Life-space Intervention: Implications for Caregiving

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Abstract

This article explores the concept of life-space intervention, and proposes four dimensions of a single, unified life-space: The physical dimension, where young people's lives unfold; the mental dimension, reflecting how young people make sense of their life-space; the relational dimension, assigning 'space' to young people's relationships; and, the virtual dimension, constituted by technology-based platforms for the construction of identity as well as by the imagination and fantasies held by young people. The implications of this conceptualization of a multi-dimensional single life-spaced are discussed in relation to being present with young people, and the agency-structure dilemma is explored in relation to generating change in the lives of young people.

Key Words: Life-space intervention; child and youth care; virtual life-space

Life-space intervention is a way of conceptualizing work with young people in the spaces where their lives unfold. To help the reader develop an in-depth understanding of the concept as we understand it, we have paid considerable attention to the nuances of language; the operating principle is for caregivers to locate themselves not just where young people are physically located (such as in foster care, in Vancouver, or 'in care'), but specifically where their lives unfold (Gharabaghi & Stuart, 2013). This formulation allows for an emphasis both on place, such as the home, school or the mall, as well as on virtual spaces, such as within the relationships young people have with others (peers, family, caregivers), or in virtual environments such as gaming or the imagination, and within the context of a young person's mental processes.

Residential care workers have a long tradition of focusing on the life-space of young people. The concept of life-space has had multiple iterations, from the community-building work of Kurt Lewin (1948) to the concept of the life-space interview developed by Redl and Wineman (1959). More recently, life-space work has been articulated as crisis intervention work, with particularly the work of Wood and Long (1991) providing a foundation for this approach. Even today, life-space is at the centre of relational practice as articulated within the core principles of child and youth care practice (Garfat & Fulcher, 2011; Stuart, 2013). Although the concept of life-space has evolved over the years, it has maintained a very strong focus on 'place'; youth work, regardless of its specific national or cultural context, is committed to meeting young people where they are at, which includes meeting them in the places where their lives unfold. In this way, life-space-focused work has had an enormous impact on residential work, inasmuch as the institutional character of residential care has been transcended to include connections to other important places in the lives of young people, especially school, the family and the community (Burns, 2006).

Dimensions of Life-space

Gharabaghi & Stuart (2013) offer a novel approach to thinking about life-space that seeks to reflect both trends within the development of the field of child and youth care practice and trends in the experiences of young people themselves. In particular, they take note of the increasingly embedded role of technology, including gaming and social media, in the manifestation of young people's life-space (Martin & Stuart, 2011). In so doing, they offer a

unified conceptualization of life-space work that considers four dimensions of a single, unified life-space. These four dimensions are: the physical dimension, the mental dimension, the virtual dimension, and the relational dimension.

The physical dimension of life-space denotes the places where the lives of young people unfold, and includes in particular the family, the intervention setting (such as a residential care setting, after-school program or a social or athletic club), school, and the community. Consistent with current research that highlights the importance of becoming present in all of these places when working with young people¹, the physical dimension of life-space sets as a foundation for youth work an understanding that young people's lives unfold in multiple places concurrently, and that therefore approaches to intervention which structure specific intervention strategies around particular places (such as residential care) are unlikely to result in sustainable changes for the young people involved. Current emphases in child and youth care practice on family work (Garfat, 2003), school-based practice (Denholm, 1991), and community engagement (Barter, 2003) are indications that life-space work is now widely understood to be far more than an institutional reproduction of 'home-like environments'. More traditional articulations of residential care, such as in the work of Bettelheim (1974), for example, are thus no longer compatible with this complex understanding of the everyday experiences and physical environments of young people.

The mental dimension of life-space relates to how young people make sense of the physical dimension of their life-space (Gharabaghi & Stuart, 2013). While we can describe physical places independently of young people, we cannot describe the mental processes that young people undergo as they make sense of these places unless we engage with them in their mental life-space. A school may well be a place of academic performance and social relationships, but for a young person, this place may also be constructed in entirely different ways. It might, for example, be a place of safety, away from family violence and tension. Alternatively, it might be a place of danger and risk, either because it may draw attention to a difficult home environment; challenge a young person's limits with respect to social skills; or contain bullies that must be avoided. Consistent with therapeutic interventions such as restorying, narrative therapy, and even social pedagogic concepts of biographic narration (Zeller, 2012), the mental dimension of life-space is where young people create meaning out of their life-space experiences.

The relational dimension of life-space is dynamic since young people experience their lifespace through their relationships with peers, family, professionals and others. Relationships are characterized by a great deal of movement. Relationships travel with young people as they move between physical dimensions of their life-space, and they serve to connect places. Relationships help to interpret experience through the mental dimension of life-space. The relational dimension of life-space is not always visible to others since relationships transcend not only place but also time. A relationship with a long-passed grandparent can be everpresent within the life-space of a young person. Conversely, relationships sometimes replace the physical characteristics of life-space, as is the case, for example, for homeless youth who are not bound by any identifiable physical place. The full understanding of the relational dimension of life-space is often under-represented in our interventions and our services for young people, which typically start with new relationships that are specific to a setting. In residential care, for example, young people are encouraged to develop relationships with staff and peers even though they already have a substantive relational life-space with family, peers in the community and others in their lives. To the extent that residential care programmes limit the contact of young people with the relational dimension of their lifespace, and fail to connect to the relationships that characterize that life-space, the work of

¹ See, for example, Multi-Systemic Therapy as an example of an evidence-based treatment for young people facing adversity (Henggeler et al., 1998).

residential care is at best incomplete, and at worst places demands on young people to abandon relational features of their life-space that have considerable meaning to them.

Finally, the fourth dimension of life-space is one that has not been considered sufficiently in either literature or practice. The virtual dimension of life-space covers not only technologydriven contexts such as gaming and social media, but also the spaces of the imagination, of dreams and nightmares, and even of psychotic episodes. Young people, much like all others, spend much of their lives imagining themselves and their circumstances differently from what others perceive. It is within this dimension of the life-space that young people find opportunities to re-construct their identities, and even their biographic stories. In the face of challenge and negativity, young people can imagine themselves successful and competent. In the face of loneliness and alienation, young people can imagine themselves connected and relevant. And in the face of dysfunctional families, young people can imagine their familial contexts differently, as more rewarding or more meaningful (or conversely, as even more traumatic and difficult). From the perspective of life-space interventions, this means that engaging the imagination of young people, and exploring the stories told within these, is a crucial component of life-space work. Technology-driven virtual life-spaces, which provide grey zones between places and spaces, are nevertheless important components of life-space as well, in particular inasmuch as they provide opportunities for young people to structure their identities and their everyday experiences with considerably more agency than they otherwise might experience. Indeed, social media sites such as Facebook or Instagram allow for the construction and representation of identity using multiple media, including visual and textual forms. Much can be learned about the life-space of young people by engaging these self-representations young people create.

Agency and Structure

Gharabaghi & Stuart (2013) emphasize in their work on life-space intervention the shift from a structure-driven approach to an agency-driven approach in life-space intervention work. Historically, life-space work was described as a framework that involved transferring learning and experiences from a controlled and highly structured environment (the residential care institution) to the real life context of young people upon discharge (Redl & Wineman, 1951; 1952). Neither young people nor residential staff were recognized for their agency - their ability to influence an outcome; instead, the intervention was focused on the structure that was developed to help young people develop healthy patterns of living, and therefore the structure created a healthy outcome. Even residential staff were ultimately little more than the mediators of structure and routine. The relational focus of child and youth care practice, developed initially with a strong view to residential care work (Fewster, 1990; Fox, 1985; Garfat, 1998; Krueger, 1991; VanderVen, 1995), helped to imbue at least residential staff with agency: they were no longer simply conduits of structural elements of the institutions. but instead became active change-makers in the lives of young people through relationships. As a result, 'relationship is the intervention' became one of the mottoes of residential care and of child and youth care practice more generally (Stuart, 2013).

Understanding life-space as a unified concept with central roles for the mental and virtual dimensions requires a much stronger focus on the agency of young people themselves. As much as child and youth care practitioners may work through their relationships with young people, the capacity to give meaning to this work, and to integrate the practitioner into the story written by the young person about him or herself, rests solely with the young person. New technologies and virtual spaces have led youth to understand their life-space differently, to construct it differently, and to think about it in a more unified manner. Practitioners need to understand the young person's role in constructing life-space and understand the relational aspects of that space, not just the practitioner/youth relationship but other relationships as well. As children develop into adolescents and young adults their ability to

understand the abstract and virtual spaces around them increases, implying a developmental component to the construction of life-space, and changes in how a young person understands life-space with the passage of time (Gharabaghi & Stuart, 2013).

Young people's lives unfold within a unified life-space, whereby experiences in particular settings and within specific processes (such as being in care) are interconnected and often interdependent. Such connections and interdependencies may not be obvious, resulting in intervention strategies that fragment the life-space of young people. Intervention programs are often developed to assist young people in schools, in their foster homes or in recreational settings, without ensuring that the strategies take account of the fully integrated experience of the young person over time. The emphasis on behavioural interventions that are intended to raise the functional capacity and the performance outcomes of young people in particular settings is one example. On the one hand, targeted interventions of this nature complement what we have learned from the evidence-informed literature. We know, for example, that increased academic achievement in schools often results in improved mental health selfmanagement skills, reduced behavioural issues and overall a more pro-social disposition. On the other hand, the evidence also indicates that gains made in one setting are often not sustainable in the absence of connected and integrated gains in all other areas where the lives of young people unfold. Ensuring high levels of sustainability for improvement in the day-to-day experience of young people therefore requires a focus on understanding the lifespace of young people as it is articulated and experienced by them, thus acknowledging their agency in creating that life-space and building upon that agency to influence their futures.

Getting to Know Life-space

Much of our knowledge about the young people living in foster homes or group care comes from descriptive sources that emphasize moments in time. This means that we have access to social histories that provide a description of family context, important events in the young person's life and the core familial connections a young person may have. In addition, we may have access to diagnostic reports, and therefore have some understanding of the young person's mental health status. Often, we may have report cards from schools and therefore have a sense of the young person's performance in academic contexts, and we may also have descriptive/interpretative information available from the placing social worker, reports related to juvenile justice involvements, and so on. All of this kind of information is valuable and allows us to form a snapshot of the young person's experiences and current challenges. In and of itself, however, none of this information provides much understanding of how the young person is experiencing his or her life-space. In fact, all of this kind of information speaks of how others experience the young person and describe his or her past.

A meaningful understanding of a young person's life-space requires the participation of the young person in articulating where his or her life unfolds. This means that, as caregivers, one of our core priorities in getting to know a young person is the creation of dialogue, relationship and presence that provide opportunities for the young person to reveal, at his or her pace and to the depth deemed appropriate by him or her, where his or her life unfolds. As caregivers, then, we must maintain an interest not only in what the young person has done or is doing, but also in what the young person is thinking about, his or her imagination, and his or her construction of identity and relationships that connect him or her to others.

We can think of every young person as the author of a developing story, written or imagined as a work of literature. As the author of the work, the young person is firmly in control of setting, storyline, plot and the characters. He or she can write the story based on material experiences as well as imagined ones, and can insert dreams, nightmares, anxieties, fears, as well as confidence and hope, as he or she sees fit. As caregivers, we are a character in the story. While we do not control the role, we do have ways of influencing how the young

person writes our character. Will we be a supportive, caring character or one who is sinister, disruptive or part of the young person's imagined conflicts and challenges? The story will also provide for connections between characters. How we engage the young person, therefore, will determine how our character becomes connected to others, including family members, friends, other service providers or even demons or imagined foes (Gharabaghi & Stuart, 2013).

Using this analogy of authoring one's story, then, provides opportunities for rethinking how we are present with the young person every day. Our influence in the life of the young person becomes a function of our ability to engage the young person's life-space, as articulated by him or her. In particular, we can focus our approaches on three core concepts, each reinforcing the next. These three core concepts are caring, engagement and relationship.

Caring

In foster care or group care situations, caring is often articulated either as caring for a young person or caring about a young person (Bosworth, 1995; Smith, 2006). Caring for the young person typically includes meeting the young person's basic needs, including his or her needs with respect to housing, food, and clothing. Caring for the young person may also include managing his or her health care, financial needs, education, and so on. Caring about the young person, in contrast, refers to the emotional connections we establish together, and often can be experienced as the sensation of being loved, liked or appreciated. Clearly, caregivers have an interest in working toward both of these articulations of caring. Caring for the young person is of course a requirement with 'looked after children', and therefore allows limited room for negotiation. Caring about the young person is a more difficult process to measure or to consistently implement, since the young people we care for are not always compatible with our personalities, and do not always meet our expectations with respect to personal and social values. Nevertheless, in most caregiving situations, caregivers and young people negotiate relationships that feature both being cared for and being cared about.

From a life-space intervention perspective, caring must accomplish more than these two articulations of caring for and caring about. Caring in the life-space must be comprehensive and offer signs that the caregiver is fundamentally interested in all of the dimensions of the young person's life-space, including the virtual and relational ones. It therefore becomes imperative that, as caregivers, we demonstrate an interest in and care about the friends of the young people we care for, as well as in the ways in which young people construct their online identities, their dreams and nightmares, and the places and relationships that feature prominently in the everyday life of the young person. It is insufficient to demonstrate empathy toward the young person in our care; we must also demonstrate empathy in the stories of those the young person feels connected to, be that siblings, friends or others (Gharabaghi & Stuart, 2013).

We can measure our success related to our caring for the young person by asking ourselves some simple questions. For example, we might ask ourselves whether we know the young person's friends, their stories, and their current struggles. We may reflect on our understanding of the young person's relationships with family members, including siblings and extended family. We might remind ourselves to ask about the young person's dreams (both in the sense of where the young person sees him or herself ending up, and also in the more literal sense, as in what the young person might have dreamed about last night) and nightmares. We may also ask ourselves whether we are familiar with the way in which the

young person engages the virtual spaces of gaming or social media. How might the young person's online identity (which is self-constructed) differ from his or her offline identity (which is often strongly influenced by external factors such as peer pressure and familial expectations)?

Caring within the broader framework of life-space intervention means that, as caregivers, we are concerned not only about the young person as he or she appears physically in front of us, and his or her activities and behaviours, but also with how the young person is experiencing relationships and scenarios that may be rooted in his or her imagination.

Engagement

Since caring is fundamentally about becoming interested in all of those spaces where the life of the young person unfolds, engagement similarly relates to those very same spaces. Young people feel important and empowered when their priorities, important relationships and seemingly trivial experiences are acknowledged and engaged by caregivers. It is not helpful to criticize a young person's gaming habits; it is helpful, however, to be interested in how the young person is experiencing his or her gaming. Similarly, it is useful to demonstrate an interest in the young person's friends, and it is even better to actually engage those friends and therefore to help a young person write the connections between us (as caregivers) and their friends (as important social supports in their lives) within their stories. The more intertwined and interdependent we become in the way in which our character functions within the young person's story, the greater the access we gain to that young person's lifespace.

By way of example, using a life-space intervention approach in the context of caring for a young person as a foster parent changes the way we might greet (engage) a young person upon returning from school. Traditionally, we might ask, 'How was school today?' Very likely, the response will be a one-word response, either negative or positive. Alternatively, we might ask, 'How is your friend Eric doing? Did you see him at school today?' This kind of a question, which explicitly queries the life-space experiences of the young person, is much more likely to result in a conversation and transparent dialogue about the young person's experience at school, even if the conversation itself is structured around a peer relationship. In this way, engaging young people through the experiences and spaces that are of importance to them allows for greater opportunity to provide care that is experienced as such by the young person (Gharabaghi, 2011).

Relationships

Within the broader framework of life-space intervention, relationship <u>is</u> the intervention (Stuart, 2013). This is a crucial element of becoming present in the life-space of young people. Relationships are often limited by the assumption that face-to-face contact is the context of relational engagement. In fact, relationships are most relevant precisely when the parties to the relationship are physically disengaged, but remain connected through distance and mutual absence. It is when we (as caregivers) are not physically around the young person, that the young person must draw on the existing relationship with us in order to navigate the multiple dimensions of their life-space (Gharabaghi, 2013).

This complex idea finds concreteness in the decision-making of the young person. When confronted with peers promoting substance use, for example, the young person can either be swayed by peer pressure or he or she can invoke the relational connections to the caregiver as a way of becoming empowered to resist. In order for this to happen, caregivers must work toward relationships that are embedded in the young person's life-space, so that the

connection between caregiver and young person finds expression especially in the moments when they are apart.

This brings us back to the analogy of young people writing their own story. Part of that story will be the role of the caregiver, which can either be an isolated role specific to the interactions the young person has with the caregiver, or it can be an integrated role in which the young person maintains the presence of the caregiver even in his or her absence. As caregivers, our intention must be to shape the development of our character in the young person's story in such a way that it transcends the immediacy of the physical encounter, and remains present as the young person journeys through physical and virtual spaces.

Implications for Residential Care

Life-space work is particularly significant in the residential care context, in part because residential care is often understood as a distinct type of life-space. Although the conceptual foundations of residential care have evolved significantly from its beginnings as an isolated institutional endeavour, they are nevertheless still tied to a concept of the residence as a place that seeks to prepare young people for managing their life-space after discharge. Much of the residential care sector, therefore, continues to provide services that fragment lifespace, and that inadvertently mitigate the agency of young people in constructing their lifespace based on the four dimensions discussed in this paper. Our perspective is that this is not a viable foundation for effective residential care. Life-space is not a compound of multiple places, but instead a unified space where young people's lives unfold. As a result, residential care services must be responsive to the whole of the life-space of a young person, and that includes demonstrating an interest not only in other places where young people might spend time, but specifically in the way in which such places become connected, often through the virtual life-space dimension and specifically the imagination of young people. This, in turn, means that we must re-think the boundaries of our core concepts, including caring, engagement and relationships. These boundaries are not to be created a priori by the commands of the structure or processes of particular residential care programmes; instead, these boundaries evolve through the exploration of the life-space of young people as it appears in its full multi-dimensional complexity. In this context, we must be mindful that our role as practitioners is an active one, though not a determining one. Practitioner and young person create a relational space within co-constructed boundaries. Ultimately, as the authors of their own stories, young people maintain agency in the plots, setting and development of characters within those stories, and our work, therefore, must be focused on finding presence within those stories rather than editing or re-writing them on behalf of young people.

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