

neighbourhood watch

New research shows that when it comes to child protection, first impressions don't always count

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Looking out for children's safety should be a community affair, whether in the home or on the streets

In 1999, the parents of Victoria Climbié sent their daughter from the Ivory Coast to Europe to find a better life. A year later, the eight-year-old was found dead in her great-aunt's bathroom. The public inquiry that followed Victoria's death led to sweeping reforms to the child protection system. In England, the Every Child Matters scheme was established with five main aims. Under its guidance, every child should be able to: be healthy; stay safe; enjoy and achieve; make a positive contribution; and achieve economic wellbeing.

This programme – together with the Welsh Government's Safeguarding Vulnerable Children Review, published in 2006 – also made something else clear: child protection is everyone's business. This shift of emphasis, from police and social services to the community as a whole, fascinated Dr Sally Holland of the Cardiff School of Social Sciences. "Whether you were a volunteer in a sports club or a concerned neighbour," the former child protection social worker explains, "it was suddenly your duty to look out for vulnerable children in the community. What wasn't clear was if anyone really knew what that actually meant."

DIFFERING STYLES

After securing funding from the Wales Institute of Social and Economic Research, Data and Methods, backed by the Economic and Social Research Council and Higher Education Funding Council for Wales, Dr Holland's team launched a two-year research project to explore how communities understood and performed the safeguarding of children in their own neighbourhood.

"We've been working in two communities in the South Wales valleys," Dr Holland reports. "The first, known as the Slopes, is a local authority housing estate situated about a mile from the edge of a town. Originally built to accommodate those employed by a number of now-closed coal mines, much of the estate is now managed by a housing association and there are high levels of unemployment and child poverty."

The second community, conversely, is a nearby village that has been experiencing a period of growth: "Hilltop has more of a socio-economic mix," Dr Holland says. "There is an established village community, but recent years have seen many newcomers moving into brand-new housing."

When the research team interviewed residents and workers from both areas, a striking contrast in parental styles soon became apparent. The Slopes is characterised by a visible, outdoors form of parenting. Children play in the street watched over by family, friends and neighbours. Under this constant, informal surveillance it is difficult for children to get up to mischief, at least without being caught. One interviewee reported how her son had once attempted to climb scaffolding. Before he was even halfway, a neighbour had spotted him, had phoned home and his mother was at the bottom of the scaffolding, ordering him to come back down.

Hilltop couldn't be more different. While the residents generally believe that their village is a pleasant and safe environment to bring up children, there is a feeling among some that their neighbours are strangers and

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that parenting is more of a private affair. This lack of engagement, coupled with the fear of stranger danger and fast traffic, means that children are less likely to play in the streets. In several cases, some parents felt considerable nostalgia for the street play of their own childhoods in the village, the Slopes or other nearby estates.

HIDDEN STRENGTHS

According to Dr Holland, the two-year research project has demonstrated how easy it is for first impressions to be coloured by assumptions and prejudices. "For many," she says, "an outdoor parenting style automatically triggers stereotypical images of uncaring families, as portrayed in the UK Channel 4 TV series *Shameless*. From the outside, it looks as if the children are not being looked after properly. However, within the community it is seen as a strength. The majority of the parents in the Slopes rely on the fact that they know there are people outside looking out for their children."

Dr Holland is, however, quick to point out that her team found many examples of children being safeguarded within both communities and suggests that neither style is better than the other. When it comes to the

Slopes, there are dangers of romanticising an area with high levels of poverty, poor housing and unemployment. "There are obviously downsides," she admits. "Everything is visible, the good and the bad, but this highlights the need not just to understand the family situation, but to take notice of the wider environment. These kinds of communities are quickly written off and stigmatised by policy makers and the media. While there are many needs, there are also unrecognised strengths that need to be built upon rather than undermined."

The key to this, in Dr Holland's opinion, is to ensure that social work is kept within the community's boundaries. "We need to stop centralising child protection services," she warns. "In some cities you find call centres taking reports from all over the area. They have the advantage of being efficient, but remove workers from local knowledge."

The concern is that when a call comes in from an estate like the Slopes, the response may be tailored to meet stereotypes rather than actual needs. "If social workers are able to work in smaller, local teams, the community will get to know them and therefore won't be worried about making referrals. Furthermore, they will trust the response."

Of course, small-scale, localised operations are currently under threat from UK local authority cuts. The fear is that if preventative services such as Sure Start in England and Community First in Wales disappear, only formal, strong-arm tactics of social services and the police will remain.

"You could say that a lot of what we've seen in the Slopes is the epitome of UK Prime Minister David Cameron's Big Society," says Dr Holland. "Many of the services we've witnessed are home grown, run initially by volunteers until funding is secured. It not only proves that the Big Society isn't a new invention by the UK Coalition Government, but also that it's not something that can be done for free. There are a lot of good people willing to make communities a safer place for children, but they can't do it on their own. It's no surprise that areas of deprivation need high levels of funding to make it work." ■