

## **Parent-worker relationships in child and family social work: A Belgian case study**

### **Authors**

Sabine Van Houte, Lieve Bradt, Michel Vandebroeck & Maria Bouverne-De Bie

Sabine Van Houte is PhD student at the Department of Social Welfare Studies, Ghent University. Lieve Bradt is post doctoral researcher at the Department of Social Welfare Studies. Michel Vandebroeck is Professor at the Department of Social Welfare Studies, Ghent University. Maria Bouverne-De Bie is Professor at the Department of Social Welfare Studies, Ghent University.

### **Corresponding author:**

Sabine Van Houte  
Ghent University  
Faculty of Psychology and Educational Sciences  
Department of Social Welfare Studies  
Henri Dunantlaan 2  
9000 Gent  
Belgium  
Tel: +32 9 264 63 99  
Fax: +32 9 264 64 93  
E-mail: Sabine.Vanhoute@UGent.be

## **Abstract**

The involvement of parents within child and family social work has become an important research topic during the past few decades. Within this research, a lot of attention is paid to partnership, which is recognised as a dominant concept in current thinking about the parent-worker relationship in present-day practice. The debate on parent-worker relationships, however, seems to be mainly focused on the individual relationship between the parent and the social worker. Based on a historical analysis of policy documents on a Belgian child and family welfare service, this article offers a historical and socio-political contextualisation of the current debate on the parent-worker relationship. The analysis reveals that socio-political ideas about the responsibilities of the state, the community and the private family have induced a continuous reflection on which children and parents should be seen as the most appropriate clients for a particular service as well as an ongoing development of diagnostic instruments to legitimise in- and exclusion of families within child and family social work. Consequences for parent-worker relationships in child and family social work are discussed, as well as some implications for future research on child and family social work practices.

**Keywords:** child welfare, history, parental involvement, social policy, partnership

## Introduction

Involving parents is a general characteristic of the family support approach which is increasingly being incorporated in state government child welfare systems (Lightburn & Kemp, 1994). This evolution is described as an international trend (see Artaraz, Thurston & Davies, 2007). For example, the Organisation for Economic Cooperation and Development promotes this practice to improve children's well-being (OECD, 2009). Hence, the involvement of parents within the interventional process has become an important research topic during the past few decades. Within this research, a lot of attention is paid to partnership (Calder & Horwath, 2000), which is recognised as a dominant concept in current thinking about the parent-worker relationship in present-day practice (Corby, Millar & Young, 1996; Alasuutari, 2010). Several scholars consider partnership as a positive evolution, albeit for different reasons. Some scholars, for example, emphasise the values that underpin this concept such as sharing power, consensuality and equality which make the concept of partnership more desirable, i.e. more ethical and effective, than the controlling and paternalistic nature of relationships in the past (e.g. Corby et al., 1996; Bundy-Fazioli, Briar-Lawson & Hardiman, 2009). Other scholars, however, contest the possibility of the actual realisation of partnership relations in practice. They point to the inevitable presence of power in participatory practices (e.g. Healy, 1998; ~~authors' own~~ [Roose et al.](#), in press (b)) resulting in hierarchical relations rather than equal partnership (e.g. Gillies, 2005). Featherstone, Broadhurst and Holt (2011) argue that difficulties in achieving partnership relations in practice can be related to the late modern social investment state in which child and family social workers currently have to act, as this context is characterised by a more contractual approach and standardisation in which 'parents are set "targets" for behavioural change' (p.7).

In general, the debate on parent-worker relationships seems to be mainly focused on the individual relationship between the parent and the social worker. Daily interactions in

child and family welfare practices are, however, significantly influenced by the historical, socio-political context of these practices (Baistow & Wilford, 2000; Vandebroek, 2006; Lorenz, 2007). This means that the study of parent-worker relationships in child and family social work requires a historical approach, in which the debate on parent-worker relationships is contextualised as a socio-political debate. The question is, then, how socio-political ideas about the respective responsibilities of the state, communities and the private family have been implemented by child and family social work, and how this implementation influences the conceptualisation of parent-worker relationships. As a case to contextualise the current debate on involving parents in child and family social work, we analysed policy documents on a particular family support oriented child and family welfare service in Flanders (the Dutch-speaking part of Belgium), namely *Centra voor Kinderzorg en Gezinsondersteuning* (Centres for Childcare and Family Support, hereafter CKG). Flanders is an interesting case as it both exemplifies the broader European development towards a family support perspective to improve children's well-being (Roose et al., [submitted in press\(a\)](#)), and the currently dominant idea of partnership as the most desirable parent-worker relationship within Europe. Based on our analysis, we will argue that socio-political ideas about the relationship between the state, the community and the private family have induced (i) an ongoing discussion about *which* children and parents should be seen as the most *appropriate* clients for a particular service and (ii) that this process is related to an instrumental approach to the parent-worker relationship in child and family social work and in the best interests of the child.

In what follows, we first describe the research context and the method, after which we present the findings of our historical analysis. To conclude, consequences for the study of parent-worker relationships in child and family social work are discussed, as well as some implications for future research on child and family social work practices.

## Research context

In Flanders, child protection and child and family welfare services are closely interlinked and together form one pyramid structure (see Desair & Adriaenssens, 2011). The rationale is that family support interventions should precede – and attempt to avoid – child protection interventions (Roose, 2006). CKG are situated at a lower level in this pyramid structure and are considered a less coercive and less specific service than child protection. CKG are an example of family support oriented services. They offer residential and semi-residential care for children, parent training and private home visits to families with children up to the age of 12. CKG have a long history that can be traced back to the Vacation Colonies that were developed at the end of the nineteenth century in many European countries as part of a broader hygienic and philanthropic movement (Vanobbergen, 2009). These Vacation Colonies offered a temporarily stay in a healthy environment for school children. The origin of the CKG lies in the reform of the Vacation Colonies by the Belgian state into Colonies for Weak Children. Hence, the CKG are considered as one of the first preventive family support interventions in Belgian child welfare policy.

The first regulations with regard to the Colonies for Weak Children appeared in the formal legislation on child welfare of 1919. Under the same regulations the *Nationaal Werk voor Kinderwelzijn* (National Child Welfare Service), the so-called ONE-NWK, was founded as a Belgian administrative body responsible for funding and regulating child welfare initiatives, including the Colonies for Weak Children (Vandenbroeck, 2006).

As a result of the federalisation of Belgium in the early 1980s, a separate policy was developed for the Flemish and the Walloon regions of Belgium. The ONE-NWK was restructured into two different organisations. From that moment, *Kind & Gezin* (Child & Family) became the regulating organisation for Flanders. In the same period the Colonies for

Weak Children in Flanders were reformed into the so-called *Kinderopvangcentra* and in 1995 these centres were again reformed into the CKG. In 2002 a new regulation was implemented in which the different forms of help were made more explicit. Since 2010 a radicalisation of this reform has been instigated. The purpose is to reinforce the main aims and orientations of the CKG as a preventive practice, focusing on reintegrating the child into the family and avoiding more coercive child protection measures. Yet, at the same time, a starting point in this reform is the acknowledgement that the CKG are *de facto* intervening in families as a result of judicial interventions. Hence, the target group of the CKG also comprises children in need of *child protection*, for whom the only remaining perspective is an orientation to more permanent residential care in child protection institutions.

## **Method**

To gain insight into the historical and socio-political context of the CKG we analysed regulations, decrees and policy texts (including policy discussions) on this service since the foundation of its predecessor at the end of the nineteenth century. Our analysis is based on three important time periods, namely (i) the start of the Colonies for Weak Children in 1919, (ii) the shift to a new regulation in 1979 as a result of important evolutions in society and (iii) the shift to the current regulation including some important ideas concerning the new reform that is being prepared. With regard to the first time period, we analysed the regulations on the colonies in the initial legislation of 1919 as well as reports of annual conferences organised by ONE-NWK including discussions between medical advisors about the mission and organisation of the colonies. With regard to the second time period, the new regulation has been analysed as well as reports of both a study group, which had been organised by ONE-NWK in preparation for this regulation, and the Advising Committee of ONE-NWK. With

regard to the final time period, the regulations of 1995 and 2002 have been analysed as well as official documents discussed by the Advising Committee of Kind & Gezin in preparation for a new regulation.

Besides this, we also analysed policy documents on child and family welfare in general in Belgium, e.g. the Belgian legislation on child welfare of 1919, the decree of the Flemish Parliament of 7 May 2004 concerning Networking Youth Care. In addition, we turned to literature about child welfare policy and policy history in Flanders and Europe (cf. Spicker, 1991; Lorenz, 2001) to the extent that they relate to the Flemish situation. These studies offer important additional insights into the history of child welfare policy and show the broader context in which the CKG are developed.

A conventional content analysis (Hsieh & Shannon, 2005) was applied to analyse the selected documents and studies. This analysis resulted in three main themes: (1) socio-political ideas about the relationship between the state, the community and the private family within child and family welfare social work practice; (2) the influence of these ideas on the definition of the target group of the CKG; and (3) the use of diagnostic instruments to reach and legitimise the appropriate target group.

## **Findings**

### *Socio-political ideas about the relationship between the state, the community and the private family*

In the nineteenth century child welfare initiatives were organised by philanthropic societies and charity-inspired associations (Dekker, 2007; Vandenbroeck, 2009). This was

also the case for the Vacation Colonies (see Vermandere, 2010). At the turn of the century the Belgian state showed great interest in child welfare. After the Labour Law for Children in 1888, the Child Protection Law in 1912 and the Law on Compulsory Education in 1914, this interest in child welfare resulted in the first national legislation on child welfare in 1919 and the foundation of a national agency dealing with child and family welfare (ONE- NWK). The state's interest can be explained in the context of the beginning of what Baistoke and Wilford (2000) refer to as the 'Sozialstaat' (p.345), i.e. the socio-political evolution towards social welfare states in Europe since the nineteenth century. This socio-political model entails an intervention of the state in social problems. In order to regulate responsibilities (Pinkerton, 2003) between 'the private sphere of the household and the public sphere of the state and society' (Parton, 2000, p.455), many European countries developed a system based on the principle of *subsidiarity* (Katz & Hetherington, 2006). According to this principle, 'interventions at higher levels of society have to be seen as subsidiary to the obligations of smaller social units' (Spicker, 1991, p.3). Hence, subsidiarity is described as a protection mechanism for individuals against the power of the state upholding the parents as primarily responsible for the care and education of their children (Higham, 2006). As a result, child welfare services were provided by civil society – especially in the case of Belgium as it developed as a corporatist system (Lorenz, 2001) – aiming especially to serve families in need. The organisation of child welfare services was left in the hands of private initiatives, but the Belgian state could still interfere by securing financial funding to these private initiatives, a system known as subsidised liberty (*liberté subsidiée*) (see Vandebroek, 2006). Consequently, there is a double responsibility on the services' account: addressing their interventions to those who need it (as a social responsibility); and proving their effectiveness in helping those in need in order to legitimise their financial funding (as a responsibility towards the state).



The rationale that interventions should be limited to those who need it and services should legitimise financial funding by proving their effectiveness can be clearly identified in policy documents concerning the colonies. Besides the fact that Vacation Colonies were included in the first legislation on child welfare along with other childcare initiatives, the legislation also secured financing for the colonies by the state. Moreover, the legislation included some specific regulations for the colonies under a new name: Colonies for Weak Children. This shift in focus from Vacation Colonies to Colonies for Weak Children illustrates the state's interference in the debate on who should be addressed. It precipitated an ongoing discussion between the medical advisors of ONE-NWK as to the exact meaning of *weak*. This issue was a priority on the agenda of the annual conferences of ONE-NWK in 1927 and 1952. One of the advisors said:

'This question is worth an exploration, because it is righteous to ask for effective outcomes exclusively in benefit of those children for whom the funding by the state is meant. The Ministry of employment decided that the state should financially support only those children who are really weak.' (Herman, 1927, pp.12-13, our translation)

Today subsidiarity remains a guiding principle. Nevertheless, this principle has not hindered the growth of child welfare initiatives, resulting in a diversification of methods and an increasingly wide interpretation of which families need a professional intervention (De Bie & Roose, 2009). With regard to the colonies, we can remark that in the 1980s the term *weak* not only referred to the physical health of children, but also to their mental health and social well-being. Subsidiarity and intervention go hand in hand in the attempt to realise a family model that guarantees the best interest of the child. In that light, interventions are legitimised

especially in those cases where shortcomings towards this normative family model can be shown.

Baistow and Wilford (2000) stated that up to now, ‘family support and child care services are considered a social responsibility upholding the family as a basic social institution’ (p.345). At the same time, according to Morel (2007), the persistent idea that state interventions could undermine the family explains the continuity of the principle of subsidiarity in family welfare policy. Hence, in historical as well as in current policy texts it is stressed that ‘no more help should be offered than necessary’ (Kind & Gezin, 2010, p.13) and that the intended target group should be respected. The role of the CKG is described as teaching families ‘to depend on their own strengths, to use natural sources of support as well as to address their immediate environment’ (Kind & Gezin, 2010, p.14) – a quotation that also illustrates how subsidiarity as a political principle is translated within individual practices as a way of pre-defining their target groups. Hence, certain parents gained notice as requiring support in obtaining family life standards (Gillies, 2005), not for themselves, but for ensuring the welfare of their children (Featherstone, 2004). According to Reynaert, Bouverne-De Bie and Vandevelde (2009), child welfare services then, are expected to support parents ‘in realizing their parental duty’ (p.524), i.e. to become autonomously responsible for the care and education of their children. Consequently, the rationale seems to be similar to the rationale at the beginning of the 20<sup>th</sup> century: the state ensures the provision and funding of child and family welfare interventions, and in return expects services that legitimise this funding through offering ‘sufficient and effective services’ (Katz & Hetherington, 2006, p.432). To avoid cutting back financial funding the CKG needs to respect various regulations in order to reach the goals as prescribed by Kind & Gezin. So, through the system of financial funding, the state has an influence on which families are addressed by the CKG. This phenomenon is not typical of Belgium, though the state’s influence differs from country to

country depending on the welfare regime – liberal, social democratic or corporatist (see Esping-Andersen, 1990) – developed within this country. Butschi and Cattacin (1993) have described a similar translation of the subsidiarity principle based on the context of Switzerland: ‘Whereas the liberal state of the nineteenth century only intervened when civil society failed, the modern welfare state incites civil society to deal with the problem’ (p.362).

### *Defining the appropriate target group*

Choosing which families are supposed to be in need of a child and family social work intervention is strongly influenced by a risk prevention perspective that is a dominant pattern in contemporary continental European social work, including family support policy and practice (Kemshall, 2010; Vandebroek et al., 2009; Katz & Hetherington, 2006). In the case of Belgium, prevention is seen as a key idea in the development of child and family welfare policy (Roose, 2006). On the one hand, our analysis of the CKG reveals that this risk prevention perspective can be considered a historical continuity, influencing the discussion on the definition of their target groups. On the other hand, however, our analysis reveals that notwithstanding this continuity, there have been shifting answers to the question of which risks society should prevent and which families are therefore in need of control or support to prevent further escalation of their situation. As Hämäläinen highlighted (2011): ‘the currents of thoughts at a given time’ (p.10) have shaped the content of those answers. Furthermore, the risk prevention perspective, as a basis for legitimising child welfare interventions, increasingly evokes a wider interpretation of what should be considered as shortcomings in children’s care and education within the private family and hence of the question of which families should receive intervention.

In the Belgian legislation on child welfare of 1919, Henri Velge, the first head of ONE-NWK, explained the state's aim as protecting children and promoting hygiene. This intention can be linked to the social conditions at that time: the 'social question' i.e. widespread poverty as a consequence of the industrialisation process and urbanisation which caused health problems and high rates of child malnutrition and mortality. The state's interest was clearly inspired by the hygienic movement that considered health problems as indicators of social disorder (Vanobbergen, 2009). Hence, the intention of the state can easily be interpreted as dealing with the physical health of citizens as a way to create *better* citizens. In other words, the state was involved in a process of civilisation and normalisation. As a result, the initial aim of the colonies was expressed as 'a hygienic prevention in favour of weak school children, for the most poor among the weak. Colonies do not accept ill children.' (Vermandere, 2010, p.26, our translation). The initial target group thus comprised children for whom a particular intervention was interpreted as most effective i.e. families with children who were not ill or did not suffer from more permanent conditions, and for whom a limited stay in a healthy environment and a change in their behaviour could prevent an escalation of their condition. Families lacking morality and knowledge were considered to be in special need of a control-oriented intervention.

In the new regulations of 1980, the definition of the target group was adapted to the changing social needs in society. While the aim of the intervention was still described as improving children's health conditions, *health* was defined as 'physical, mental and social well-being' (ONE-NWK, 1979, our translation). This new definition of 'mental health' was in accordance with the definition used by, amongst others, the World Health Organisation since the 1950s (Vandenbroeck, 2006).

More specifically, next to physical difficulties and developmental problems of the child, a lack of coping capacity in the family was described as a possible reason for access to

the CKG. While a particular family model was promoted as standard (De Bie & Roose, 2009), control and support was needed for those not able to live by this model, such as single and divorced parents. A wider interpretation of families in need of a professional child welfare social work intervention based on a prevention perspective can be observed.

More recently, there has been a new change of direction. In recent policy documents, the key objective of the CKG is described as the interaction between parents and children (Kind & Gezin, 2011). This objective is in line with a broader evolution that is referred to as an orientation towards 'the quality of relationships between family members' (De Bie & Roose, 2009, p.6, our translation). This new focus is based on the emergence of therapeutic models that consider the family as a system (De Koster & Loots, 2002). As a result, these centres do not consider more structural problems in the life context of families as a key concern of the current service (see Kind & Gezin, 2010). In the newest policy texts it is emphasised that the target group should be limited to those families for whom support in educational competences can mean an improvement (Kind & Gezin, 2011). The underlying idea is that appropriate parental communication skills can prevent more problematic situations, while severe structural problems of poverty are often labeled as situations where preventive interventions can no longer be effective. Divorce then, for example, can still be a reason to get access to the CKG, but only as far as divorced parents can be supported by strengthening their educational competences.

These findings indicate that while on the one hand the target group of the CKG has historically grown – from weak children, over mental health and social well-being to parental communication skills – on the other hand, this enlargement has occurred in conjunction with a narrower interpretation of what should be considered situations that could benefit from professional attention.

### *The use of diagnostic instruments*

As we mentioned earlier, throughout history the principle of subsidiarity obliged the CKG to prove that the target group they aimed at really needed this particular intervention and would benefit from it. In 1927, Dourlet, one of its medical advisors, suggested how the centres could prove their effectiveness. His suggestion was to select children based on the service they offered. Moreover, he suggested selecting only those children for whom a realistic possibility of improvement could be assessed at the start:

‘For practical reasons with regard to the selection of children who are sent to the colonies, it is of great importance to be able to determine if a residence at the seaside or in the country will be a benefit’ (Dourlet, 1927, p.22, our translation).

This quotation regarding the case of the Colonies for Weak Children illustrates Lorenz’s statement (1991) that social work adopted the principle of subsidiarity from the moment that it became an intrinsic part of a country’s social policy. It reveals also that social work adopted this principle in a particular way based on a rationale of effectiveness and efficiency of the own service. For the selection of the *appropriate* children, diagnostic instruments in order to categorise children became central. A pre-structured questionnaire that originally categorised children into four groups according to the estimated urgency of a residence in the colony, i.e. ‘urgent’, ‘most necessary’, ‘necessary’ and ‘helpful’ (Velge, 1940, p.268, our translation), went through different reformations. For example, in 1927, Dourlet suggested the following categories: ‘[...] backwardness caused by a developmental disease, real backwardness and a state of backwardness that goes along with the recovery of a disease. Only the last category should be given access to the colony’ (p.23, our translation).

As Parton (2000) stated, classifying citizens based on science as a legitimation was a central focus since the very beginning of the welfare state. In the case of the Colonies for Weak Children a strong belief in diagnostic instruments based on medical science was combined with a strong belief in scientifically trained staff to decide on access. Medical advisors declared that a ‘thorough medical examination’ (Dourlet, 1927, p.20) should be carried out ‘as scientifically as possible’ (Herman, 1927, p.3) and that ‘on this matter, the medical staff is responsible’ (Willemijns, 1952, p.5).

In the further evolution of the colonies, the assessment evolved to an examination that included the personal history and social environment of the child (Velge, s.d.). While the involvement of social workers was already discussed at the conference of 1927 and was regarded as an extra guarantee to gather more information in order to make a better diagnose, in the regulation of 1979, the social worker was recognised for his competences to ensure an adequate assessment (ONE-NWK, 1979).

Our analysis also shows that contemporary child and family social work is strongly influenced by the principle of subsidiarity. In recent policy documents it is stated that ‘when different forms of youth care equally respond to a certain youth care question or need, then the least radical form of care has to be chosen’ (Vlaams Parlement, 2004, our translation). As a result, every service is accessible only for a limited and well-defined group of families. Moreover, this rationale is relevant at the level of individual services, as even in the allocation of one of the different forms of support offered by a particular service, the subsidiarity principle plays a central role. This can be seen, for example, in the current regulation on the CKG in which it is stated that residential care is considered as the most radical form: ‘When the results of the care offered are the same, semi-residential or non-residential interventions

are preferable to residential care' (Vlaamse Regering, 2002, our translation). Also in the most current policy text it is emphasised that the target group of the CKG should be limited to those families for whom it is realistically expected that the situation at home can be improved (see Kind & Gezin, 2011). Furthermore, the necessity in these CKG exploring the exact needs of parents thoroughly as a basis to decide access is explained as a consequence of the principle of subsidiarity (Van den Bruel, 2002). Using indications and diagnostic instruments is highlighted as a legitimate practice to accomplish the best classification and selection of families. The classification should be related to pre-structured intervention modules for which the method is clearly defined, as well as the problem situation that can be solved by it (see Kind & Gezin, 2011).

Furthermore, it is stated that the responsibility for the selection should be in the hands of a specialised assessment team. This statement expresses a strong belief in obtaining effective and efficient services through this method of working. Clear shifts in history can be observed in which kind of professional training is considered essential expertise for making legitimate decisions about the needs of families. However, throughout history professionals have continuously been expected to use standardised and scientifically developed instruments. Looking ahead, it is stressed that decisions made by professionals should be based on scientifically legitimised diagnostic models (see Kind & Gezin, 2010). Again this is not typical of Belgium. Also, Lorenz (2001) has pointed at the increased 'instrumental use' (p.598) of social workers by funding authorities within Europe.

## **Discussion**

We started this article with the observation that there is a need for historical and socio-political contextualisation of the current debate on the parent-worker relationship, as previous research on parent-worker relations in child welfare social work mainly focuses on the



individual relationship. Our article aims at gaining more insight into socio-political ideas concerning the relationship between the state, the community and the private family and how the implementation of those ideas in the field of child and family social work influences the discussions on the parent-worker relationship. Two lessons can be learned from our analysis.

Firstly, our historical analysis shows that a welfare model based on the socio-political principle of subsidiarity has been a leading motor throughout the history of child and family welfare policy. This has resulted in (i) shifting ideas about which families should be considered the most appropriate clients for a particular service and (ii) a continuous development of diagnostic instruments and selection criteria to decide on access to this service, including a debate on which expertise and which professional is needed to assess this. The selection criteria always seem to have been based on the intervention offered, i.e. the question of whether a particular intervention could be effective and efficient in a particular case.

Hence, a first conclusion seems to be that the socio-political principle of subsidiarity has been translated into pre-structuring which parents and children can/should be reached by child and family social work. This is in line with several scholars' statements (e.g. Lorenz, 2001; Featherstone, Broadhurst & Holt, 2011) that social work practices develop into standardisation and an orientation towards effectiveness and efficiency. We agree with the argument that this development makes the realisation of partnership relationships difficult. However, our analysis reveals that the use of diagnostic instruments and categories – in an attempt to select only the most appropriate children and parents – has been an essential characteristic of child and family social work policy and practice since the beginning of the twentieth century.

Second, our analysis revealed that ideas about the most appropriate target group has changed throughout history going from weak children, over mental health and social well-being to parental communication skills. This observation shows that the current debate about which kind of parent-worker relations can or should be realised in practice is meaningless if it is not connected to the question of what is understood by ‘the parents’. This is an important question as the practice of pre-structuring which families can, or cannot, be accepted for a particular intervention creates a tension between child and family social work practices and the right to social welfare, as certain families are excluded from social welfare interventions. By offering insight into shifts in how, and which families are defined as a target group for a particular intervention, this study contributes to the debate on the consequences of selection mechanisms in child and family social work practices at the societal level. Future research should not only focus on the quality of the individual relationship between the parent and the worker, but should also pay attention to the question of which parents – and even which professionals – are involved in this relationship and under which conditions.

## References

Authors' own

Alasuutari, M. (2010) ‘Striving at partnership: parent-practitioner relationships in Finnish early educators' talk’, *European Early Childhood Education Research Journal*, vol. 18, pp. 149-161.

Artaraz, K., Thurston, M. & Davies, S. (2007) ‘Understanding family support provision within the context of prevention: a critical analysis of a local voluntary sector project’, *Child & Family Social Work*, vol. 12, pp. 306-315.

- Baistow, K. & Wilford, G. (2000) 'Helping parents, protecting children: Ideas from Germany', *Children & Society*, vol. 14, no. 5, pp. 343–54.
- Bundy-Fazioli, K., Briar-Lawson, K. & Hardiman, E.R. (2009) 'A qualitative examination of power between child welfare workers and parents', *British Journal of Social Work*, vol. 39, no. 8, pp. 1447-1464.
- Butschi, D. & Cattacin, S. (1993) 'The third sector in Switzerland: The transformation of the subsidiarity principle', *West European Politics*, vol. 16, no. 3, pp. 362-379.
- Calder, M.C. & Horwath, J. (2000) 'Challenging passive partnerships with parents and children in the core group forum: a framework for a proactive approach', *Child & Family Social Work*, vol. 5, no. 3, pp. 267-277.
- Corby, B., Millar, M. & Young, L. (1996) 'Parental participation in child protection work: Rethinking the rhetoric', *British Journal of Social Work*, vol. 26, no. 4, pp. 475-790.
- De Bie, M. & Roose, R. (2009) *De zorg om de jeugd en het eeuwige opvoedingstekort*, [Online] Available at: <http://www.canonsociaalwerk.be/be/essays.php>
- Dekker, J.J.H. (2007) 'Philanthropic networks for children at risk in nineteenth-century Europe', *Paedagogica Historica*, vol. 43, no. 2, pp. 235-244.
- De Koster, K. & Loots, G. (2002) 'Gezinsgericht en systeemgeoriënteerd werken in de bijzondere jeugdzorg: een verkennend kwalitatief onderzoek bij de onthaal-, oriëntatie en observatiecentra in Vlaanderen', *TOKK*, vol. 27, pp. 92-103.
- Desair, K. & Adriaensens, P. (2011) 'Policy toward child abuse and neglect in Belgium: shared responsibility, differentiated response', in *Child Protection Systems. International Trends and Orientations*, eds N. Gilbert, N. Parton & M. Skiveness, Oxford University Press, Oxford.

Dourlet, X. (1927) *Over de methoden tot bepaling der kinderzwakte. Verslag Nationaal Kongres der Werken voor Kinderwelzijn op 23 October 1927 in Namen, N.W.K., Brussel.*

Esping-Andersen, G. (1990) *The three worlds of welfare capitalism*, Cambridge, Polity Press.

Met opmaak: Lettertype: Cursief

Featherstone, B. (2004) *Family Life and Family Support: A Feminist Analysis*, Palgrave Macmillan, Basingstoke.

Featherstone, B., Broadhurst, K. & Holt, K. (2011) 'Thinking systemically – thinking politically: building strong partnerships with children and families in the context of rising inequality', *British Journal of Social Work*, Advanced Access, pp. 1-16.

Gillies, V. (2005) 'Meeting parents' needs? Discourses of "support" and "inclusion" in family policy', *Critical Social Policy*, vol. 25, no. 1, pp. 70-90.

Hämäläinen, J. (2011) 'The idea of parent education in the Finnish tradition of child welfare: a historical overview', *Social Work in Europe*, vol. 10, no. 1, pp. 9-13.

Healy, K. (1998) 'Participation and child protection: the importance of context', *British Journal of Social Work*, vol. 28, no. 6, pp. 897-914.

Herman, X. (1927) *Over de methoden tot bepaling der kinderzwakte. Verslag Nationaal Kongres der Werken voor Kinderwelzijn op 23 October 1927 in Namen, N.W.K., Brussel.*

Higham, P. (2006) *Social Work: Introducing Professional Practice*, Sage Publications Ltd, London.

Hsieh, H.F. and Shannon, S.E. (2005) 'Three approaches to qualitative content analysis', *Qualitative Health Research*, vol. 15, no. 9, pp. 1277-1288.

Katz, I. & Hetherington, R. (2006) 'Co-operating and communicating: a European perspective on integrating services for children', *Child Abuse Review*, vol. 15, issue 6, pp. 429-439.

Kemshall, H. (2010) 'Risk rationalities in contemporary social work policy and practice', *British Journal of Social Work*, vol. 40, no. 4, pp. 1247-1262.

Kind & Gezin (2010) *Nota Raadgevend Comité 18 november 2010*, Kind & Gezin, Brussel.

Kind & Gezin (2011) *Nota Raadgevend Comité 28 september 2011*, Kind & Gezin, Brussel.

Lightburn, A. & Kemp, S.P. (1994) 'Family-support programs: Opportunities for community-based practice', *Families in Society*, vol. 75, pp. 16-26.

Lorenz, W. (1991) 'Social work practice in Europe'. In M. Hill (Ed.), *Social work and the European community: the social policy and practice contexts. Research highlights in social work*, vol. 23, pp. 65-79. Jessica Kingsly Publishers Ltd, London.

Lorenz, W. (2001) 'Social work responses to "New Labour" in continental European countries', *British Journal of Social Work*, vol. 31, no. 4, pp. 595-609.

Lorenz, W. (2007) 'Practising history. Memory and contemporary professional practice', *International Social Work*, vol. 50, no. 5, pp. 597-612.

Morel, N. (2007) 'From subsidiarity to "free choice": Child- and elder-care policy reforms in France, Belgium, Germany and the Netherlands', *Social Policy and Administration*, vol. 41, no. 6, pp. 618-637.

OECD (2009) *Doing Better for Children*, [Online] Available at:  
[www.oecd.org/els/social/childwellbeing](http://www.oecd.org/els/social/childwellbeing)

ONE-NWK (1979) *Reglement voor de kinderopvangcentra*, ONE-NWK, Brussel.

Parton, N. (2000) 'Some thoughts on the relationship between theory and practice in and for social work', *British Journal of Social Work*, vol. 30, pp. 449-463.

Pinkerton, J. (2003) 'From parity to subsidiarity? Children's policy in Northern Ireland under New Labour: The case of child welfare', *Children & Society*, vol. 17, no. 3, pp. 254-260.

Reynaert, D., Bouverne-De Bie, M. & Vandeveld, S. (2009) 'A Review of children's rights literature since the adoption of the United Nations convention on the rights of the child', *Childhood*, vol. 16, pp. 518-534.

Roose, R. (2006) *De bijzondere jeugdzorg als opvoeder*, Academia press, Gent.

Roose, R., Roets, G. & Schiettecatte, T. (submitted in press) (a) 'Strengths-based social work: reclaiming a political approach', *European Journal of Social Work*.

Roose, R., Roets, G., Van Houte, S., Vandenhoe, W. & Reynaert, D. (in press) (b) 'From parental engagement to the engagement of social work services: discussing reductionist and democratic forms of partnership with families', *Child & Family Social Work*.

Met opmaak: Lettertype: Cursief

Spicker, P. (1991) 'The principle of subsidiarity and the social policy of the European Community', *Journal of European Social Policy*, vol. 1, no. 1, pp. 3-14.

Vandenbroeck, M. (2006) 'The persistent gap between education and care: a history of the present research on Belgian child care provision and policy', *Paedagogica Historica*, vol. 42, no. 3, pp. 363-383.

Vandenbroeck, M. (2009) *In verzekerde bewaring. Honderdvijftig jaar kinderen, ouders en kinderopvang*, SWP, Amsterdam.

Vandenbroeck, M., Boonaert, T., Van der Mespel, S. & De Brabandere, K. (2009) 'Dialogical spaces to reconceptualize parent support in the social investment state', *Contemporary Issues in Early Childhood*, vol. 10, no. 1, pp. 68-79.

Van den Bruel, B. (2002) *Toekomstgerichte profilering van het CKG. Conceptueel kader*. Kind & Gezin, Brussel.

Vanobbergen, B. (2009) 'Belgian sea hospitals and the child at risk: Exploring an educational paradox', *The Journal of the History of Childhood and Youth*, vol. 2, no. 2, pp. 234-248.

Velge, H. (1940) *De bedrijvigheid van het Nationaal Werk voor Kinderwelzijn tijdens vijf en twintig jaar (1915-1940)*, N.W.K., Brussel.

Velge, H. (s.d.) *Activiteitenverslag 1945-1959. Uitgegeven ter gelegenheid van de 40<sup>e</sup> verjaardag*, N.W.K., Brussel.

Vermandere, M. (2010) *We zijn goed aangekomen! Vakantiekolonies aan de Belgische kust (1887-1980)*, ASP Editions/Amsab, Brussel/Gent.

Vlaams Parlement (2004) *Decreet 7 mei 2004 betreffende de integrale jeugdhulp* (B.S. 11.X.2004).

Vlaamse Regering (2002) *Besluit van 1 maart 2002 betreffende de erkenning en de subsidiëring van de centra voor kinderzorg en gezinsondersteuning* (B.S.11.V.2002).

Wille mijns, X. (1952) *De selectie der kinderen die voor opname in een kolonie aangewezen zijn: indeling der contingenten over de verschillende kolonies. Verslag 15<sup>e</sup> nationaal Congres der Werken voor Kinderwelzijn. 24-25 mei 1952, Oostende-Oostduinkerke*, ONE-NWK, Brussel.

