

3	Pearson Correlation	.232	-.072	1.000					
4	Pearson Correlation	.062	.253	.569(**)	1.000				
5	Pearson Correlation	.098	.232	.352	.693(**)	1.000			
6	Pearson Correlation	-.331	.351	.109	.385(*)	.478(*)	1.000		
7	Pearson Correlation	.283	.348	.302	.500(**)	.454(*)	.580(**)	1.000	
8	Pearson Correlation	-.217	-.071	.490(**)	.486(*)	.066	.376	.424(*)	1.000
** Correlation is significant at the 0.01 level (2-tailed).									
* Correlation is significant at the 0.05 level (2-tailed).									

## HOW TO PERFORM AN INTERVENTION IN ORDER TO ASSIST CHILDREN COMING FROM FAMILIES FACING DIFFICULTIES? A CASE STUDY

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**Abstract:** The problems faced by children coming from families in difficult situations are complex and for this

reason, a multidisciplinary approach is required to perform an intervention. Quite often, the intervention at individual and family levels is not at all easy. This is mainly due to the fact that the resources of the individual and those of the family cannot be properly mobilized despite the assistance given by experts and finding a solution to the problem is sometimes also prevented by a family member's hostile attitude.

The aim of this paper is to identify the factors that lead to the onset and perpetuation of problems in the case of children coming from families in difficult situations. It also wants to present the social assistance provided for these families and the way it is implemented in practice, that is, in the direct work with the beneficiaries.

By presenting a case the goal was to highlight the problems faced by the experts who work for organizations that provide services for this category.

**Keywords:** families in difficult situations, resources, solving problems, support

## **Introduction**

Romania, when compared to the other members of the European Union, has the highest level of poverty, the poorest housing conditions, and the country also saw the highest decrease in workforce between 2000 and 2010 (Stanciu et al., 2012).

As a result of the social and economic hardship, more and more Romanian families undergo psycho-social-economic crises and a great majority of them turn eventually for assistance to institutions that are active in the field of social services (local councils, departments of social services and child protection, NGOs).

The aim of this paper is to identify the factors that lead to the onset and perpetuation of problems in the case of children coming from families in difficult situations and to present the intervention in the case

of such a family, with a particular focus on the difficulties faced by the experts involved in the case.

### **Families in difficult situations – between facing problems and social assistance**

Studies have shown that, besides the highest poverty rate in Europe, Romania also has the highest poverty levels in the case of families with dependent children (Stanciu și Mihăilescu, 2011), as the birth of a child affects significantly the living standards of a family when their income is low (Zamfir et al., 2011).

The analysis of the way a child develops cannot be separated from the broader issue of family life and family quality of life. Due to poverty, the family environment can be strongly traumatic for the child (Stanciu et al., 2008).

In practice, the main problems faced by families in difficult situations are the following: lack of housing, lack of identity documents, difficulties in finding employment, insufficient income, health problems, domestic violence, school dropout, juvenile delinquency etc. „Having or not a decent home can make the difference between a normal life and social exclusion” (Stanciu et al., 2012, p. 108). Studies published in the scholarly literature have shown that social exclusion represents “the way in which society assesses the performances and the risks concerning social cohesion and individual welfare” (Popescu, Arpinte and Neagu, 2005, p. 1).

According to Art. 66 (4) of the Social Assistance Law no. 292/2011 „in order to fulfill the duties they have towards children, central and local government authorities support families by providing social security benefits, as well as social services”. The aforementioned law

regulates the provision of social security benefits for the prevention and combating of poverty, as well as of the social exclusion risk, social security benefits for supporting children and families, social services for children and/or families. The social assistance provided to families focuses on „support given to families mainly for keeping children in their families and for overcoming difficult situations (...)” (Art.67). As far as the support given to families that raise children is concerned, the laws in force stipulate the provision of a family support allowance (Law no. 277/2010), of welfare to make sure that everybody receives the guaranteed minimum income and of aid for fuel in winter time (Law no. 416/2001), as well as of other support. Only in the first quarter of 2014, 256,307 families on average received a monthly allowance as a form of support for them (source: Ministry of Labour, 2014). However, the situation on the ground shows that there are families in difficult situations that do not benefit from the rights they are entitled to. The reason for that is, on the one hand, the lack of access to information (this is true mainly for the people with a low level of education, for those with various disabilities etc.) and, on the other hand, either the lack of identity documents or disinterest in accessing the corresponding benefits.

Social work has two main dimensions: the economic dimension, which concerns the provision of material and financial help for those people who, temporarily, cannot cope on their own, and the true social and psycho-social dimension, which concerns social integration and reintegration in a broader sense (Bocancea and Neamțu, 1999, p.70).

In defining poverty, Elena Zamfir (1995, p. 34) claims that „the emphasis is placed on the lack of resources, since poverty is a state of permanent lack of the resources needed for a living that is considered decent, acceptable within a certain community”. Cătălin Zamfir

underlines that poverty is a social-psychological-cultural complex, that it does not consist only of the lack of income, which is, in fact, its cause. As a result, a stronger focus is needed on the factors behind it (Zamfir C., 2000). In the scholarly literature poverty is often presented together with the inequality of education and vocational opportunities. Thus, studies have pointed out that “between poverty and education there is an intercausal relationship, the poor social-economic conditions of a family lead to lower chances of education for the children coming from that family”, the lack of schooling and vocational training contribute to lower chances of social integration and, at the same time, increase the chances of living in poverty (Stoica, 2006, p. 66).

The difficulties faced by certain families, generated either by the external world, that is, the social-economic factors, or by the domestic ones – the way family roles are understood, defense resources and mechanisms, perceptions and convictions etc. – can pile up, aggravate, and, without specialist intervention, can take the family into a crisis situation. According to Richard James (2008, apud Hepworth et al, 2010, p.380) „crisis is a perception of an event or situation as an intolerable difficulty that exceeds the resources or coping mechanisms of the person”. „Intervention in a crisis situation is, in its classical definition, the action carried out to interrupt a series of events that prevent a person from operating in a normal way” (Payne, 2011, p.120).

In order to solve the problems faced by the beneficiaries, Compton and Galaway have developed the following intervention model: engagement or contact phase (identifying and defining the problem in the client's, the social worker's and in other people's perception; identifying the goal; establishing an agreement/contract; preliminary exploration – of the beneficiary's motivation to take part in the social assistance process,

of the appropriateness of the intervention and of the beneficiary's degree of preparation for their active participation in the social assistance process), intervention planning phase (thorough study of the resources and of the resistance to change, devising an action and forecast plan), action phase (the actual implementation of the intervention plan and evaluation of the results) and termination phase (preparation for and separation from the client, developing a follow-up support plan, evaluation of the successes and of the possible disagreements) (Compton and Galaway, 1994 apud Roth and Rebeleanu, 2007).

The intervention at individual and family levels is usually not at all easy. This is mainly due to the fact that the resources of the individual and those of the family cannot be properly mobilized despite the assistance given by experts and finding a solution to the problem is sometimes also prevented by a family member's hostile attitude. Such a case is presented below.

**The case** (\*it should be mentioned that one of the writers of this paper was in charge of the case presented henceforth).

Further below an intervention example (carried out by a multidisciplinary and inter-institutional team) is presented. The intervention was initiated by the experts of a NGO to support a family in a difficult situation.

*General information.* A mother and her daughter turned to an NGO from Bihor county, which offers social services, to ask for support.

The request was analyzed and a person was assigned to the case.

In order to assess the case, the person in charge of it (a social worker) worked together with the psychologist of the organization in the

initial stage. It should be mentioned that all the aspects of the case were analyzed with the child's parents and the child.

In the initial stage, the assessment of the case and the discussion of all its aspects were performed only with the mother and the child, as the father did not want to be involved.

Given the complexity of the case, after the assessment process, interventions at both *individual and family levels* were suggested.

To help a better understanding of the case, some relevant aspects have been chosen to be presented in this paper.

#### *4. Defining the client system*

I.C., a six-and-a-half-year-old child, and her mother MC, 31, turned to an NGO to ask for help with solving a problem they were facing. They were referred to that NGO by the social worker of a public institution from Oradea.

The child had not been enrolled in nursery school until that date and she was to be enrolled to school. As the NGO had a Day Center where children from the community could come to receive support with their homework and take part in leisure activities, it was suggested that the child be enrolled in the program of the center so that she could later start school (approximately three months later). When they first came to the NGO, the mother and her daughter were poorly dressed and their clothes were also dirty. The child was suffering from pediculosis. As a child, the mother was institutionalized in one of the county's placement centers after she had been abandoned by her family. She has a mild mental disability. It seemed that the daughter was telling her mother what should be done – she was much more mature than a child of her age usually is.

#### *5. Family assessment*

There were three people in the family: the six-and-a-half-year-old child (girl), the 31-year-old mother and the father, who was 72 years old. The father is not mentioned in the child's birth certificate. The parents are not married, they live together.

The family was living in a makeshift home in Oradea, next to a railway and close to a flag station. The family had lived in a council home, but, since they did not pay the rent (a rather small amount compared to rents in general) and the utilities, they were evicted due to the high debts. The father received a monthly pension, which was enough to cover the rent and the utilities, but he did not want to make the payments. He was the only one who handled the money (claiming that it was "*his money*"). The mother had no access to the money. The current home had only one room, it was made of cardboard and carpets, and surrounded by a fence made of different materials (wood, wire, cardboard). They used a small stove made of sheet metal for heating. All three family members slept in one bed. They had no access to electricity and to drinking water. The place where they lived was not a legal residence. They could use the plot as a result of its owners' kindness and the benevolence of people who worked for the railway company. The mother initiated the registration of the place where they lived so that she could enroll her daughter in school.

From discussions held with the mother it resulted that there were good relationships among the family members as long as the mother accepted the decisions made by the child's father. The family members themselves considered that the family relationships were good. It became also clear that the relationship between the father and her daughter was a very close one.



The father did not want any intervention from outside the family, as in his perception, the family was not facing problems. He only accepted, shortly after the intervention had started, that the child needed support with her preparation for school integration.

*C. The problems identified* as a result of the detailed assessment performed were the following: the child's non-enrollment in school; unsanitary living conditions; lack of space and of privacy; the father's refusal to accept the problems the family was facing; insufficient resources (material, personal); decisions made in the family by only one person, namely, the father, the mother having no say in family matters – the issue of role assumption.

*D. The general objectives* set out by common agreement between all the parties involved were the following: supporting the child for integration in school; temporary support for the family with their hygiene problems; finding solutions to the housing problem; assisting the mother to assume her parental role.

*E. The actual intervention*

Given the complexity of the problems, the need for an immediate intervention was recognized. The intervention was to be performed both at individual and at family levels.

After analyzing the problems identified, an intervention plan, adjusted to the needs of the family, was developed by common agreement with the beneficiaries. Starting from the resources of the family and the motivation for change, the plan also included the optimal way to achieve in practice the objectives set out.

Thus, in a first phase, the individual intervention focused on integrating the child in a group and on her participation in school preparation activities. Before this step, it was important to ensure

personal hygiene. The mother and her daughter came to the center for disinfection, to have a bath and to do the laundry. They came for a bath every week and they also took their laundry to the center weekly. The child also benefited from the services of the institution psychologist. The possibility of a form of abuse within the family was also analyzed, given the close relationship between the father and his daughter, which was noticed during the intervention. It became clear that there was no such issue in the family. The child continued to benefit from the services of the psychologist, in a second phase the intervention focused on her personal development. As far as the intervention in the case of the mother is concerned, she benefited from counseling.

The father's attitude/resistance towards any change within the family was still to be analyzed and discussed. He continued to claim that the family was not facing any problems, and that was confirmed by the mother and the child as well. Eventually, he accepted to meet with experts of the institution (a social worker, the psychologist and the legal advisor). The mother was also present at the meeting. The issue discussed was that of the family's home. The parents admitted that the living conditions were inappropriate for bringing up a child and that something should be done. More solutions to this problem were taken into consideration, together with the members of the family. As the cold season was getting closer, the option of placing the child in a family group home in town until a solution would be found to the housing problem was also discussed. This suggestion was rejected by all family members. They wanted to stay together, even if they had to face hard conditions. The parents found a source of wood for the winter season (a school which replaced its benches offered the family the old ones to be used as wood for heating). There were two reasons that prevented taking

into consideration applying for a council home. Firstly, the family had had such a home but did not pay its obligations and secondly, the father refused to talk about that possibility. The father also claimed that the family's income was not enough to rent a flat, but he did not disclose the money he received on a monthly basis.

Another solution discussed was that of asking for help from the Habitat for Humanity Foundation, that is, turning to them with a request to have a home built. Deadlines and responsibilities were established. When contacted by the experts of the institution, Habitat for Humanity accepted the request. The foundation had a plot of land in of the villages of the county and they presented the conditions and steps that were to be taken to sign a contract. All information was presented to the family within a meeting which was attended by all family members. After listening to the presentation and analyzing it, the father refused the offer claiming that he could not live in the country, *“I was born in town and I want to die there”*. The mother did not say anything, she accepted the decision taken by her partner. The father stated strongly that he did not want anyone's involvement in the life of his family in the future. After that meeting he banned both his partner and his daughter from accessing the services of the center.

### **Discussion and conclusions**

The families that are in difficult situations benefit from social assistance. The interventions provided within the existing services address the needs identified during assessment processes. In most cases, and this is true for the case presented in this paper as well, the factors that lead to the onset and to the perpetuation of the problems are the same: insufficient income, the mother's unemployment, lack of a home, the

parents' past (the mother was institutionalized/she comes from a child protection institution), the parents' low level of education, limited access to information, all decisions in the family made by an authoritarian father. Thus, the problems faced are complex and they require a holistic approach in the short, medium and long term.

In the case described in this paper, despite the fact that the phases of the intervention were observed, despite the fact that the experts worked in a multi-disciplinary team, despite the fact that the intervention went beyond the boundaries of the organization (inter-institutional approach), the objectives set out together with the beneficiaries were not achieved. Due to the complexity of the problems identified within the family, the intervention plan managed to address only to a limited extent the objectives set out. Such a complex case requires long term specialist intervention.

Another relevant aspect is that it is not enough to perform only individual intervention. In this context it is important that the intervention at individual level is completed with intervention at family level, as many of the problems are generated and/or maintained by the problems existing within the family. One of the major problems is the refusal to participate in the intervention process, refusal that comes most often from the person who has a leading position in the family. Even though the people declare that they want to see the problems faced by the family solved, in reality the families' resources are not enough to make a change. In the case presented in this paper, given the fact that the child's father did not consider that there were problems in the family, and that the other family members accepted his opinion, the method of intervention became an issue. Did the experts do the right things? Whoever would have seen the living conditions (a home made of cardboard and carpets, with no access

to electricity and water, the risk of living together with rats etc.) would have considered it a priority to solve the housing problem. Even though these aspects were discussed with all family members, until the meeting held with the family's adult members and the experts at the organizations venue (another meeting had been held previously at the family's home), the family members did not feel that they had a housing problem. Their opinion changed after the discussions held. Before that, they agreed that their living conditions were tough, but they did not perceive that as a serious problem.

In such cases, what could be the best intervention? The family members turned to the organization only to request help with the child's preparation for school, even if they had not been interested in enrolling her in nursery school previously. It is known that, in most cases, a problem presented by a client may not be the real one, it may cover other problems, which often are more serious ones.

Thus, a number of questions arise. What was the reason that took the mother to ask for help, even without the father's consent? Why were the father's opinions accepted by the mother and the child without any objection? How come that the family members were so united? These were also the questions the experts based their intervention on. Despite all that, even if the experts assessed the situation taking into account the appropriate methodology, and they worked at a high level of professionalism, they perceived what happened in this case as a failure. It is impossible for an expert not to think that maybe the intervention was not correct. This thought came up again when seeing after a while that the situation became worse. A proof for that was that the mother and her daughter were seen looking for food in garbage bins soon after the intervention was closed.

In such cases, it is required more than ever that the intervention should place a stronger emphasis on motivating the family members to take part in the process of change.

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