The challenges of applying principles of relational practice in child friendly spaces in humanitarian emergencies

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Abstract

Witnessing violence, death, destruction of social fibre and disruption of daily routine negatively affects children's normal development and robs them of their childhood (Save the Children 2008; IASC, Global Protection Cluster, INEE & Education cluster, 2011). In order to address the effects of humanitarian disasters, child protection organisations set up child friendly spaces (sometimes referred to as CFS) to address the psychosocial needs of children and youth. Child friendly spaces provide young people with a safe place to play, socialise and develop a sense of normalcy and recovery. This paper attempts to integrate the concept of relational practice into child friendly spaces, demonstrating why lack of relational practice in child friendly spaces in emergencies may affect the process of psychosocial recovery and impact on children's developmental outcomes. It also discusses some of the structural limitations within the humanitarian sector that may affect the adaptation of a therapeutic relational approach in child friendly spaces during an emergency.

Keywords

Child Friendly Spaces, life-space, relational practice and therapeutic outcomes

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Child friendly spaces

According to Save the Children (2008) the purpose of child friendly spaces in emergency disaster is to provide children with a safe environment to actively participate in organised activities, play, socialise and learn new skills in a context where the social infrastructure has been destroyed by either conflict or natural disaster. Ager and Metzler (2012) refer to a child friendly space in an emergency

as an area where children are safe from any form of abuse and exploitation and have the opportunity to gradually recover from stressful events under the guidance and support of a childcare worker.

Activities implemented in a child friendly space in an emergency mainly aim at building children and young people's resilience and guaranteeing continued learning and development (Child protection working group, 2012). Most child protection agencies use play as a conduit through which children and young people's psychosocial needs are addressed. Ager & Metzler (2012) assert that play stimulates cognitive and social development. In an emergency context where war or natural disaster has destroyed life and property, play may evoke feelings of normalcy, contribute to developing social skills and strengthen community resilience (IASC, et al 2011). Daily routines and events in a child friendly space in an emergency therefore provide an opportunity for care workers to accompany survivors towards recovery.

Child friendly spaces in emergencies attract the most vulnerable children aged between four and 17 years, and this may include unaccompanied children, those in temporary residential care arrangements, foster care and children living with their parents. Activities in the child friendly spaces are often tailored to the age, gender and children's developmental level (Save the Children, 2008).

Meeting the physical needs of children, such as safety, remains a paramount priority pursued by child protection agencies in emergencies and justifies the demarcation of a physical child friendly space. Maier (1979, p.162) stresses the importance of meeting the physical needs of children before developing meaningful relationships when he says that:

> As a child's bodily comforts are met, so does he or she feel actually treated with care. Throughout life a sense of well-being and care is experienced when one's body is secure and free of somatic stress. With a sense of physical well being a person becomes more receptive and is, in fact, eager for experiences beyond the immediate bodily demands. Physical sustenance and comfort are basic for life and constitute one important measure of care.

Maier's assertion resonates with Maslow's theory of human needs, demonstrating the hierarchy of needs and stressing the importance of meeting the most basic needs before addressing higher needs (Costanza, 2007). The importance of addressing the physical needs of children in child friendly spaces is therefore justifiable. Although physical care in child friendly spaces in emergencies plays an important role, it is short of what Maier (1979) refers to as caring care.

In order to adequately address the care needs of unaccompanied children and other vulnerable children and youth placed in temporary residential care and

foster care, especially unaccompanied children accessing child friendly spaces, a therapeutic relational approach to child care needs to be introduced.

Relational practice

A therapeutic relationship refers to a caring interaction between a young person and a practitioner that is healing in nature and benefits the persons involved (Macdonald & Millen, 2012). Such an interaction addresses the social, emotional, physical and cognitive dimensions of human development. Meaningful relationships may promote resilience, build confidence, self-esteem and self-respect (Cameron & Coram, 2013). For a relationship to be therapeutic, it requires the presence, active listening, meaningful engagement, a non-judgemental attitude, respect, and openness of both the care worker and the young person with whom he/she is interacting (Garfat & Fulcher, 2012; Maier, 1979).

Li and Julian (2012, p.158) assert the fundamental importance of a relationship to children's development, arguing that:

> It is evident from the cumulative scientific knowledge that relationships not only are of central importance to children's early cognitive, social, and personality development, but also have lasting influence on long-term outcomes, including social skills, emotion regulation, conscience development, trust in others, and general psychological well-being.

Relational practice in child friendly spaces in emergencies is therefore likely to improve workers' knowledge of the developmental needs of each child and young person and lead to more effective interventions. The benefits of relational practice can be justified by Vygotsky's social cultural theory and what he termed as the zone of proximal development. Vygotsky (1978, p.86) defines the zone of proximal development (ZPD) as: 'the distance between the actual developmental level as determined by independent problem solving and the level of potential development as determined through problem solving under adult guidance or in collaboration with more capable peers'. The central role of a loving and caring adult to a child's learning and development, as well as his or her recovery from the damaging impact of humanitarian disasters, cannot therefore be underestimated. We can therefore conclude that the absence of relational practice and 'caring care' in child friendly spaces deprives children of an important aspect of learning and development, and justifies changing our approach towards the concept of working relationally in the life-spaces of children.

Life Space

Gharabaghi and Stuart (2013) define a life-space intervention as a means of conceptualizing work with children and youth in the spaces where their lives unfold. In a life-space approach, care workers get alongside children, guiding them, allowing them to explore and learn on their own, and intervening to support when children take a new path towards learning a new skill (Vygotsky, 1978). They use daily events and routine to achieve this goal, and the relationship is the foundation and means by which it is all done. Smith (2005, p. 11) argues that, 'working in the 'life space' is what workers in residential child care do, on a day by day, shift by shift, minute by minute basis. It involves the conscious use of everyday events to promote the growth, development and learning of children and young people'. Although Smith (2005) makes reference to workers in residential childcare, the concept and principles of a life-space approach can be sufficiently applied to working in child friendly spaces in emergencies, whether or not the child is also in some kind of residential care provision.

The central role of a loving and caring adult to a child's learning and development in the life-space is evident. There is therefore no doubt that absence of relational practice and a lack of understanding of a life-space approach in child friendly spaces may deprive children of an important aspect of learning and development.

Gharabaghi and Stuart (2013) argue that a child's life-space consists of the physical, the mental, the relational and the virtual dimensions. Child friendly spaces in emergencies are sometimes celebrated as a physical space with limited reference to other dimensions.

The physical dimension consists of the child's surrounding such as his playground, dormitory and class. The mental dimension can be considered as a child's understanding of his environment and how he/she makes meaning out of it. The relational refers to the child's relationships with different people in his life-space and may include his or her family, teacher, the local policeman and the religious leader. It also includes people who may not be present with the child, as they will carry important relationships with them in a way that transcends space and time. The virtual dimension of a child's life-space refers to the child's imaginations, fantasies and activities on social media (e.g. Facebook and Twitter) (Gharabaghi & Stuart 2013).

As they are currently rendered, child friendly spaces in emergencies focus mainly on the physical dimension of the child's life-space at the expense of other dimensions. Lack of focus on the mental, relational and virtual dimensions in the life-space may result in overlooking children's developmental needs and the physical care provided not being transformed into caring care (Gharabaghi &

Stuart, 2013). Addressing the virtual dimension in child friendly spaces may allow child care workers to accept children's dreams and fantasies with an understanding of where they are coming from, while the relational dimension would mean developing meaningful relationships with young people allowing them to take the lead while the adult follows the child. Addressing the mental dimension would enable the adult to accept the child's interpretation of his or her environment and facilitate their transition to a higher developmental level as they make sense of their lives and come to understand the impact of their actions on others within their life-space.

Garfat (2003) says that working in the spirit of a life-space and relational practice enables professionals to consciously use the day-to-day experiences to promote the growth and development of children from where they are and starting from their experience. Introducing the concept of the life-space and emphasising the use of life experiences of each child is critical in the application of therapeutic relational practice in child friendly spaces in emergencies and the achievement of developmental outcomes.

Fulcher and Garfat (2013, p. 34) define developmental outcomes as, 'outcomes associated with enhanced wellbeing along with personal and social capabilities, and not reports about what service providers tried to do'. A childcare worker's use of life events to understand a child's development level and subsequently their development needs is often necessary to support that child's developmental outcomes. Developmental outcomes are specific indicators based on broad areas such as behaviour, emotions, relationships and education. These may be used over time to assess the child's developmental progress (Fulcher and Garfat, 2013). Phelan (2012) and Garfat (2003) argue that relational practice is dependent on knowledge of a young person's development level and the ability of a childcare worker to support developmental goals for the child within his or her life-space. Such an understanding can be used to develop empathy for the child and accompany a young person on his or her developmental path. Care workers in child friendly spaces in emergencies require formal training on child development theory to be able to use daily events to decipher children's development needs and provide needed support.

Ager and Metzler (2012) claim that there is very limited research evidence demonstrating the developmental outcomes for children frequenting child friendly spaces. Most organizations report on an output basis as opposed to the impact and outcome of services they provide to young people. Addressing developmental outcomes for children in their life-space would indicate concrete progress made towards addressing children's needs and evidence of change in their lives. By introducing relational practice in the child friendly spaces, practitioners can set up a monitoring system to track developmental outcomes through being in the moment with children. This would then enable the

development of an evidence base to inform the usefulness of child friendly spaces.

Challenges of integrating relational practice in child friendly spaces in an emergency

Integrating relational practice in child friendly spaces is likely to encounter structural challenges. Staff performance in emergency relief is measured at an output level, prompting care workers to concentrate on quantitative indicators at the peril of qualitative developmental outcomes. Ager and Metzler (2012) claim that running child friendly spaces is time consuming, expensive, suffers from high staff turnover and requires skilled workers who are often difficult to find in remote communities. Furthermore, the emergency nature of humanitarian work in which most agencies focus on donor-defined, life-saving programmes may not favour relational practice.

Li and Julian (2012) assert that although the benefits of relational practice are widely understood, most organisations are unable to quantify and measure its outcomes. A donor-driven emergency response focusing on measureable evidence remains a major challenge to relational practice and life-space intervention. Training on the benefits of working from a developmental perspective that targets donors and managers may reverse the situation.

In conclusion, introducing relational practice and a life-space approach in the child friendly space may lead to improved identification of children's developmental needs and outcomes. Addressing children's holistic needs rather than solely focusing on the physical aspects of play may accelerate children's recovery from traumatic experiences. The power of being in a relationship with children can be fully harnessed to benefit children from where they are, using day to day experiences and the life events they go through in the child friendly space. The need for training on therapeutic relational practice for humanitarian childcare agencies cannot be overemphasized.

Note

An in-depth study exploring relational practice in humanitarian work, The case of child friendly spaces, will be conducted as a dissertation submission for my Master's Degree in Child and Youth Studies. Findings of the study will be submitted to this journal in due course.

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