

An Introduction to Childhood Studies

Kehily, M. (2015) (Ed.)

PROMOTING BETTER CHILDHOODS 109

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construct a very different perception of what constitutes children's 'needs'. In these societies a child's needs are to learn to comply with the moral codes and/or religious doctrines with which they will be expected, as authentic adults, to comply. These very different goals for childhood that are espoused by collectivist cultures cannot be reconciled with the 'needs' discourse based upon developmental psychology. The contrast powerfully highlights the extent to which developmental psychology is, indeed, based upon a particular complex of latent assumptions about children (Woodhead 1997). The 'needs' discourse for children's welfare is revealed for what it is – as culturally contingent and far from universally applicable.

The 'children's rights' discourse

Since about the 1970s sociologists of childhood (such as James and Prout 1997) and policy-makers have argued that children are not just a bundle of 'needs' that must be met. They are people in their own right, with their own concerns, priorities and aspirations.

This position is the basis of a 'children's rights' discourse. It views children, above all, as *citizens* who have rights *as* citizens. So it encourages us to go further than just doing things for children simply because they are 'good for them' – which is often the way adults treat them. For example, think of children's play. If you read textbooks about the crucial functions served by children's play – helping them to learn, helping them to develop social skills like taking turns and sharing, and so on – then it can be easy to lose sight of an alternative set of ideas about the function of play: to delight in having fun and getting pleasure. Adult entertainment and leisure pursuits are not viewed in terms of simply 'being good for them'. Rather they are recognized as things an adult is entitled to do for their own sake, simply because they are enjoyable. Equally, even if we accept that children cannot thrive and flourish unless they have warm and caring relationships – this is not *all* that intimate relationships mean to a child. Adults do not regard being loved and cared about as just about having their 'needs' met. Neither do children. For a child, being loved is profoundly meaningful and valuable in itself.

Crucially, a move from a 'needs' discourse to one of 'rights' treats children as *social actors* – able to act on their own behalf and both capable of and entitled to have a say in what is done to and for them. This discourse proposes that while it is true that childhood may be a time of greater physical growth and intellectual maturation than adulthood, this does not mean that in some way children are 'incomplete'. Certainly it does not mean we can treat them as 'lesser mortals' – as not deserving the same rights and respect as adults. Woodhead (1996: 12) expresses this well: 'Children are not incomplete human beings to be shaped into society's mould. They have needs and aspirations of their own, and rights which must be respected.' This is not just a matter of semantics: it has powerful practical consequences. Advocates of the 'children's rights'

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discourse point out that the paternalism of the 'children's needs' discourse allows adults to abuse the power it gives them. Within the 'needs' discourse, they contend, concepts like 'children's welfare' and 'the best interests of the child' warrant actions towards children that, in fact, serve adult interests.

Gerison Lansdown (2001: 89) makes the point explicitly:

During the course of the twentieth century adults with responsibility for children across the professional spectrum have been responsible for decisions, policies and actions that have been inappropriate for, if not actively harmful to, children while claiming to be acting to promote their welfare.

Lansdown then goes on to give a long list of such abuses. These include social policies of evacuating children in wars, putting children in institutions and isolating them in hospitals. Lansdown also lists examples of where parents' rights are prioritized over the welfare of children – such as legally prohibiting children from being told about their biological parentage in cases of assisted reproduction. An even more extreme example is where children have been born with genetic disorders that mean their genitals are ambiguous (i.e. it is unclear whether they have a clitoris or a penis). In such cases children have been subjected to surgery to 'regularize' their gender, not just at birth but repeatedly in childhood, without being able to give consent and frequently being lied to about what the surgery is for (Simmonds 2003).

One case is described where a pubescent girl was told the surgery she was having was for ovarian cancer, when, in fact, it was to reduce the size of her clitoris (Moreno 1998). It has been suggested (Kitzinger 2004) that in such cases the surgery is performed in the name of 'child welfare' when, in fact, it is being done either to ameliorate parental embarrassment or to conform to medical constructions of what constitutes 'normality'. The child's body is reconstructed, without the child's knowledge or consent, in order to meet the needs and expectations of adults.

What are children's rights?

Such abuses of children in the pursuit of 'meeting their needs' have provided a strong case for according children 'rights'. The United Nations Convention on the Rights of the Child (UNCRC) was instituted in 1991 to specifically counter such abuses. It identifies three main forms of rights for children, often called the 'three Ps' – rights to:

- *provision* of appropriate support and services for their healthy development;
- *protection* from exploitation and abuse;
- *participation* in decisions made about their upbringing and care.

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ing and care.

Within a 'children's rights' approach, the intention is to devise and deliver social welfare policies and services for children in ways that promote these rights. A good example is that the 1989 England and Wales Children Act explicitly specifies that a child's 'wishes and feelings' should be ascertained and must be taken into account in court rulings about her or his future (such as following parental divorce). It also gives older children the potential to challenge their parents' decisions by seeking a court order – for example, to go and live with a relative rather than remain in the family home.

Problems with the children's rights discourse

But, as a number of commentators have noted (e.g. Roche 1992), the 'three Ps' do not always sit easily together. Action to protect children may mean having to limit their participation in decision-making. As you will see in Chapter 8, criticisms have also been made about the ethnocentricity of the formulation of rights built into the UNCRC and problems with applying it in certain situations. Montgomery (2001) argues, for instance, that in regard to child prostitutes, the response to the UNCRC by the Thai government – taking such children from their families – is not only contrary to what the children want. While protecting these children from the specific harm of sexual exploitation entailed in prostitution, Montgomery asserts that the Thai government's policy of placing them in institutions cuts them off from their families and communities in ways that are highly detrimental to their welfare. Moreover, the children's rights discourse is not immune to being appropriated by adults for their own purposes. For instance, one of the forms of 'exploitation' from which children are seen as in need of 'protection' is paid employment. From a Western perspective, children should be in school, receiving their entitlement to education. But it is worth noting that trade unions are key players in the movement to stop child labour. It does not require much cynicism to suggest that their motivation may have more to do with protecting adults' jobs and rates of pay than promoting children's rights.

When parental rights conflict with children's rights

However, the greatest antagonism towards children's rights is often in situations where they are seen to directly challenge parental rights. When the 1989 Children Act was introduced, its provisions allowing children to challenge aspects of parental upbringing received a very hostile press. In an article headlined 'Pocket money rise or it's divorce', the journalist Polly Ghazi (1993) argued:

Parents who turn up their noses when their children bury themselves in *Viz*, *Smash Hits* or *Just 17* may be making a big mistake. The magazines may soon contain advertisements for a booklet entitled *Your Say in Court*, which could have a significant effect on family relationships. Aimed at 10- to 16-year-olds, it provides a step-by-step guide on how to 'divorce' parents.

The rest of the article is somewhat more measured in tone and explains that the booklet is produced by the Children's Legal Centre, not to incite childish rebellion, but to inform children about their rights, and that it is endorsed by the National Society for the Prevention of Cruelty to Children. But the article nonetheless conveys the erroneous message that children can 'divorce' their parents at will, for trivial reasons. In actuality, it is very difficult for a child to contest her or his parent's views about where she or he should live. It would only be ordered by a court if the child could make a compelling case that living with a relative, say, is better for them than living with their parent(s).

It remains that the concept of 'children's rights' can touch a very raw nerve when it puts adult decisions and actions to the test – are they *really* 'in the best interests of the child'? Yet it is in this, I believe, that the power of a children's rights discourse lies. The point is that while most parents, most of the time, act in their children's best interests, some do not. And all parents are capable of sometimes allowing other considerations to cloud their judgement, or get in the way of doing what is best for their children. Parents are not saints. They get angry, they have divided loyalties, they sometimes lose their tempers. Parents, especially when in conflict with each other or with outside agencies, can and do sometimes use their children to work out problems or ambitions of their own.

Equally, professionals have their own concerns, their own battles to fight, their own needs, and can and do justify self-serving actions by claiming that they are 'in the child's best interests'. Thus the main purpose of identifying children's rights and seeking to promote them is to acknowledge that adults do not always know best, and may not always act in the most honourable ways, and to recognize therefore that there must be some limits on adult power over children. According to its advocates, the UNCRC is not intended to undermine adults' ability to care about and care for children, and to protect them and to promote their welfare. Rather it can provide an essential counter to the *misuse* of adult power.

The 'quality of life' discourse

An alternative to both the 'needs' and 'rights' discourses has recently been posed by a 'children's quality of life' discourse. Its proponents argue that the concept of quality of life – because it specifically acknowledges the variability of value systems – allows us to move beyond the ethnocentric concerns of the needs and rights discourses. It also acknowledges, in a way that the other discourses fail to address, that children's welfare is always contextual. It cannot be fostered in isolation, but has to take into account the concerns, values, resources and limitations of the families and communities in which children are reared and cared for. The most usual situation in which this concept is used is in health-care settings. It is defined by the World Health Organization (1993: 30) as follows:

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The application of the concept developed, in part, by a shift in theorizing. It is that material conditions in relation to health are them 'quality' (of life)

Casas proposes that children's welfare is their lives and that of their parents. In their 'developmental' approach, they take account of the status in their families. The focus on how to improve upon how we think about and the social protection is that social protection and provision based upon meeting the problems through a proach of identifying the problems of professionals to ensure adequate parent care and harm. Casas continues to ensure that children are safe. We should, he says, instead concentrate on situations and to

Promoting resilience

A key concept in the development under

An individual's perception of their position in life in the context of the culture and value systems in which they live and in relation to their goals, expectations, standards and concerns. It is a broad ranging concept affected in a complex way by the person's physical health, psychological state, level of independence, social relationships and their relationships to salient features in their environment.

Usually in health-care settings it is used as a measure to decide how to apportion services, in situations where people are suffering from chronic conditions that cannot be cured, including services for people who are dying. The impact of the service is not measured in terms of its ability to 'cure', but rather in terms of its contribution to improving the patient's quality of life.

The application of the concept of quality of life to childhood has been developed, in particular, by Ferran Casas (1998, 2000). He draws upon a general shift in theorizing that began in the 1960s when a number of social policy theorists began to argue that welfare should not be understood merely in terms of material conditions (such as decent housing and sufficient income) but more in relation to how people *experience* their lives and what they see as giving them 'quality' (see Campbell et al. 1976).

Casas proposes that the concept of quality of life is useful in considering children's welfare because it acknowledges that children's satisfaction with their lives and their general state of happiness do not narrowly depend on meeting their 'developmental needs' or even on fostering their 'rights'. We must also take account of more culturally mediated factors, such as children's role and status in their families and communities. Crucially, Casas argues that when we focus on how to improve children's quality of life, this has a significant impact upon how we think about what children are entitled to receive from society and the social policies and services provided for them. The basis of his contention is that social policy based upon children's rights – particularly to protection and provision of services – may seem to be an improvement upon one based upon meeting children's needs. But, in fact, it is still preoccupied with the problems that children face in *negative* circumstances. It leads to an approach of identifying 'risk factors' – circumstances where children may need professionals to intervene to redress the disadvantages they face (such as inadequate parenting, social exclusion or poverty) and/or to protect them from harm. Casas contrasts this with his belief that what is needed is a 'pro-activity to ensure that children's living conditions should improve' (Casas 2000: 8). We should, he says, turn our attention away from what harms children and instead concentrate upon what we can do to help children overcome difficult situations and to thrive in adversity.

Promoting resilience

A key concept here is that of resilience, which has been defined as '*normal* development under difficult conditions' (Fonagy et al. 1994; emphasis in original).

Resilient children are those who somehow manage to grow up healthy, happy and 'together' despite having had to face major setbacks and difficulties in their childhoods:

Whether such experiences crush or strengthen an individual child depends, in part, on his or her resilience. Resilience is important because it is the human capacity to face, overcome and be strengthened by or even transformed by the adversities of life.

(Grotberg 1995: 10)

According to Fonagy et al., focusing on promoting children's resilience not only has direct benefits in enabling them to overcome adversity in itself, but also helps to overcome the stigmatization faced by children from 'problem families' or with impoverished backgrounds. In particular, it helps individuals to challenge the assumption often made that a 'bad childhood' inevitably means growing up into an incompetent adult and, especially, a 'bad parent': 'history is not destiny. Clinical and epidemiological data both show that the majority of parents who in their childhood faced brutality, desertion, poverty and death imperil neither their bond to their child, nor their child's bond to them' (Fonagy et al. 1994: 234).

Grotberg makes a number of suggestions about how parents and others can promote resilience in children, including encouraging children to become 'autonomous, independent, responsible, empathetic and altruistic' and helping children to learn how to 'communicate with others, solve problems, and successfully handle negative thoughts, feelings and behaviours'. Crucially, she argues, with such treatments 'children themselves become active in promoting their own resilience' (Grotberg 1995: 3). More recently, Ungar (2003) has proposed that 'resilience' offers a productive way to understand how troubled young people explain their productive behaviours. By nurturing their resilience, he argues, they can be helped to tackle the problems that they face.

Seeking children's views

A second critical element of quality of life is that its evaluation must include the views of those whose well-being is at stake. Roche (2001) gives as an example the way parents and children might judge a school. What may matter to parents are things like its physical environment and its position in the 'league tables'. But children may be more concerned about how they are treated by teachers and other pupils – whether they are treated with respect or humiliated and bullied. This example highlights the importance of taking into account how children, as *users* of services provided for them, evaluate those services. However good the service may be judged against other criteria, if it fails to take account of the concerns and priorities of its intended beneficiaries then it can hardly be seen as unequivocally in children's best interests. Hill (1999) notes that there have only recently been attempts to discover the views of

parents, as service users. Hill points out, it is rare for children to be consulted. Stakeholders in the service are to be offered choices, but their priorities and concerns are not taken into account.

Hill argues that children's views should be taken as parents'. For example, for school-age children, their views about their children's education, about strangers and violence, about more about problem-solving, about tensions and conflicts, about results and 'slagging', about parental separation), and so on. Clearly, what matters to parents.

Hill also reports that concerns emerged about that parents and others should attend to children's views about them. Second, children's views. Their attempts to solve problems, their worry' – when what matters and to have someone to talk to. In other words, for children, adults listen to them.

If we view 'quality of life' in circumstances and life events that make life worth living, then we can and positively promote children to achieve their potential, to reach their life goals. It really is about what matters to the child, and what is made. Crucially, it is not about what conditions may be limited, but about standards for them. How can they be enhanced – how can they be helped?

The shift to local services, the benefits to our understanding of how to meet them. The shift to children's vulnerabilities (and communities) it emphasizes many of the problems that children cannot be

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parents, as service users, of the services provided for their children. And, he points out, it is rarer still for children to be consulted. Yet children are key stakeholders in the services and care provided for them, and if quality services are to be offered to them this cannot be done without finding out about *their* priorities and concerns – what, to them, constitutes 'quality care'.

Hill argues that we should not expect children's views to be the same as parents'. For example, he reports research about the worries of primary-school-age children and their parents. It indicates that parents' concerns about their children focused on external threats like traffic, being snatched by strangers and violence on the streets, whereas children's anxieties were much more about problems in their immediate relationships. They worried about tensions and conflicts with their peers (falling out with friends, bullying, insults and 'slagging'), about loss (from the illness or death of relatives or parental separation), about resentments (broken promises, parental conflicts), and so on. Clearly what matters to children can be quite different from what matters to parents.

Hill also reports on children's views of the adults who care for them. Two concerns emerged as very important. First, they felt they were not listened to – that parents and others caring for them were often so preoccupied they did not attend to children when they wanted to talk about things that were upsetting them. Second, children felt that adults did not take their concerns seriously. Their attempts to seek help were often met with false reassurance – 'Don't worry' – when what they wanted were opportunities to express their feelings and to have someone to mediate in the conflicts and resentments they faced. In other words, for children a crucial element of quality in their care is that adults listen to them and take what they have to say seriously.

If we view 'quality of life' as being about the factors in children's life circumstances and life worlds that give them satisfaction and meaning – that make life worth living – then we have to go beyond just 'meeting their needs' and positively promote their well-being. This also entails helping them to achieve their potential – giving them opportunities to flourish and achieve their life goals. It requires us to consult them, to find out their opinions about what matters to them, and to involve them in the plans and decisions that are made. Crucially, it makes us acknowledge that while some children's expectations may be limited by their life circumstances, we cannot simply set lower standards for them. Rather we need to concentrate on how their capabilities can be enhanced – how can we counter the disadvantage they face, and how can they be helped to survive and overcome adversity?

The shift to looking at how children's quality of life can be fostered has benefits to our understanding of the needs and rights of children and our ability to meet them. This discourse sets a positive agenda. Instead of focusing on children's vulnerabilities and incapacities (and those of their families and communities) it emphasizes their strengths and capabilities. I would argue that many of the problems that families face in caring for and bringing up their children cannot be solved by individual workers or organizations. They are

deeply entrenched social problems – such as poverty, racism and social exclusion – that can only be tackled by society as a whole. To make any real inroads into solving problems like poverty or racism requires major *political* changes. For example, doing something about child poverty requires improvements to be made in the money and support that the government provides to help poor families.

When Casas writes about the way some previous approaches have tended to focus on 'risk factors', these were generally the kinds of problem he was talking about. He thinks we need a new approach because describing things like racist prejudice or poverty as 'risk factors' tends to locate the problem in families. It *individualizes* problems that are better seen as problems of social, political and economic systems. When a family is exposed to racism, for example, this is not the family's fault – it's not *their* problem. The problem lies in the racism of society, in people's attitudes and in institutional racism. Equally, the poverty that many families in Britain face cannot simply be seen as the fault of parents who are poor. We know this because in other countries there are far fewer children growing up in poverty. In terms of well-being, Britain is currently the worst place in Europe to be a child. A UNICEF report (Piachaud and Sutherland 2000) concluded that the UK rates lowest of all European Union countries on seven specific indicators of child well-being. It reported that child poverty in Britain had trebled in 20 years, and that 40 per cent of children in the UK were born into low-income households. Compare this with Denmark, where only 5 per cent of children were born into poverty, and it is clear that political, social and economic forces have a profound impact.

Baldwin et al. (1990) have also contested the individualizing of problems. They illustrated this by looking at the assertion that 'social class... is an important risk variable'. They pointed out that belonging to the disadvantaged social class is not, in itself, what undermines children's healthy development. Rather it is the circumstances that tend to go along with being in the lowest social class – parents who are unemployed or have such a badly paid job that they have to work very long hours; inadequate housing; living in neighbourhoods with few resources and high crime rates, and so on. Baldwin et al. (1990: 278) then go on to argue:

At one time we thought, somewhat naively, that knowing the major risk factors would point the way to intervention, because removing risk factors might prevent the development of problem behaviour. It is clear, however, that without a social revolution we are not going to remove the risk factors of lower SES [socioeconomic status], divorce and minority prejudice... We must help these families and their children to cope with the risks in their environment, rather than attempting the futile task of removing the large-scale risk factors themselves.

This is not to say that we should ignore problems like racism or poverty. Tackling these is crucial to enhancing children's lives and opening up their

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opportunities. But this takes time and resources. Individual workers and organizations can only do so much to counter poverty, racism and social exclusion – though there are some things they can do, such as establishing anti-discriminatory practice. The point here is that in the meantime, by finding out what makes children and families more able to cope with adversity, we can devise practical strategies for helping and supporting them.

Focusing on the notion of quality of life thus helps to challenge the ‘problematizing’ of children, young people and, indeed, their families. If we look, instead, at the *positive* qualities that families may possess – things like having good relationships, emotional warmth and people who will support and stick by them at times of crisis – then we get a different picture. Instead of marking out certain families as ‘problems’, it encourages us to look for what is potentially good in nearly all families. Even in the poorest and most deprived families there are usually very powerful bonds of love between parents and children, with (most of the time) enormous emotional warmth. Lone parents are usually prepared to go through a lot to ‘stick by’ their children through thick and thin. Most children have grandparents, aunts and uncles, brothers and sisters or neighbours and friends who can make all the difference to whether they can get through tough times.

Of course, there are exceptions – it cannot be denied that there are extreme cases where parents are so inadequate or cruel (or both) that they cause their children harm. But the point here is that these really are quite unusual circumstances. Avoiding problematization is not about claiming that every family can function effectively if given sufficient support. There will always be some parents who cannot care for their children properly however much help they are given. It is about recognizing that *most* parents who experience difficulties looking after their children have strengths that can be built upon to help them cope with their problems. It is also about recognizing that in those rare cases where children have to be removed from their parents in order to keep them safe, the care provided for them needs to draw upon similar kinds of support and benefits. And this should, wherever possible, include *still* maintaining family bonds, *still* encouraging emotional warmth from their parents, recognizing that just because their parents cannot care for their children, this does not mean they do not care *about* them.

Conclusion

It should be obvious by now where I stand – as an advocate of the ‘quality of life’ discourse. Not only does it offer a more positive agenda than either the ‘needs’ or the ‘rights’ discourse, it is also more holistic. The ‘rights’ and ‘needs’ discourses are taxonomic, in that they set out lists of what is seen to be required. But in both cases there can be conflicts between them. A quality of life analysis looks at a child’s life experience, circumstances, values and priorities *as a whole*, and recognizes that there can be considerable variation in