

Promoting Resilience and Protective Factors in the Children's Fund: Supporting Children's and Young People's Pathways Towards Social Inclusion?

Authors: Ruth Evans and Katherine Pinnock

Dr. Ruth Evans, Research Fellow, School of Sociology and Social Policy, University of Nottingham
Address: University of Nottingham, University Park, Nottingham NG7 2RD

Email: Ruth.Evans@nottingham.ac.uk

Dr. Katherine Pinnock, Senior Research Fellow, Policy Research Institute

Address: University of Wolverhampton, Wolverhampton Science Park, Glaisher Drive,
Wolverhampton, WV10 9RU

Email: k.pinnock@wlv.ac.uk

Biographies

Ruth Evans is a Research Fellow at the School of Sociology and Social Policy, University of Nottingham, UK, where she is currently researching the experiences of young carers in the context of HIV/AIDS. Previously, she worked for the National Evaluation of The Children's Fund, based at the University of Birmingham. Her research interests include children and young people experiencing social exclusion, children and young people's participation in policy and research, street and working children, young carers, HIV/AIDS, gender and childhood diversity.

Katherine Pinnock is Senior Research Fellow at the Policy Research Institute, University of Wolverhampton, UK. Previously she worked for the National Evaluation of the Children's Fund and Save the Children. She is currently part of the team evaluating Staffordshire Children's Fund. Her research interests include qualitative research methods and the ethics of social research with children, child well being, monitoring child outcomes, poverty, social exclusion, the role of voluntary organisations and the use of research in social policy.

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Abstract

As part of the broader prevention and social inclusion agenda, concepts of risk, resilience and protective factors inform a range of UK Government initiatives targeted towards children and young people in England, including *Sure Start*, the *Children's Fund*, *On Track* and *Connexions*. This paper is based on findings from a large qualitative dataset of interviews conducted with children and their parents/carers who accessed Children's Fund services, as part of National Evaluation of the Children's Fund research. Drawing on the notion of young people's trajectories, the paper discusses how Children's Fund services are supporting children and young people's pathways towards greater social inclusion. While many services help to build resilience and protective factors for individual children, the paper considers the extent to which services also promote resilience within the domains of the family, school and wider community and hence attempt to tackle the complex, multi-dimensional aspects of social exclusion affecting children, young people and their families.

(156 words)

Early intervention and prevention of social exclusion

Since 1997, the UK Government has identified tackling social exclusion as a major policy priority and a range of Government initiatives have been developed in England targeted towards children deemed to be 'at risk' of social exclusion. France and Utting (2005) have argued that initiatives such as *Sure Start*, the *Children's Fund* and *Connexions* are situated within a 'risk and protection-focused prevention paradigm'. Such initiatives aim to reduce risk factors, build resilience and

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promote protective factors within the domains of the family, school, community, or with the individual child, intervening early to reduce the risks of future negative outcomes. Policies designed to tackle social exclusion acknowledge the complex interplay of causes of vulnerability, resulting in a range of social problems which impact on children's future life chances, including unemployment, poor skills, low incomes, poor housing, high crime, bad health and family breakdown (Social Exclusion Unit 2004; Percy-Smith 2000). The refocusing of children's services towards early intervention and prevention of social exclusion was given added impetus by recent legislative changes in the UK, including the Green Paper, *Every Child Matters* and the Children Act 2004. *Every Child Matters: Change for Children* (DfES, 2004) outlines a programme of change to improve outcomes for all children and young people and sets out five desired outcomes for children: being healthy, staying safe, enjoying and achieving, making a positive contribution and achieving economic wellbeing. It emphasises supporting families and carers; ensuring intervention before children reach crisis point; enhancing the integration of services and developing the capacity of organisations working with children (ibid).

Despite wide-scale acceptance of the importance of early intervention and prevention, there is currently limited evidence that prevention programmes result in positive outcomes for children and families in the UK. Evidence from national evaluations of *Sure Start* and the UK-based *Communities that Care* highlights the difficulties of implementing prevention programmes and reaching the most vulnerable groups (NESS 2005; France and Crow 2005). Reviews of early US prevention programmes have consistently concluded that programmes were designed with a narrow focus, intervening at the level of the individual child or family and most have not been adequately evaluated (Peters, Petrunka, and Arnold 2003).

Despite the centrality of the concepts of risk, resilience and protective factors, as well as social exclusion, in UK Government policy, a review of the literature reveals the contested nature of these concepts and the scope for furthering understandings of them, based on qualitative evidence from children and families. This article is based on findings from qualitative interviews conducted

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with children and parents/carers who accessed Children's Fund services in England, as part of National Evaluation of the Children's Fund research. Drawing on the notion of a child's trajectory, the paper discusses how Children's Fund services are supporting children's pathways towards social inclusion. While many services help to build resilience and protective factors for individual children, we consider the extent to which services promote resilience within the domains of the family, school and community and hence attempt to tackle the complex, multi-dimensional aspects of social exclusion affecting children and families.

Critiques of the social exclusion, risk, resilience and protection discourses

The UK Government's concern with child poverty and recognition of the multi-dimensional nature of social exclusion has been broadly welcomed. However, Jenks (1996), Prout (2000) and others have argued that New Labour has adopted a 'social investment' approach to reducing poverty and disadvantage that constructs children as future 'investments' or future citizens, rather than as subjects whose present well-being is important. Such an approach seeks the redistribution of opportunity to promote social inclusion rather than the redistribution of income to promote equality, and hence values education as the route out of exclusion and into employability (Lister 2003; Williams 2004). This is reflected in the emphasis of recent UK policy developments for children; the five desired outcomes for children and young people and protective factors listed in the Every Child Matters framework are strongly orientated towards educational outcomes. Indeed, with this framework now located within the Department for Education and Skills, education is playing an increasingly prominent role in prevention and children's services more generally in the UK (Evans et al. 2006). Commentators argue, however, that the focus on children's educational outcomes and roles as future 'citizen-workers' needs to be balanced with a concern for the present well-being of children and their participation in social life (Prout, 2000; Lister 2003). Furthermore, Fawcett, Featherstone, and Goddard (2004) argue that while the social investment approach supports strategies that invest in children as a whole, it also identifies particular groups of children who are

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perceived as representing a 'risk' to the social investment project. Targeting services towards particular groups of children may result in stigmatisation by emphasising the particular behaviour or characteristics of some groups of children which prevent them from becoming responsible and engaged future citizens (Williams 2004).

The risk discourse has been critiqued for similar reasons. Much of the literature is based on biological and psychosocial constructs of risk, which focus on individual behaviour and outcomes and are seen by some to stigmatise individuals (Armstrong 2003). Howard, Dryden, and Johnson (1999) argue that children labelled as vulnerable or at risk are often those whose appearance, language, culture, values, home communities, and family structures do not match those of the dominant culture. The identification and management of risk is therefore often premised on a deficit model of children and families, which overlooks the importance of the interaction with structural aspects of the environment. Furthermore, Little, Axford, and Morpeth (2004) caution that risk factors are difficult to identify and measure. There is little consensus about which factors are significant and a lack of clarity about the causal links between these factors and future negative outcomes (Hansen and Plewis 2004).

Researchers have argued that the concept of resilience provides a helpful counterpart to a focus on risk, since it attempts to give a more contextualised understanding of the processes by which children and families negotiate risk situations (Rutter 1990). The child development literature broadly argues that resilience is not a personal attribute or a static state, but rather a dynamic process depending on the interaction between the socio-historical context and the developing individual (Howard, Dryden and Johnson 1999). Instead of focusing on a deficit model, a resilience perspective emphasises children's and families' strengths despite exposure to risk and recognises their agency in engaging with protective factors. Protective factors have been identified at a number of levels: those relating to attributes of children themselves (such as problem-solving skills, high aspirations, positive peer relationships); characteristics of their families (such as caring and supportive family relationships, a secure base and sense of belonging); and aspects of their wider

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social context (such as the availability of external support or resources, positive school environment, opportunities for participation) (Benard 1991; Newman 2002; Schoon and Bynner 2003).

However, the relationships between the concepts of risk, resilience and protective factors are often not clearly articulated. Researchers, policy makers and practitioners working within diverse fields may have very different understandings of these concepts (Little, Axford, and Morpeth 2004). Furthermore, Howard and Johnson (2000) question whether children's understandings of risk and resilience differ from adult interpretations, which may undermine the success of adult-designed interventions which aim to promote resilience. Researchers also highlight the danger of labelling of children as *resilient*, since resilience may be seen as a personal attribute of the individual, which can lead to perspectives which blame the individual who does not show resilience for 'not possessing characteristics needed to function well' (Luthar and Cicchetti, 2000, 862).

However, Luthar (1993) argues that resilience resides more in the contexts, systems or relationships to which a person belongs, rather than in individuals' attributes. A growing number of studies emphasise family or community resilience, rather than focusing on individual resilience (see Seaman et al. 2005) in part because these domains are considered by some more amenable to intervention (Mackay 2003). Gilligan (1999) for example highlights the importance of recognising children's networks as a potential source of informal social support which can help to protect children from adversity in their lives and build their resilience. Researchers increasingly argue that policy interventions which draw on the resilience framework should aim for a holistic approach, for community-based interventions and integrated service delivery, which aim to involve families and communities as well as young people (Schoon and Bynner 2003; Luthar and Cicchetti 2000).

Several researchers draw on the notion of children's 'trajectories'; a child may display resilience over certain periods of their life, or conversely may display an accumulation of risk factors, leading to increasingly restricted outcomes in later life (Luthar and Cicchetti 2000; Schoon and Bynner 2003). Linked to the concept of children's 'trajectories', Gilligan (2000) discusses the

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notion of ‘turning points’ in children’s lives, whereby a favourable experience may represent a turning point in a child’s trajectory. The notion of a ‘career trajectory’ has its origins in youth transitions literature (Johnston et al. 2000). Recent concepts of a ‘career trajectory’ have recognised young people’s agency in creating individual paths of transition, while acknowledging that personal choice and decision-making are constrained by social structures (ibid). We draw on the concept of a trajectory to explore the ways Children’s Fund services have supported children’s social inclusion within and across the different domains of the individual, family, school and the wider community at different periods in their lives.

Scope and methods

The Children’s Fund was established in 2000 to promote multi-agency collaboration and participation in the development of preventative services for children (aged 5-13) considered ‘at risk’ of social exclusion in England. The initiative aims to provide: ‘preventative services which provide support for young people and their families before they reach crisis, with the aim of reducing the future probability of poor outcomes and maximising life chances’ (CYPFU 2001, 7). It was delivered across all 150 English local authority areas in 149 partnership arrangements (henceforth referred to as ‘partnerships’).

This paper draws on qualitative research conducted with children and families in 16 case study partnerships in England. This was part of the National Evaluation of the Children’s Fund¹, a broader study which examined the structures and processes that promote good outcomes for children and families. Families were accessed through Children’s Fund services, with which the National Evaluation conducted research. It is not therefore a representative sample of children and parents using Children’s Fund services, but it does illustrate the perceived benefits and experiences of a diverse group of families accessing a broad range of services.

Semi-structured interviews were conducted with 76 children aged 5-15 (the majority were aged 9-13 years) and with 70 parents/carers accessing 38 different Children’s Fund services. This

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generated in-depth individual case study data for 92 children (58 boys and 34 girls). Over a quarter of the children lived in large families (26) (with three or more children) and/or in single-headed households (24). A third of the children were from black and minority ethnic groups (23) or of mixed ethnicity (9), while a fifth (18) were disabled children or children with special needs.

A range of methods were used to elicit the views of children and parents, including semi-structured interviews and participatory techniques with children, such as completing log-books to describe themselves and their world, including their family, friends, school, neighbourhood, and their experiences of the Children's Fund service they accessed. The transcripts of child and parent interviews were summarised in a template which included biographical information about the family and key issues and quotations in response to the research questions. The qualitative data from each template was then systematically analysed under key themes, coded and collated to form the basis of the overall analysis (see Evans et al. 2006 for more details). In the interests of confidentiality, the names of all participants have been changed and the services they accessed anonymised. The research was conducted in accordance with the ethical protocols as stipulated in the British Educational Research Association guidelines (see Edwards et al., 2006 for details of the overall study).

Building resilience and protective factors at the level of the individual child

Across the 16 Children's Fund partnerships, there was a diverse range of approaches to service delivery. Some services were open to all children in the locality or based on a broad notion of children 'at risk' of social exclusion, while others were specifically targeted towards particular groups of children deemed to be 'at risk' of social exclusion due to their particular behaviour or characteristics. Many services provided group activities, such as book clubs, homework clubs, child-minding services for disabled children and mentoring projects organising weekend activities. Some projects provided opportunities for children to develop skills to organise community events and participate in decision-making processes. Several home-school liaison projects provided

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support for children in school-based nurture groups, as well as parental support. Children and families also received individually-tailored support from family support services and from Youth Inclusion Support Panels (YISPs), which were multi-professional teams working with children at risk of crime and anti-social behaviour. Some projects provided specialist support for children, such as counselling and enabling schemes for disabled children to access mainstream play services. A few services focused specifically on parents, rather than working directly with children and included a crèche with advice and language skills training for parents from minority ethnic groups.

Overall, children and families were positive about the opportunities and support they received from Children's Fund services. Parents valued services because they filled gaps in provision and gave support (Edwards et al. 2006). We are only able to report from the perspectives of families identified by providers as willing to talk to us and who were likely to have had positive experiences of the service they were accessing. Thus, the positive accounts given by children and carers should be accepted with caution as evidence of improved outcomes for children.

Furthermore, the research was not longitudinal, therefore we are not able to measure the impact of the Children's Fund in terms of long term outcomes for children and families. Nevertheless, we are able to give illustrative examples of short and medium term changes reported by children and their carers as a result of engaging with a range of Children's Fund services.

The short and medium term outcomes reported by children and parents link directly with the Children's Fund sub-objectives of children's improved educational outcomes, reduced risk of crime and anti-social behaviour and improved health (CYPU 2001) as well as the broader child outcomes outlined in the Every Child Matters agenda: health, safety, enjoyment and achievement and making a positive contribution. Many of these outcomes also resonated with the protective factors identified in the literature.

A diverse range of services aimed to improve children's emotional health and wellbeing (Edwards et al. 2006). Most children said that they had gained confidence and parents felt that this often had a positive impact other domains of their lives. Where children and parents were accessing

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support to address children's particular emotional needs, such as anxiety, depression or trauma, they felt that there had been some improvements. Several parents whose children had experienced bullying commented that their children were *'happier within themselves'*. Projects which provided nurture groups or activity clubs for children within schools and neighbourhoods were often valued by children as a refuge from bullying.

Newman (2002) identified the presence of strong social support networks as an important factor for promoting children's resilience. Some group settings targeted towards groups of children constructed as marginalised on the basis of their particular characteristics, such as children in the care of the Local Authority ('looked after' children) and children from black and minority ethnic communities, enabled them to meet other children in similar situations and support each other. One young person (aged 14) living with his siblings and foster carers, commented on why it was important for looked after children to meet other children who understood their difficulties: *'At least you can meet people who are in care and discuss things like 'how are things going for you' and all that sort of stuff, instead of comparing living in care kids with someone who's living with their parents'*. Children experiencing racism and bullying at school also commented on how they had shared their experiences of racism with other black and minority ethnic children and developed peer support.

Many children and parents cited improvements in children's literacy and educational achievement through accessing family support services, homework clubs and nurture groups which created safe, learning environments. A girl (aged 10) who had challenging behaviour and attended a school nurture group said: *'It helps with my reading'*. A mother commented on the improvements in literacy she had seen in her children as a result of home-teaching support during a period of school exclusion: *'...I've got a ten-year-old now and a 12-year-old they can read they can write, before that would never have happened. And I do put it all down to the help we've had from outside'*.

Many children and parents perceived the benefits of services in terms of enabling children to develop important social, communication and independence skills. In many participation projects, children initiated ideas and suggestions for activities which project workers facilitated. Children valued giving their views, as one girl (aged 11) said: *‘cause it’s giving us a say in what they do, they’re not just telling us what to do’*. Particular skills which children gained through their participation included: increased ability to deal with difficulties, seek support, trust and socialise with adults; greater sense of responsibility; public speaking, interviewing, computing and literacy skills.

High aspirations have been identified as an important protective factor for children experiencing adversity (Newman 2002). Parents and children accessing many Children’s Fund services reported that children had become more engaged in a range of activities which raised their expectations and aspirations for the future. One young person (aged 13) who was depressed and reluctant to attend school, said he had become more engaged with school as a result of motorbike and woodwork sessions run by a school transitions project, which raised his aspirations: *‘I want to either be a carpenter or a photographer’*.

When children were at risk of school exclusion or had been excluded, parents perceived improvements in their attendance or felt that the child was more positive about school. One young person (aged 12) receiving support from a Youth Inclusion Support Panel attributed his re-entry to school and prevention of further exclusions to his key worker. The mother of a boy (aged 9), who was frequently suspended for challenging behaviour, felt that the support from a family worker had helped to improve his behaviour and peer relationships in school: *‘he got suspended for four days and after that, the family worker started working with him and since then his behaviour has been so much better. He has got loads of friends in school now.’*

Some children and parents thought that services helped to reduce children’s exposure to negative peer influences and the risk of crime and anti-social behaviour. Parents living in low income areas were concerned that without these opportunities to engage in after-school and

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weekend activities, their children were at risk of *'getting into trouble'*. Some children with challenging behaviour valued nurture groups and break-time clubs in school as a way to prevent them from *'hanging around'* with older young people, as one boy (aged 12) said: *'it's made me like not hang around with the bad people and kept me out of trouble'*.

Many of the benefits for individual children discussed so far emphasise improved capabilities, educational outcomes and reduced risk of engaging in anti-social behaviour and relate to what Williams (2004, 412) calls, 'the processes of becoming an adult'. Many children and parents, however, also felt that children gained from services in more immediate ways, such as 'having fun' in play and leisure activities and developing friendships with their peers which were often sustained outside of service settings, which could represent important protective factors. For example, some services which sought to create supportive school environments for newly-arrived refugee and asylum-seeking children enabled them to develop friendships with their peers, which helped them to settle into school. Many parents of disabled children attending activity clubs valued opportunities for their children to make friends with other disabled and non-disabled children in their neighbourhood.

Children and parents' accounts suggest that Children's Fund services help promote resilience and protective factors for individual children. However, as Seaman et al. (2005)'s study found, many children and parents perceived the risks of social exclusion as arising from problems within the school or community, such as poor local play and extra-curricular activities, exposure to crime and anti-social behaviour and experiences of bullying, racism and school exclusion. Children's and parents' concerns about these structural and attitudinal aspects of social exclusion suggest that building the resilience of individual children in itself may not be enough to prevent the complex process of social exclusion.

The trajectory of one young person illustrates how a service that promoted children's resilience to deal with racism may help at the individual level, but this has limited impact if it is not accompanied by broader preventative work aimed at tackling racism in school. One girl (aged 12)

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who was of British Mixed ethnicity, experienced racist bullying at primary school until a Children's Fund project worker contacted them. The service aimed to reduce the number of the school exclusions and Child and Adolescent Mental Health service referrals of children of mixed ethnicity stemming from their experience of racism. The girl attended weekly sessions on issues of identity and racism with other children of mixed ethnicity and felt that she was more able to seek support from her peers if she experienced racism: *'[before] I would tell my mum but I would just keep it to myself, I wouldn't tell other children, but then at primary school I knew I could tell someone at the club'*. However, the girl and her mother did not feel that the issue of racist bullying in school was being addressed. While the safe spaces created by the project at school enabled her to develop supportive social networks with her peers, building her resilience to deal with racism, the project was not tackling the issue of racist bullying or creating a more supportive school environment. This represents an on-going challenge for schools and a potential barrier to children's pathways towards inclusion.

Building resilience and protective factors at the level of the family

The importance of engaging with children's family networks has been recognised as a potential source of support which can promote children's resilience. Many children and parents accessing Children's Fund services identified benefits for parents and the family as a whole. In some instances, support was designed to meet the practical and emotional needs of parents/carers to enable them to better support their children. In others, support targeted towards individual children had 'knock-on' effects for parents/carers or the family.

Many parents suggested they had gained emotionally and practically from a diverse range of services. Family support services were described as helping to improve parents' confidence and emotional well-being. Parents valued parental support services which helped to reduce their isolation. Mothers whose first language was not English attending a community development centre said that the project had helped them to develop social networks with other members of their

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community. Several parents also highlighted how project workers had helped them to gain practical skills, including greater awareness about health and disability issues, strategies to deal with challenging behaviour and developing English language and ICT skills. Children's Fund workers sometimes played a mediating role between families and statutory agencies, particularly where families had previous negative experiences of communicating with statutory professionals. This often led to improved communication, helping to build the confidence and capacity of parents to engage with professionals to support their children.

Services which provided childcare were valued particularly by single parents for enabling them to return to work or study. Parents/carers of disabled children valued respite provision that gave them a break and enabled them to work or spend time with their other children. A parent of three children, two of whom had complex needs, said that regular short breaks at weekends were vital for her to continue caring for her children and without such respite support, she might be forced to seek more intensive residential provision.

While many parents valued childcare and respite services, parents' reasons for accessing services sometimes conflicted with children's perspectives and interests. For example, two sisters who attended an after-school club said that they would have preferred to come home every day, rather than attend the club: '*It's like we're stuck in a cage because most of the time you don't get to go out... outside ...*'. The sisters also felt that attending the club restricted the time they could spend with their friends.

Despite the benefits described by carers, many parents commented on a range of risk factors within the family that they were dealing with, which may adversely affect children's pathways towards social inclusion. These were often beyond the scope of projects and included domestic violence, pressures experienced by single parents and those caring for disabled family members, dealing with abuse and pressures linked to refugee and asylum-seeking status. While parents did not perceive these relational and structural factors as direct reasons for accessing Children's Fund

services, some parents felt that projects had, through a family-oriented approach, been responsive to these issues.

Although some services shifted to a more holistic family support approach during the course of the initiative (Edwards et al. 2006), most children and families experienced single-dimensional approaches, that is those that focused on the individual child, with limited engagement with children's family networks or other professionals working with the family. Such approaches appear to have limited potential to address the mutually-reinforcing dimensions of social exclusion that children may face. This is illustrated by the following young person's trajectory.

One boy (aged 11, of Black British ethnicity) had emotional and behavioural difficulties and a history of problems with school attendance, since he was excluded from a mainstream primary school. His mother was worried that his educational attainment was affected by his low attendance. Over the last two years, he attended a Children's Fund Saturday club and thought that he had become calmer as a result. His mother felt that he had gained in confidence and developed social networks with his peers both at the club and in his neighbourhood. His mother also indicated that the family had benefited in terms of improved relationships and preventing family crisis.

Although she valued the opportunity for respite, the mother was frustrated that the whole family was not able to engage with the service. The initial referral from the boy's social worker was focused on providing respite to enable the mother to spend time with her younger children, since he was particularly aggressive and violent at the time. However, the mother expressed her preference that her younger children were also able to access the project, which would enable her to spend time with her son on a one-to-one basis. She also would have liked to access a peer support group for parents of children with emotional and behavioural difficulties, to reduce her feelings of isolation as a single parent. However, such opportunities were not available as part of the project and no similar services were available in the locality. Finally, although three different Children's Fund projects had worked with the family over the previous two years, there was no evidence of collaboration between them or with statutory professionals in contact with the family, such as the social worker or

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school staff, and hence no information-sharing around the needs of the young person and his family. This example highlights the need for multi-professional approaches that support the young person's changing trajectory over time (Edwards, 2004) and for family-oriented approaches that engage with all members of the family.

Building resilience and protective factors at the level of the community

Community-based approaches to building resilience are gradually receiving more attention in the literature and in preventative services. A sub-objective of the Children's Fund was to 'involve families in building the community's capacity to sustain the programme and create pathways out of poverty' (CYPFU 2001). However, children's and parents' experiences provided few examples of where services have developed protective factors at the community level and suggested that the majority of projects were single-service interventions focused on specific aspects of children's behaviour or attitudes. There was little evidence of collaboration with other services to improve the wider social environment or bring about changes in the service system to help to prevent social exclusion (Evans et al. 2006).

Benefits at the community level were focused on increased access to and participation in newly accessible services and opportunities. Some community-based projects were set up in response to gaps in local play and leisure provision identified by parents and community members, often based on concerns about young people being at risk of crime and anti-social behaviour. However, many parents were anxious about the sustainability of services and the implications of services being discontinued (Pinnock and Evans, forthcoming). They highlighted the need for a more sustained approach to developing community-based services that support families.

Increased opportunities for play and extra-curricular activities helped to address some of children's and parents' concerns about poor play and youth service provision. However, structural and attitudinal aspects of social exclusion, such as bullying, racial harassment, drug misuse, crime and anti-social behaviour in the neighbourhood, were far-reaching and beyond the capacity of the

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Children's Fund to address. Indeed, children and parents seemed to recognise the limitations there were to addressing these complex dimensions of social exclusion they were experiencing.

The experiences of two brothers living in a single parent household illustrates how most services were unable to address wider community issues. Two boys (aged 8 and 11, of British Mixed ethnicity) and their mother were concerned about the lack of play and leisure facilities, drug misuse and their experiences of racist harassment in their neighbourhood. Their mother explained that she had a history of depression and experienced difficulties with her sons' behaviour. When one of the boys was involved in a minor incident of theft, the family was referred to a Youth Inclusion Support Panel. The mother perceived several benefits as a result of her son's attendance at the evening activity club: *'[My son] has got a lot more confidence, he's come out of his shell, he's mixing with different age children'*; *'[it has given him] something to look forward to... another outlook'*. The mother also appreciated the opportunity for respite, commenting on her *'peace of mind'* that her children were safe. However, she was worried about the limited extra-curricular activities available when her children reached the upper age limit of the project. She did not feel that the project would bring any long-term changes within the local community, leaving her sons at risk of drug misuse: *'the project is up to about 12 and then [my son] will have nowhere to go...where will he be? On the streets...My eleven-year-old son, in another two years, is going to be either smoking weed or he's going to be taking cocaine and it destroys me, but there's nothing I can do.'*

Conclusions

Although the 'risk, resilience and protection-focused prevention paradigm' has informed a range of Government policies and initiatives in the UK (France and Utting 2005), the experience of the Children's Fund and other prevention programmes suggests that the relationship between risk and protective factors and long term outcomes for children remains unclear (Evans et al. 2006).

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Children and parents reported a range of short and medium term benefits as a result of accessing Children's Fund services which helped to promote resilience and build protective factors. The changes for individual children or within families may represent significant 'turning points' in children's pathways towards greater inclusion, which may have positive long term impacts. However, children and families experiencing multiple dimensions of social exclusion highlighted the limited potential of single-dimensional approaches in supporting them to negotiate more positive pathways out of exclusion. Such approaches failed to engage with children's family networks, to collaborate with other professionals around their needs or to address wider issues of concern at school and within the community.

Children and families' accounts suggest that the majority of services focused preventative work on individual children and their behaviour, attitudes and capabilities, rather than building more supportive social environments or changing the context in which children and families live. This reflects a broader tendency within prevention programmes to date, which have focused on individual children and their parents, rather than working with communities' strengths and building capacity at the community level (Luthar and Cicchetti 2000; Peters, Petrunka and Arnold 2003; Schoon and Bynner 2003). Although the Children's Fund placed greater emphasis on children's play and leisure activities than other New Labour initiatives, the research findings suggest that many Children's Fund services focused on individual children's behaviour and attitudes in order to improve educational outcomes and reduce the risk of crime and anti-social behaviour. This corresponds to the New Labour social investment approach, which emphasises children's future roles as 'citizen-workers' and regards education as the major route out of exclusion (Williams 2004). The danger, however, is that services targeted towards groups of children who are deemed to be particularly 'at risk' of social exclusion due to their behaviour or characteristics may stigmatise individuals and emphasise the particular characteristics which 'prevent them from becoming responsible future citizens' (Williams 2004, 416). This could potentially lead to 'moral

underclass' perspectives which blame the individual or family for excluding themselves through not conforming to 'normal' social behaviour (Levitas 1998).

Most children and parents valued Children's Fund services for providing access to opportunities and support that were not previously available, thus the issue of stigmatisation of services was not a major concern raised by the children and parents interviewed. Many children and parents valued the flexible and responsive approaches of Children's Fund services, which often contrasted to their previously stigmatising experiences of statutory services. In particular, they valued the non-judgmental attitudes and independent role of project workers as 'safe outsiders' who could help to mediate with school and other statutory professionals (see also Pinnock and Evans forthcoming). The research was however unable to investigate reasons for non-take-up of Children's Fund services by families considered at risk of social exclusion and stigmatisation may play a role in this. For example, one parent highlighted the stigma associated with a service targeted towards children at risk of crime, which she and other parents had originally been reluctant to allow their children to engage with due to their perceptions that the service was for *'kids that had been in trouble and had been brought in off the streets'*.

Furthermore, in contrast to the Children's Fund's emphasis on changing individual children's behaviour and attitudes, children's and parents' perspectives of the risks that they are dealing with emphasise wider structural and relational factors beyond the individual child and family. Children and parents are engaged in a process of negotiating a complex range of risk and protective factors within their schools and communities on a daily basis. This highlights the need for more holistic community-based approaches, which acknowledge the structural and attitudinal causes of poverty and social exclusion within deprived communities, as well as provide support for individual children and families.

Although many of the benefits for individual children related to gaining the skills and capabilities needed to become an adult, many children and families also perceived more immediate benefits of services such as 'having fun' and making new friends in both open access and targeted

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play and leisure activities that were not previously available or accessible in their neighbourhood. These outcomes suggest that there are spaces within the social investment approach where children's present well-being is valued and more immediate quality of life issues can be addressed (Lister 2003). This highlights the need for preventative services to create spaces within neighbourhoods and communities for the 'active enjoyment and negotiation of childhood and young personhood with friends and siblings' (Williams 2004, 412).

Given the rapidly changing policy context and the marginal position of the Children's Fund within English local authority structures as a relatively time-limited Government initiative (Edwards et al. 2006), it is not surprising that the Children's Fund has had limited impact on building protective factors at the community level and promoting more sustainable communities. While approaches which focus on individual children and their families may be important in developing their resilience to deal with adversity in the short term, such approaches have limited potential to address the structural and attitudinal dimensions of social exclusion facing disadvantaged families and communities. Social welfare policies and services designed to support children's pathways towards greater social inclusion need to engage with children's family networks, collaborate with other professionals to develop more supportive social environments and service systems, and remain flexible and responsive to the changing trajectories of children and young people over time.

Notes

1. The National Evaluation of the Children's Fund was a three year research project commissioned by the UK Department for Education and Skills (2003-2006). It was based at the University of Birmingham and the Institute of Education, University of London. See Edwards *et al.* (2006) for further information.

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