

Family Centered Services and Young Child Development in Vulnerable Families: Challenges and Opportunities for Public Policy

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Research is Clear and Compelling on Factors Producing Healthy Child Development:

- Centrality of family to young child identity, development, and learning
- Need for continuity and nurturing in earliest years as scaffolding for later development
- Danger of toxic stress to brain development and all aspects of well-being
- Need to strengthen protective and reduce risk factors to enhance resiliency
- Need to create opportunities for reciprocity as elements in both child and adult growth and well-being

Growing Consensus on Universal, Multidimensional Aspects of Healthy Young Child Development:

- Physical health and motor development
- Social and emotional development
- Approaches to learning
- Language and literature
- General cognition

(Creativity—China; Spirituality—Jordan;
Advancing cultural heritage—Mongolia;
Hospitality—Tajakistan)

Status of Family-Centered Service Reforms and Exemplary Practices in U.S.;

- Exist across all categorical service systems – health, mental health, child welfare, juvenile justice, education, disability services
- Distinguished by:
 - Ecological, two/three generational approaches viewing child in context of family and family in context of community
 - Strength-based approaches that recognize family ties and help families realize opportunities through action
 - Ability to respond beyond a specific service category

Most family-oriented services, however, are:

- Based upon professional-to-client relationship that imparts specific knowledge or treatment
- Financed in terms of that professional-to-client interaction based upon a specific diagnosis
- Ultimately focused upon remediating deficits rather than building on assets

Families, and particularly vulnerable families, also need:

- Opportunities to share, connect, and reciprocate with others, through affinity networks
- Control over their own lives in relationships that do not place them in a devalued or disempowered situation
- People who value who they are
- People who believe in them.

Exemplary family-centered services:

- Create the time, space, and opportunity for mutual assistance and support, facilitating relationships based upon common affinities
- Start where families are and not where systems would like them to be
- Recognize the liberation that exists when people are treated with value
- Incorporate outreach/home visiting with center-based and family-led activities
- Value the community building as well as individual growth impacts from their work.

Exemplary family-centered services exist but need to:

- Be assessed and replicated in terms of their passion, people, and relationships and not specific program or curricula
- Be financed for their work in supporting mutual assistance as much as individual treatment
- Engage in continuous staff development and reinforcement of their values.

Practice Challenges and Opportunities:

- Moving from view of the family as a recipient of service to a participant in its own growth and a contributor to community well-being
- Mass producing warm, caring relationships
- Navigating existing leadership and power structures within the neighborhood/community
- Recruiting and selecting passionate workers who “know no strangers”

Policy Challenges and Opportunities:

- Framing family-centered services in ways to secure public understanding and policy maker funding
- Defining scale to move beyond demonstration while retaining community embeddedness
- Addressing potential political tensions and fall-out from community building

Thinking About Building Family Capital:

- The Four “R’s”

Relationships +

Resources +

Reciprocity =

Resiliency



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