Swedish Family Centres - a place for cooperation and social cohesion Vibeke Bing

"Family at its best" – family education between practice and science Conference in Neubrandenburg 23-24th of February 2017

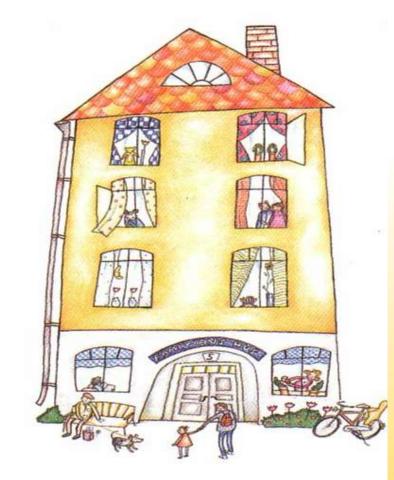


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Family Centres in Sweden

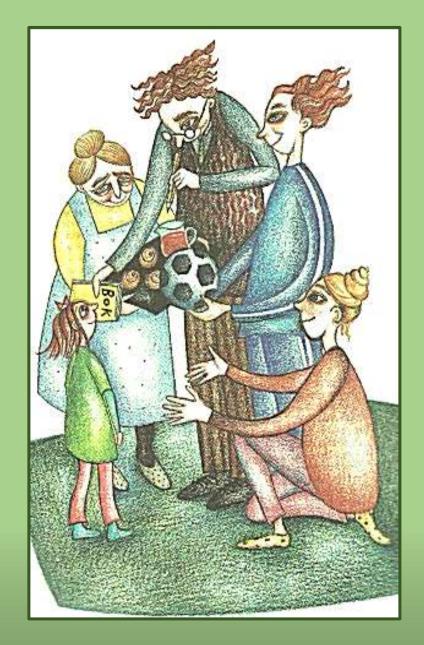
Everything in one place - accessible for each child





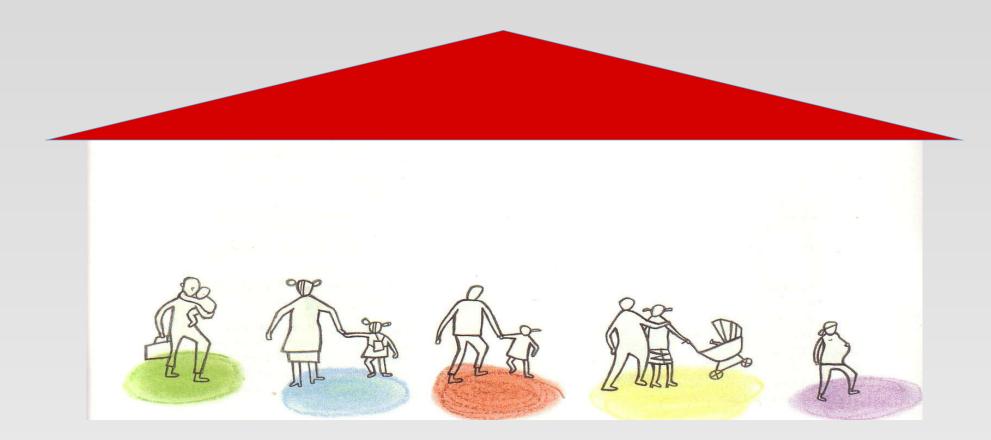
Family Centre

is about bringing together knowledge and experience from different professions, sciences and welfare actors.



Target groups

parents expecting a child + children below the age of six and their parents.



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Swedish families and the well fare system

- Both parents are breadwinners
- Almost all pregnant women participate in the maternity health program
- Parents are entitled to 480 days of paid parental leave when a child is born or adopted
- The so called two-breadwinner families are supported through a gender-neutral family policy
- Child health care clinics cover almost all children 99%
- As support for parents at home and their children there is a complementary preschool activity, namely open nursery school where parents and children go together
- All Children have right to publicly financed daycare although parents have to pay a fee



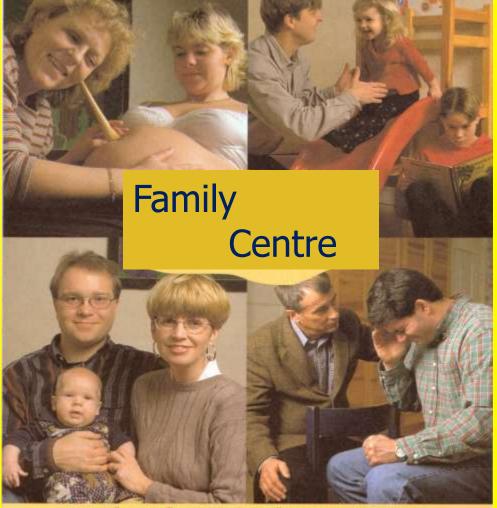
Family Centres have expanded the psychosocial content of maternal and child health work to include open nursery school at the core of operations.

Family Centres

reconstruct the existing well-established preventing services aimed at small children and their parents



under the same roof



EN NÄRA MÖTESPLATS FÖR BARNFAMILJER

Open nursery shool is a place for parents and children to gather



The Family Centre becomes a meeting place for families in a housing area **a supportive arena**

The goal is to promote good health for children and parents by

- Being accessible as a meeting place
- Strengthening the social network around families
- Creating forms of work where children and parents can participate
- Offering easily accessible support individually and in group
- Being a centre of knowledge and information
- Encouraging an equal parenthood
- Developing good service



Family Centre is defined as a fully integrated centre with

- Maternity health care services
- Child health care services
- Open nursery school
- Social wellfare preventive (promotive) operations

Why Family Centres?



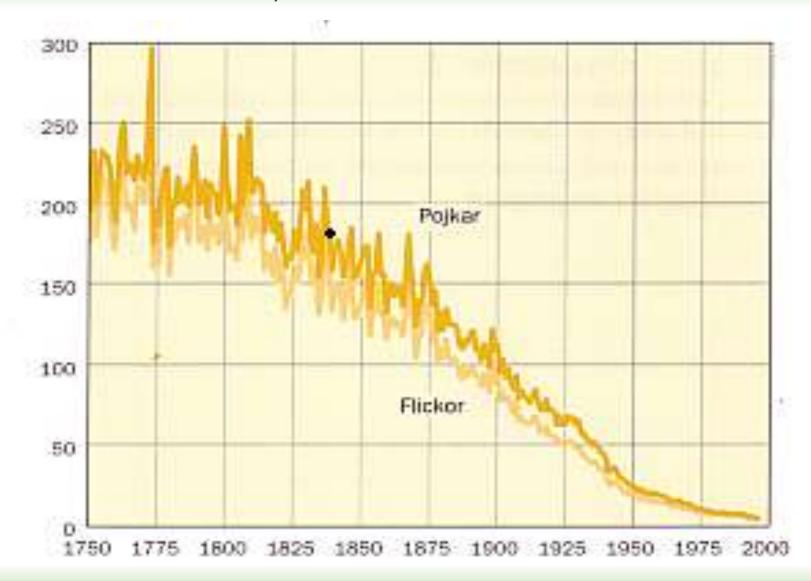
- The gap between rich and poor children has increased
- With differences in income come differences in health
- The gaps concern about "The new morbidity"

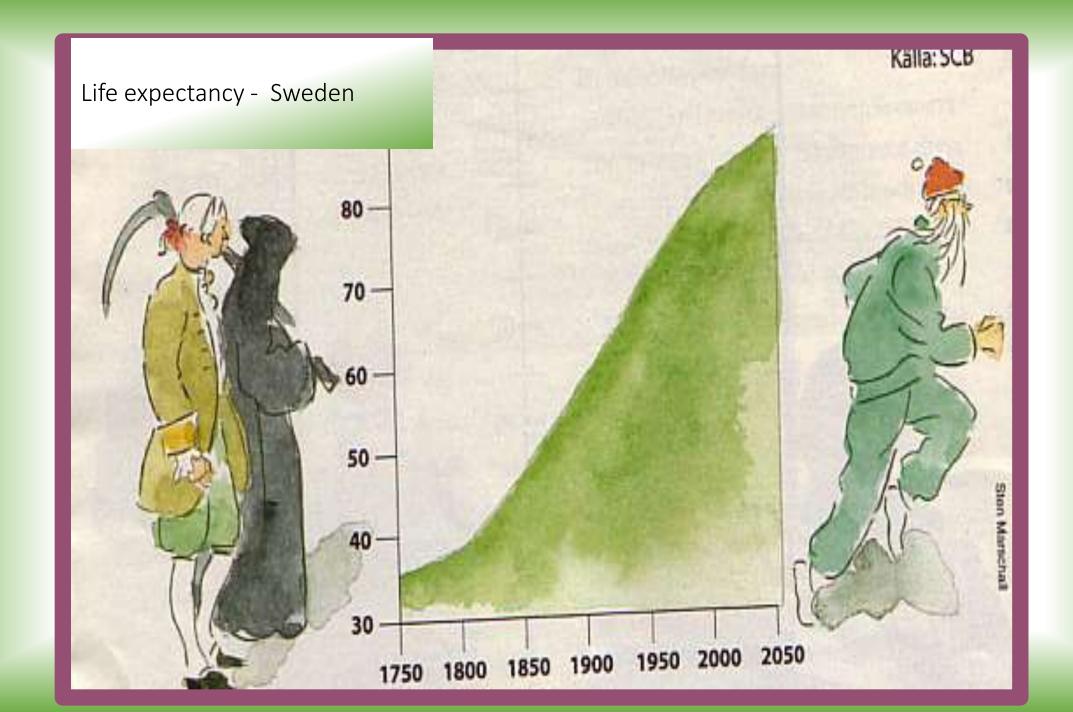


Then we have a demographic shift



Infant mortality





Correlation between purses and health of children



The Family Centre is built on the principle that a strong correlation exists between the living conditions of parents and the way their childrens feel.





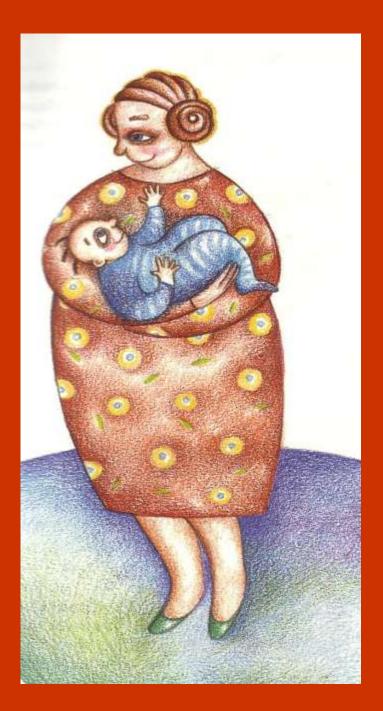
2017-02-14

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Early, early the golden opportunity



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Early, early

- Early intervention gives good results
- The socioeconomic gap is widening over years

Early investments are cheap



Early and universal



- By incoperating both maternal and child health services Family Centres provide universal coverage for the child population.
- All the front/first line services are tied together.

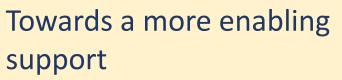
Health is established and has to be encouraged in the every day life of children and families

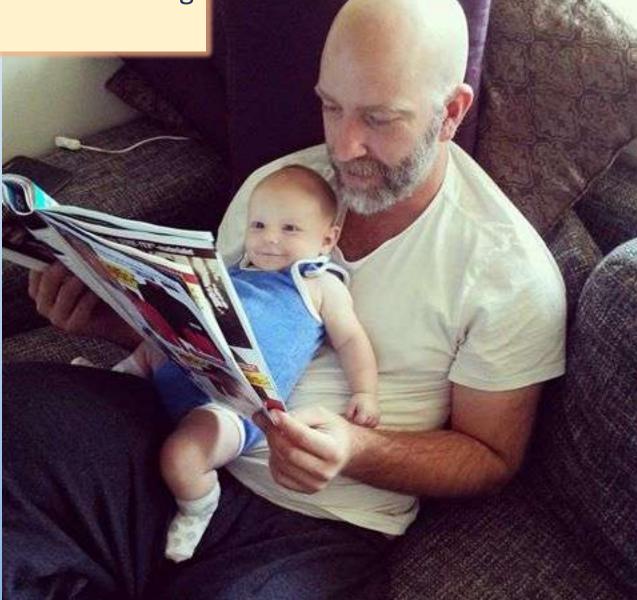


Family Centres moves from prevention of disease towards promotion of health









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Health determinant refers to a factor that is known to affect health

Examples:

- Social support
- Contact outside the family
- Friendship
- Self-esteem
- Social network
- Dietary habits
- Attachment



Family Centre stresses the importance of social support





Family Centre work as a supportive environment mooving:



From treating illness to promoting health

From thinking about risks to consider opportunities in every day arenas

From individual to wholeness

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From downpipes to gutter

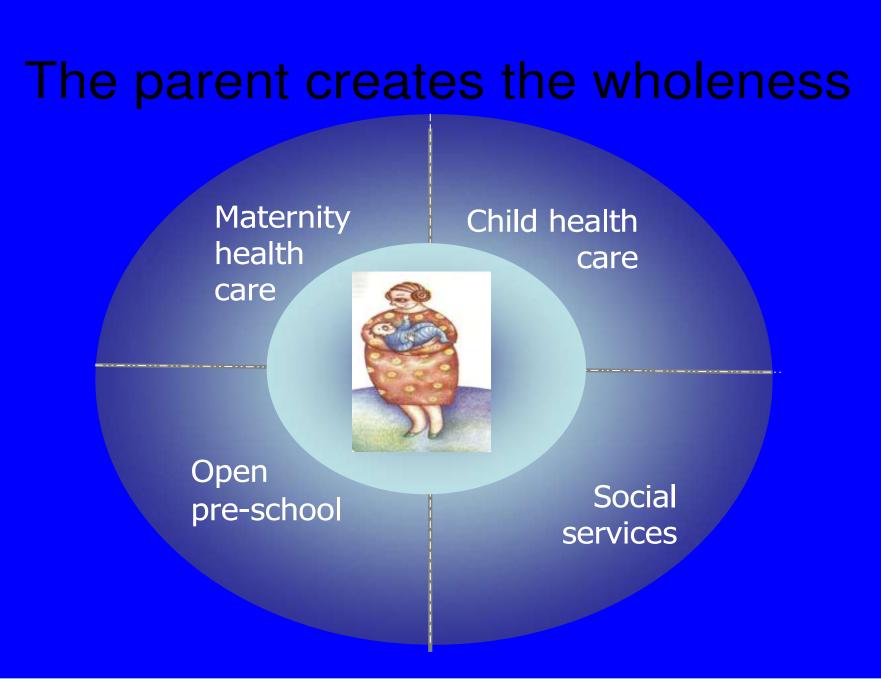


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The transformation to Family Centre results in :

- New occupational roles
- User participation
- Collective organisation
- Resourses from different departments collectively coordinated and managed





The importance of children's participation





Questions

- Do Family Centres do a better child health work compared to traditional CHC ?
- What kind of families visit the Family Centres and use the expanded services (open nursery school)?
- How do the activities influence children and parents?
- How do the new setting influence the professional groups?
- Is it possible to identify groups to which Family Centres are more favourable?

University of Uppsala

Wallby T., Fabian H., Sakardi

• SUMMARY

- Child Health Centers within Family Centers offers better parental support. A national web-based survey reveals advantages of co-location
- A total of 1 943 Child Health Clinic (CHC) nurses from all counties in Sweden responded to a national web based survey regarding parental support. Respondents were from 279 of the possible 290 municipalities in Sweden.
- Family centers, where CHCs are co-located with antenatal care, open preschool and preventive social work, were compared with non co-located CHCs in terms of participation rates, occurrence and to which extent parental groups are offered.
- Nurses from non co-located CHCs were, on average, responsible for more newborns per full time equivalent per year, and reported fewer dedicated resources in their parental support work than staff in co-located CHCs.
- CHCs within family centers were shown be more likely to offer parental groups, to adopt and continue groups from antenatal care, to support the development of special groups such as young parents, to take action to increase fathers' attendance, and to have a higher proportion of participating fathers.

An Evaluation of Family Centres in Region Västra Götaland, Sweden

Agneta Abrahamsson Vibeke Bing Mikael Löfström



Sammanfattning av rapporten Familjecentraler i Västra Götaland – en utvärdering

AGNETA ABRAHAMSSON VIBEKE BING MIKAEL LÖFSTRÖM

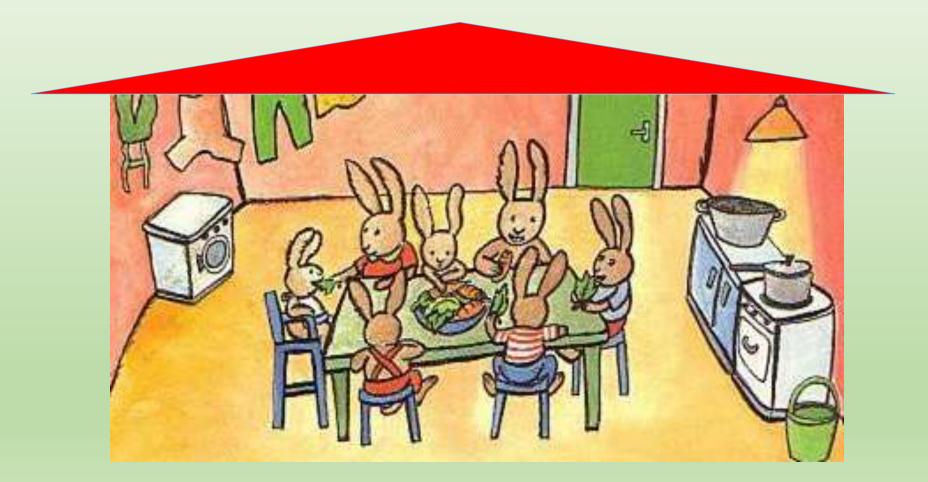
OKTOBER 2009



The purpose of the evaluation was to use available experiences so far amongst already existing family centres in the development towards the political objectives to increase families access to family centres.

An expanded knowledge base was aimed to be used as foundation for regional decisionmakers in health units and municipalities to encourage further development of new or existing family centres.

Those visiting the Open nursery school in the Family Centres?



The Evaluation of Family Centres

in the Region Västra Götaland, Sweden

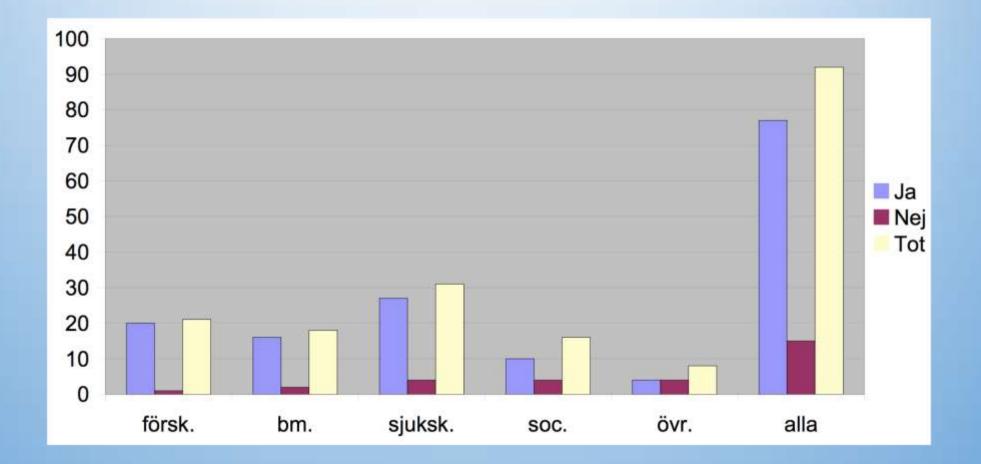
DATA collection	MAIN STUDY quantitative 16 family centres	DEPTH STUDY qualitative 6 family centres
CITIZEN'S PERSPECTIVE	Staff 92 (87%) Parents 437 (100%) 600 children involved	Staff 17 Parents 40
MANAGEMENT PERSPECTIVE	155 Staff and managers (84%)	Staff 28 Managers 19

RESULTS



Families who visit the open nursery school at the family centres studied accurately reflect the socioeconomic profile of the catchment areas !

And of considerable importance for immigrant parents living in the suburbs. Do the staff change the way they work ?



plus

+ Better dialogues with and relations to the visitors

+ Support from the team is accessible. More easy to notice and track down difficulties.

+ Unloading, stress-relieving

minus

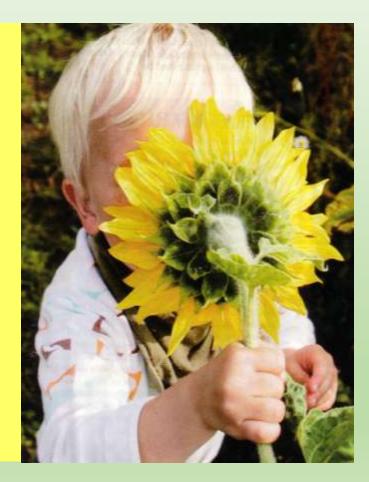
- Fewer colleagues
- Managers are not initiated
- Feel often called in question

- Need more time for collaboration

In depth multi-case evaluation of six Family Centres

CRITERIA

- Different sorts of housing
- Geographically scattered
- Information richness



The logic of program theory was used as a framework in the dialogical interviewing

Program theory can be used to illustrate how welfare programs could lead to change.

It contributes to understanding results of programmes and how results are linked to input in a context and how results can be explained.

Program theory

What is possible to attain, how is it possible and how could it be explained

Investment in services Content leading to results Explanations Mechanisms linking results to input in the context

Results Parents perceptions

EXPLANATIONS context of family centre and open nursery school



Programme theory summary

Result	Investment in services	Explanation
Parents ´perceptions	Content leading to results	Context of family centre open pre-school
-Developent of parental identity	- Creating framework for child centered social intercourse and good	Flexible and dynamic facilitating:
-Towards being a parent just like ant other parent	atmosphere where parents support one another	 social interaction personal development learning
-Social network and friends for both parents and children	- Greeting visitors so that they are unafraid to cross threshold	 - Life situation for parents with infants:
-Greater security through social support readily at hand	 Furthering parent-child bonding Supplying service and social councelling 	- society at large - socio-economic
- Knowledge necessary for parenting	-Creating opportunity for conventsation and active listening to promote growth as parent	- parents'life situation; life history and situation as new parent

A quote from a parent

In the beginning I just turned up from the child health care, just because I didn't know what the open nursery school was about. I was shy and felt uneasy if anyone took notice of me. In a natural way, my feelings of safety grew and I started to feel trust to use what was in place. I recognised other parents who got support. Later I got brave enough to ask for help. Cecilia Lindskov is a trained social worker with experiences of being a social counsellor in a hospital setting. In 2004, Cecilia Lindskov became a doctoral student at the Research Platform for development of Närsjukvård Forskningsplattformen för utveckling av Närsjukvård at the University College of Kristianstad. The Research Platform is an interdisciplinary research unit. It represents a co-operation between the county council in Scanla, municipalities in northeast Scanla and the University College of Kristianstad. The aim of the Research Platform is to support the development of local health and social care based on the methodological approach of action research.

Family centres have become a common institution to promote health and well-being among young children (o-6 years of age) and their parents in Sweden. The core of the work is usually based on both maternal and child health care, a preschool and social services, all located under the same roof in the local community.

The thesis presents a study of family centre practice, drawing upon one Swedish family centre, and relates this to theory of modernity. The results are discussed in relation to concepts such as individualisation, risk, reflexivity, trust/ontological security and control/self-realisation. With the help of these concepts, the thesis tries to map the challenges and possibilities of family centre practice.

Family Centre Practice and Modernity A qualitative study from Sweden

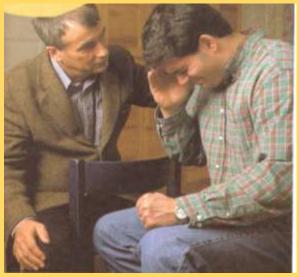
Doctoral thesis

ndskov

Cecilia Lindskov

ISTIANSTAD Kristianstad Academic Press 2010:1

HÖGSKOLAN



Professional advice Expert



Sharing experiences with other parents Facilitator



Living room Host



Play centre Organizer

2017-02-14

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