. The first program focused on the development of parental skills and child resilience in case of families on the edge of child protection and families included in child protection care. The second program consists in a mobile application, which is built on the issue of becoming an adult, and aims at supporting successful social integration of individuals in child protection care.

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[10] Both programs were implemented by the Rubeus Association (www.rubeus.hu). Both authors were involved in the elaboration and testing of the model program, as well as in their assessment.

4.1. MODEL PROGRAMS TARGETING PARENTAL SKILLS DEVELOPMENT WITHIN THE RANGE OF CHILD WELFARE SERVICES[11]

The aim of this model program was to create an innovative tool/set of tools, which are adequate for the broad strengthening and complex development of parental skills. The program had two target groups: clients regarding whom authorities have taken measures within the primary care services, whose child is under a procedure of removal – in their case the aim was to prevent the removal of the child; the parents of children already in care, aiming to support successful returning to the family. Five family and child well-being centres participated to the program, from very different areas of the country, which largely determined the sphere of social issues: the 25th district of Budapest, Szekszárd, Szentes, Pécs and Sopron. The model locations undertook to include 100 families and 200 children; they worked out their own 6 months long program themselves, tailoring it to local needs, along the expectation that these would be innovative both on local level and within the child welfare system. Mentors ensured professional assistance during the implementation of the programs. Since these were complex programs, the related efficiency measurement consisted of complex elements as well: child resilience assessment (input and output), parental skill assessment (input and output), local visits at least 2 times, interviewing at least 4 participants at each location at the beginning and at the end of the program about expectations and results, satisfaction survey with participating clients at the closure of the program[12]. It is important to note that a new set of measurement tools were developed in order to assess child resilience and the change of parental attitudes. In case of children, changes inflicted by the six months long program were measured on a scale of 10 items in case of children aged below 10, and on a scale of 25 items in case of children aged 11-18. The most important dimensions of the scales: interpersonal relationships, family safety, trust towards helpers, future visions. In case of parents, the scale consisted of 20 items, and inquired attitudes related to parental roles, the ways of experiencing these roles, relationships with children and adult family members, the importance of common activities.

The program locations implemented their professional plan along very different methodologies, but the applied methods were all centred around 4 types of methodologies and their combination: 1) intensive family care; 2) parent group; 3) child group; 4) family group conference. Intensive family care is new in the Hungarian child welfare practice. According to its conception, the social worker would meet the family on a daily basis if needed, occasionally he/she would spend several hours in their home or direct environment, and is available on mobile phone even after working hours. Within the model program, the intensive family care focused on the intensive support to life management, besides child upbringing. Parents and children groups were built on work in thematic groups, where the processing of individual experiences within the group was a central topic. The Family Group Conference is a special method, representing one of the restorative techniques, a meeting of family members in a broader sense – including the extended family, friends, neighbors –, summoned in order to conceive a plan for solving a specific problem.

These methods were coupled with further working tools, which partly ensured the support background of professional work: performing social diagnosis for the definition of needs and links to resources; creating and engaging a multidisciplinary team during the program; trainings for professionals, like communication, awareness raising and mediation. Besides these methods, the following parental skills were developed: housekeeping abilities; life management; communication with the partner, children and members of the extended family; specificities of childhood, with a special attention to adolescence; attention filled with compassion; spending quality time with the children; spending time with the family in a useful manner; common experiences respecting the specificities of the child's age; understanding the

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[11] The model program was conceived with the support of the Ministry of Internal Affairs and the National Crime Prevention Council in 2017-2018. The program is still continued with the involvement of families and children affected by criminal acts.

[12] For a brief presentation of the programs and the most important results of the research see: Czinderi et al., 2018.

problems and feelings of the child; understanding the importance of school in social integration; fostering cooperation with the helping professionals in the interest of the child.

According to the results of the model program, through efficient cooperation, the procedure of putting a child under child protection can be rapidly stopped, and within primary care as well, services provided at the family's home can be supported. According to the accounts from the model locations, the programs applying complex approach and methodology are adequate for handling efficiently the troubles arisen within the family, for restoring the functionality of the family, in general for the mobilization of the internal power of family. *"Our aim is to have a comprehensive view on family care, on how we can support families and how we can help the raising of children within their families. Beyond the actual results, this program ensures a framework in which professionals can make use of their expertise. Thus, the primary and short term purpose of our program is to get to know the families very intensely. (...) Our aim is that the social worker providing family assistance and the case manager, respectively the family itself think in a different system. The clients should feel that they participate at a very intensive program, in which they receive all support needed. On one hand, they receive material help, on the other hand, they receive direct and adequate answers to their problems from the social workers."* (Professional leader)

The strength of the programs relied in the fact that parental skills were enhanced through the children and parents, the parent-child relationships certainly were improved, and in many cases family conflicts eased or were solved. Positive changes occurred in the relationships between colleagues and with representatives of associated fields, especially concerning information flow and a more open communication. Trying out new methods ensured positive experiences for the professionals, despite the fact that they often felt for example that less people attended the groups than expected. *"(...) they should believe that they can help each other, since some of them are already past an era, and we can provide support and theoretical background, which enriches their mentality, so we try to strengthen them by moulding theory and practice."* (Social worker) The participants were strengthened to see they are not alone with their problems, and to meet families struggling with similar difficulties. *"We had good talks. I got closer to the social worker. We got along well, but with others too. And I got to know people within the program."* (Mother attending parental training) An important objective of the programs destined to smaller children and teenagers was to provide real experiences to them, to address them in a language and manner which can be understood and enjoyed by them; meeting with peers was a decisive factor in this case as well.

The professionals also highlighted that social work as practiced during the program was indeed appropriate for serving the empowerment and well-being of clients. The professional work carried out during the program revealed a child protection practice focused on services, and welfare and well-being instead of protection. According to the professionals, the amount of financial support (3.3 million forints, approx. 10,315 euro/model program), which could be used freely, meant a huge support for the 6 months period (this support was used to buy tools, finance trainings, pay fees to those working in the program, and cover catering and travel expenses for the parents and children included in the program); however, the real change in their mentality and attitude was brought by professional success, the fact that they could experience real cooperation, they could point out professional issues, share dilemmas with each other, and above all, they could achieve rapid changes in their work with the clients, and in many cases, they could produce rapid advancement in procedures of including a child into child care services, which otherwise lasted for years. They also accounted that the freedom in professional work, the fact that during 6 months they could work with their own methods and with a new approach inducing creativity and innovation, at the beginning was rather frightening and strange for social workers, beyond challenges acknowledged at managerial level. In order to achieve the objective of social work, at organizational level and at the level of child protection system, a vision regarding good quality society needs to be formulated, in which, in Banks's term, (2011), the protection of human rights and the fight for social justice is central in social work.

4.2. YounGo, an always available helper in the pocket[13]

In 2017, a number of 20,948 children were raised in child care, and 2,417 young adults received after care support (people aged 18-24) (Balogh et al., 2018: 93). Research shows that it is not sufficient to start preparing youngsters for independent life when they reach adulthood; this should be started consciously, at the age of 10-12 (Rácz, 2012). The firm objective of this deliberate professional attitude is to enable the youngster leaving the system to get on in the society, without being constraint to welfare services and social benefits. All this requires a high level of awareness and competence from the part of professionals. This also implies that professionals should be aware of the local support types, and actively search for possibilities, which could contribute to the independence and success of young people in all fields of their life. A further important requirement is to reach out to the youngsters using communication channels and styles familiar to them. The development of the YounGo application was grounded by a thematic series of events (2015) and a comic book (2016) destined to children and young people living in child care. Child protection professionals, researchers and the young people in child protection themselves took part in the development of the application (2016-2017). The application addresses issues related to becoming an adult, like continued education, housing, sexuality, sobriety, social network, job search, establishing a family. The primary target group of the project included children and young people aged 12-30, who grow up in child care system, without having a family. These issues, however, can be promoted among all members of this age group. The secondary target group of the project included professionals working with children. The YounGo project consists of a mobile application accessible on Android and iOs platforms, of a sensitive webpage (www.youngo.hu), and of an editorial system. The professional performance of the application from a child protection perspective can be assessed as follows:

- program preparing to independent life;
- application of a new method, new communication form and style;
- addressing professional issues for children and young adults;
- addressing professional issues for professionals working with children and young adults, who currently dispose over limited tools in connection with these issues;
- social awareness raising among individuals living in child care system, furthermore, revealing these issues for children living in family and for people working in other fields, i.e. actors of public education, and parents.

Prior to its launching, the application was tested by 50 children and youngsters in child care aged 12-24; they gave advice about the issues they found important when supporting the starting of an independent life. During testing, the application proved to be very well received by the children and young adults; their general opinion was that the content is adequate for their life condition, they could obtain new information, moreover, they found useful the way how familiar issues were highlighted, since this application allows them to access these issues in one place, in a structured manner. According to their feedback, the formulation of the content within the application suits their taste, is easy to understand and also meaningful. Professionals working with them also think that it is useful to have a tool, through which they can easily discuss certain issues with them, which are unavoidable in becoming an adult; the linked pages, like those related to carrier choices or finding an employment help them in their everyday work.

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[13] It was developed with the support of the Ministry of Human Capacities. Currently the application is being promoted within the child protection system in order to be used by as many people as possible; simultaneously, an awareness raising campaign is conducted among the population, in order to assist the social inclusion of the youngsters within the target group.

5. Towards an integrative, inclusive child protection practice

In what follows, on the basis of professional objectives and values identified in specialist literature and revealed through the presented domestic good practices, we attempt to reflect on the features of the integrative and inclusive child protection at system level.
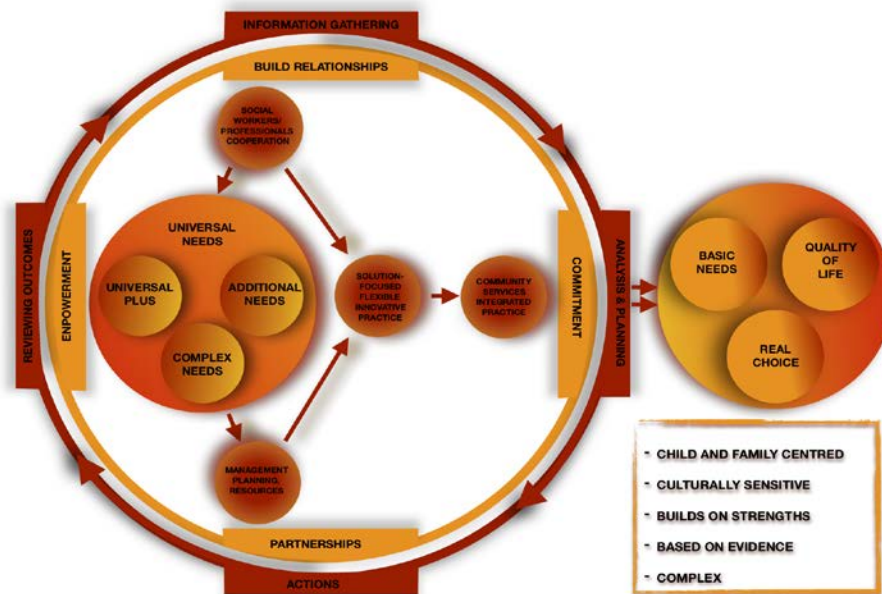
Table 1.
Features of an efficient service delivery system targeting the well-being of children, young people and their families, applying a community-based approach

Prevention, early intervention	It focuses on support at early age; emphasis is on the range of prevention solutions against reactive interventions. It is based on the presumption that healthy childhood is the basis of a successful adulthood. Increasing risks are associated with services ranging from generic forms of support to targeted services tailored to special needs.
Integration	It builds on a multisectorial approach, including educational, health and social care and services. Members of the target group are included in the evaluation and development of services. The conditions of functioning are transparent and predictable both on managerial level and for professionals involved in case management. The cooperating service providers share responsibility, and the results together produce a high quality, complex service providing as output.
Child and family centred	It focuses primarily on the child, but takes into account the needs of family members, and regards family as a unit. It listens to the affected actors, and involves them into decision-making. It puts into the centre the development of the resilience of children and young people, and the supporting of parenting.
Flexible service providing system tailored to individual needs	The identification of needs, then the planning and execution of interventions are flexible, since these are adapted to individual needs. (This is the 'there's no wrong door' approach.) Members of the target group can feel safe and comfortable, as professionals accept them. Services are typically local and close to the families. Help arrives in time and is ensured until the problem is solved.
Communication and information sharing	Information flow between cooperating professionals is adequate, the quantity, quality and up-to-datedness of information serve the common goal. Communication with children, youngsters and family members is direct.
Positive outputs based on evidence	The evaluation of results and the perpetuation of successful outputs and good practices is a guarantee to success. The existence of a predictable service providing environment is undoubtedly a precondition to service delivery. Services can reflect on changing needs, that is how good outputs can be obtained.

Source: Willis et al., 2016, p. 3, 7., and the processed experiences of the model programs.

The presented model programs start from the presumption that children, young people and family members on the edge of child protection or included in child protection care struggle with complex problems, which require services based on a complex methodology. This complex approach is summed up in Figure 1.

FIGURE 1.
Multidisciplinary and multidimensional helping process aiming at the improvement of the life quality of families with children

Source: Bromfield at al., 2012, p. 36; Winkler, et al. 2007, p.81; CARCSD, n. y.[14]; Birmingham Safeguarding Children Board, 2015, p. 8, the processed experiences of the model programs.

The range of needs is conceived on several levels: *universal needs* imply that every child has the right to satisfy their basic needs. *Universal plus* refers to support needed besides services and interventions targeting basic, normal needs. We refer to *addition needs*, when the need for support is more intense, and the child and the family require a package of services, but these still don't need to be ensured in the framework of a compulsory cooperation. *Complex* or *significant needs* call for special support based on compulsory cooperation implying social work, since the range of risk factors is large from the perspective of the child's well-being and safety. Cooperating professionals react to the various types of needs on different levels of the system; a basic precondition to this cooperation on the level of the different organizations is that the management is engaged and is able to assign resources to the services. This type of support, which is based on organisational engagement and professional social work/child protection practice is solution-centred, innovative and implies flexible, creative solutions. Integrated practice is ensured by the fact that it is able to make use of the community resources and to coordinate the different service elements of various sectors. The specificity of the helping process is a so-called quadratic focus (of four elements): 1) information collection; 2) analysis and planning; 3) action/intervention; 4) evaluation of results. This approach gives a special role to values displayed during the helping process, since it is important to engage relationships and resources connected to the client, to encourage and maintain engagement during cooperation and problem solving, to create partnerships, and to continuously empower the clients. All this contributes to successful outputs by satisfying on the long term the *basic needs* of the child and family, including emotional and intellectual needs besides physical needs, by inducing proper attitudes and care within the family and adequate, fair communication between family members. *The quality of life is improved* – social work achieves its global purpose (IFSW, 2014) –, family and other types of relationships are strengthened, the individual is able to be autonomous, participation is not just a right, but a possibility and a decision as well. The individual and the family are members of the community, and of the majority society in a broad sense (community/local and social inclusion). *Real choice* means that in case of any problem (new or recurred) a wide range of services and innovative approaches ensured on-the-

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[14] https://carcsd.ca/what-we-do/complex-needs/.

spot supports the clients in solving their problems. The common feature of all these aspects is that they are centred on the child and family, while are culturally sensitive, emphasize the use of strengths and abilities, are evidence-based, complex both in terms of their objectives and task performing, and are assessed in all cases according to their fulfilment of objectives.

In conclusion, all this integrative and integrated approach requires a different attitude and knowledge from the part of the professionals as well. Instead of *expert model*, the *partnership model* has to prevail, which is based on the presumption that families and parents actively work together, each actor value the other's knowledge, experiences and strengths, all these complementing each other. They set up together the goals to achieve, they make efforts to settle conflicts, that is also why it is important to continuously discuss the problems and specific situations.[15]. The actors trust each other, communication is open and sincere. Active implication and the promotion of participation are central parts of the partnership model. In turn, the expert model is based on the presumption that the knowledge of the expert leads and structures intervention; it is diagnose-centred, the family often is provided with limited information, and in many cases is not allowed to make decisions concerning the type of support to be given; support is much more impersonal, and gives the client a passive role. The *befriending model* is built on an informal, friendly relationship, however, cooperation lacks any fixed framework, thus the direction of problem solving can be shifted; yet, the sense of being left alone and isolated is less significant due to establishing and strengthening social relationships[16] (Children's Workforce Development Council, 2011, p. 78-81).

The study argues that the practice of child protection can be efficient only if professionals, when determining the objectives of professional work, and the methods and tools to be used in order to achieve these, take into account that they need to cooperate with the clients, pay attention to them, to include all affected and responsible parties, by reflecting and acting within a system. Intervention reacting to multiple problems needs to be complex in its elements as well, in order to promote the well-being of clients.

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[15] Obviously, due to the nature of such interventions, situations entailing risks to a child may occur, when negotiations or the resuming of discussions are impossible.

[16] If necessary, the expert model can be applied during cooperation with the client, but the befriending model is harmful despite the helper being informal.

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