



## **THE VALUE OF RELATIONAL PEDAGOGY AND PROFESSIONAL LOVE TO EARLY CHILDHOOD INTERVENTION AND CHILD/FAMILY WELL-BEING FOR CHILDREN WITH COMPLEX DISABILITIES**

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### **Abstract**

This paper discusses the key characteristics of a relationship-based early childhood intervention (ECI) service for children with complex disabilities in New Zealand. Nine parents and twenty interdisciplinary professionals were interviewed and nine children observed.

Key findings were the interaction between relational pedagogy, professional love and child and family well-being. Parents appreciated the knowledgeable, well-trained professionals who invested time in getting to know (and love) children and families and family practices, worked together in harmony and valued the contribution that parents made to their child's progress and achievement. Professionals described the key characteristics of the service in terms of the range of therapies offered by the service, the focus on a strengths-based and family focused approach, play-based assessments, acceptance and value of family practices (including responsiveness to Maori and biculturalism), appropriate and respectful places to meet and greet families and work with children, and recruitment and retention of humble professionals.

Observable social processes and structures within the delivery of the model include respectful professional interactions and relationships with children and families, integrated professional working, effective and timely communication between professionals and families, pedagogy of listening, waiting and personalisation, engaged families and actively participating children. A collaborative and co-constructionist approach to child and family well-being was illuminated in the findings. This paper discusses the above in light of current policy on early intervention.

**Keywords:** Relational pedagogy; professional love; well-being; complex disabilities; complex needs; integrated working; families; ecological approach

## Introduction

The many benefits of early childhood intervention (ECI) for children, families, and communities where adequate resources are available have been well documented (see Guralnick, 2005; Heckman, 2006). ECI programmes can prevent risk factors from exerting negative influences on children's development (Field, 2010; Marmot, 2010; Munro, 2011; Allen, 2011). For children with intellectual disabilities, ECI can not only minimise intellectual delay, but other secondary complications as well (Guralnick and Albertini, 2006). Given the wide variability in the nature and quality of ECI programmes internationally, Pretis (2006) argues for a common set of principles to guide them. These would include but not be limited to inclusion, child and family-centred activities and empowerment.

Currently in England the rights of young children (aged birth to five) with developmental delays and disabilities are embodied within The *Children and Families Act* (Department for Education/ Department for Business, Innovation and Skills/Department for Work and Pensions/Department of Health and Ministry of Justice, 2014) and the Special Educational Needs (SEN) Code of Practice (DfE/Department Of Health, 2015). In theory under the Act, parents of children with severe and complex needs and who have an Education, Care and Health Plan (ECH) can choose how and where their child is supported in terms of mainstream or special education. Whether children attend specialist school settings, mainstream or combined settings, their intervention runs the risk of being de-contextualised as families do not generally participate in their therapy and education interventions alongside them, except in the case of home-based services such as Portage or play therapy which are often delivered in isolation from other therapy services and have the potential to isolate parents in the home. Communication and co-ordination between therapy services can often be distant and disjointed (Blackburn, 2014; Blackburn, 2015). This view is supported by Robertson and Messenger (2010) and Lamb (2009) who argue that the most significant challenges for England in delivering ECI provision for children with disabilities have been:

- Maintaining effective communication with all parties involved;
- Developing a clear understanding of roles and responsibilities between professionals and families;
- Maintaining a high level of professional specialism;
- Developing trust between families and professionals and inter-professionally;
- Focusing on outcomes;
- Empowering parents and families.

The emotional and practical considerations of raising a child with a developmental delay or disability are discussed in Carpenter *et al* (2015). However it is important to acknowledge the range of emotions experienced by parents (from joy to grief, denial and shock) which are largely contingent upon their own emotional resilience and well-being and resources

(including family/community support), the nature and degree of disability experienced by the child and how obvious or 'hidden' the disability is, tolerance and acceptance by community and cultures they live in and financial and practical support provided by ECI services.

### **Aims and objectives of this project**

Taking this into account, the aim of this project was to visit the Champion Centre in New Zealand (NZ) to learn about their relationship-based ECI services for children with complex disabilities. The objective was to interview professionals, observe their interactions with children, talk to families and gather information about the work undertaken at the Centre that could be translated to a UK context. I wanted to capture effective and best practice within an interdisciplinary context that could be mutually beneficial for all stakeholders concerned with children with complex disabilities, their development and overall well-being. Research questions included:

- What are the views, understandings and reported practices of professionals working within a relationship-based early intervention service with children who have complex needs?
- What are the views and perceptions of parents/families who use the service?
- What are the observed practices of professionals and key physical and social resources in a relationship-based ECI service for children with complex needs?

The study adopted a bio-psycho-social stance which acknowledges the influence of interactions between developing children and the environment(s) they inhabit on their learning and development. More importantly, the plasticity or potential for change in children's development is recognised. This suggests the concept of the engagement of an active child with their environment and a view that the application of intervention can improve the course and context of development, allowing the study of what is development to what could be development (Bronfenbrenner, 1993).

### **Background to the Champion Centre**

The Champion Centre in Christchurch, NZ is one of four ECI services in Canterbury for children aged birth to six with severe and complex delays and disabilities. EI services and quality assurance for them is legislated for by a co-ordinated health, education and social care model at national policy level. The Centre provides relationship based ECI services on a centre-based integrated therapy approach that values children's strengths and family practices. The programme is offered to children from birth to school age who have significant delays in at least two areas of development. Children who attend the Centre have a wide range of special needs. These include developmental challenges as a result of Down syndrome and other genetic disorders, cerebral palsy, extreme prematurity, epilepsy,

developmental dyspraxia, autism and brain injury. Five principles underpin the service, these are that the service is relational, family-centred, strengths-based, ecological and reflective.

Generally, young infants from birth to approximately two years of age attend the 'Baby Programme'. The 'Middle Years Programme' is for children aged approximately two to four years of age at which time children join the Transition to School Programme in readiness for school. There is also a monitoring programme for children born prematurely and the Relating and Communicating Programme is for children whose main difficulty is being in relationship with others and who are generally also highly anxious.

### **Methods and ethical considerations**

The project was approved by the Faculty of Health, Education and Life Sciences Ethics Committee at Birmingham City University. Data collection methods included observations of nine children at the Centre during their intervention sessions and interviews with their parents. A past parent whose child had previously attended the Champion Centre was also interviewed.

All participants provided informed consent and were reminded of their right to withdraw without prejudice before interviews and observations commenced. Observations required ongoing monitoring of children's well-being and comfort levels at all times and sensitivity to their privacy and anonymity. Consent/assent was an ongoing process whereby participants' verbal and non-verbal signs and signals were continually reviewed. Children's identities have been protected by the use of pseudonyms. Data were stored securely on University equipment and analysed thematically in order to reduce bias. Participants were selected by professionals at the Champion Centre to represent a range of the children and programmes delivered, and on the basis that the children and their parents were sufficiently robust to participate. However, the researcher was encouraged to build relationships with families in accordance with the overall ethos of relational pedagogy that inheres within the model. This article focuses on parents and professional perceptions of key characteristics of the model from interviews.

### **Findings**

#### ***Key characteristics of relationship-based ECI services***

Parents identified a number of key characteristics that they valued in a relationship-based ECI service. Five parents mentioned the importance of experienced, knowledgeable professionals who teach parents to teach their children. Four of these parents recognised that this helped to prepare their child for school. Four parents each stressed the significance of professional support for the relationship between parents and children in showing parents how to relate and play with their child, as well as professionals knowing the child/family well enough to do this. Three parents stated how useful it was to have the support of other parents who were experiencing the same challenges and difficulties. Two parents appreciated professional

recognition of their contribution to their child's ongoing progress and one parent stressed the value of feeling that "you're not doing it alone."

Essential components in relationship-based ECI services suggested by professionals were extremely varied. All five interviewee groups talked about the importance of understanding the family's journey both prior to and during their relationship with an ECI service. It was described as "crucial" that parents should only have to relate their child's early experiences to professionals once and this should occur within their own 'safe space', usually the home setting. Also suggested by three professionals was the need to respect families and other professionals', honesty and empathy. Suggested by one professional each was the importance of:

- Working with parents to enhance their ability to support their child and helping them to learn to love their child.
- Removing "roadblocks" to parent/child relationships so that children with disabilities can experience joy.
- Acknowledgement and respect for diverse family structures/ processes and interactions.
- Love of working with families rather than working solely with children.

### ***Key characteristics of the Champion Centre***

In describing the most important characteristics of the Champion Centre, all parents mentioned the social support available to families and the benefits of the integrated approach taken by professionals to scaffold children's learning and development.

One parent compared the integrated approach of the Champion Centre to her previous experience with another ECI service, which she reported as being quite disjointed. She wondered whether her child would have made the significant progress that she has if she had continued with that service:

Here it's all interlinked, since she started coming here she's just come so far in her development. One person will say oh she needs help with this and another will say oh I can help with that and they piece it all together.

Six parents appreciated the way in which the interventions supported family life and noted the importance of professionals acknowledging how hard parents worked at home to support their children as well as the importance of consistent regular visits to the Centre:

I love the fact that you come once a week and all the therapists see her and work with her and then they all meet and discuss her and everyone knows everything about her.

Four parents mentioned the value of well-trained knowledgeable professionals employed at the Centre who know their child well and understand their needs, whilst three parents appreciated the fact that professionals were non-judgemental about their child and family routines/practices. One parent each mentioned the benefit of the play-based approach where children were not rushed to reach developmental milestones, the high frequency of the therapy sessions and the compassion and love offered by professionals to parents and children:

The care that extends beyond their subject matter, so just being supported emotionally and many times chatting to the staff, you would leave in tears, but I needed that.

One (past) parent described the mediating role of staff in helping parents to “navigate” both medical issues and parenting and child behaviour concerns and another stated that her husband was delaying a work promotion as it involved moving to another District. She said they felt so strongly that their child was benefitting from their son’s participation on at the Champion Centre that this was more important than increased wealth or career prospects.

All parents reported that once they had selected the Champion Centre as their preferred ECI provider, their place and enrolment was confirmed almost immediately and not longer than two or three weeks. All parents also reported that they were fully involved in their child’s learning and development at the Champion Centre and valued this aspect of the service.

In describing the key characteristics of the Champion Centre, all professionals noted the importance of an interdisciplinary approach which was underpinned by effective and regular communication between professionals and between professionals and families. This was thought to rely on interprofessional respect and a degree of humility from professionals towards each other and the families they support:

The team meetings are absolutely the core. Where a single person visits the family or assesses a child, what are they going to do with that information – write it down? But how do they decide what to write down... here they’re talking to each other. They’ve all seen the child. Somebody will have a little piece that they would never put in a report, but somebody else will have a little piece and suddenly there’s a synergy of understanding.

Further to this, the importance of the range of therapies being accessible to families in one location was noted by all three of the programme teams, as was the frequency of delivery and time given to children within their sessions. Also mentioned was the importance of professionals adopting a family-focused approach including building partnerships, relationships and trust with families. Identifying and building on children’s strengths, meticulous attention on to detail, as well as adopting an empathetic approach to children and families were also deemed necessary.

It's the hardest thing to walk through these doors...often we have a huge amount of grief and then it's about making a cup of coffee, supplying tissues and listening.

One aspect of this was the professional response to Maori and ways of "being together" that acknowledges and respects biculturalism.

The focus on a strengths-based approach extends to research undertaken at the Centre and methodologies adopted to support research. For example play-based assessment approaches are utilised and measures for research are chosen for their ability to allow immediate feedback to parents and therapists about children's progress

### **Discussion and conclusion**

Characteristics of the Champion Centre relationship-based ECI services that were valued by parents included empowering parents to support their child in the context of family life as well as preparing their child for formal education. Knowledgeable, well-trained professionals who invested time in getting to know (and love) children and families and family practices, worked together in harmony and valued the contribution that parents made to their child's progress and achievement were also important to parents. One of the key professional skills held by professionals that parents valued was the ability to listen and respond. In contrast to other studies (for example Lamb 2009; Robertson and Messenger, 2010), parents appeared to feel valued, empowered and viewed professional communication and working as integrated and supportive. This appeared to contribute to both child and family well-being.

Interviews with professionals revealed that professionals placed the parent-child relationship and well-being at the Centre of their professional practice and viewed this as fundamental to ensuring progress for children across developmental domains. Also fundamental to their practice was interdisciplinary working that incorporated frequent communication and a culture of learning with and from each other. This was perceived to benefit individual professional development as well as the development of teams. Communication with other professionals and agencies was also perceived to be important.

Professionals attributed a wide range of factors to the effectiveness of the Champion Centre ECI model. This included the range of therapies offered by the Champion Centre, the focus on a strengths-based and family focused approach, play-based assessments, acceptance and value of family practices (including responsiveness to Maori and bi-culturalism), appropriate and respectful places to meet and greet families and work with children, and recruitment and retention of humble professionals who identified with the ethos of the model. The concept of professional love (Page, 2014) was alluded to, whereby professionals acknowledged their own emotional attachment to children and families that extended beyond a desire to simply work with children. The integration of the above dimensions results in a model that is underpinned by an understanding that emotional development precedes cognitive development (Brazleton and Greenspan, 2000) and a high degree of sensitive, mind-mind caregiving is required towards children and parents.

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