Social Pedagogy and Social Work: Case Study of a Child

Social Pedagogy

“To teach is to touch a life forever” (Anonymous, n.d.).

Kylie is a child of 8 years who lives with foster parents; due to her past experiences, her communication skills are limited, making it difficult for her to build and sustain relationships. Kylie has been subject to sexual abuse and consequently appears to be very withdrawn.

Introduction

So many children, even adults live with hurts from Adverse Childhood Experiences (ACEs), which is characterized by trauma signs and symptoms of fear, guilt, withdrawal, inability to speak up, low self-esteem and suicidal tendencies (Couper and Mackie, 2016). To support victims of trauma and help them lead a meaningful life, social pedagogy which is a practice of care, transformation and empowerment need to be applied.

The purpose of this case is to provide supportive, restorative and safeguarding care, using concepts of social pedagogy, following ACEs (Ruch et al., 2007). A holistic approach with relevant skills, knowledge, strategy, as well as related theories and models shall apply. The care will also show how interprofessional collaboration and care documentation can be used for care continuum (Cuff, 2013).

Study background

Social pedagogy is a creative practice that applies knowledge and skills that offer a flourishing ground for well-being, learning and development (Cameron and Moss, 2011). Smith (2010) and (Garfat 2004) add that it is a care that involves shared activities and vision that supports relationship between individuals, families and society. This is what Ryynänen and Nivala (2019) call “theory and practice of people’s growth”. This englobes a lot, in the sense that it is an activity-based education, which gives opportunity to self-directed learning.

Working with children in foster homes is often challenging, requiring high professional skill, patience and compassion. This may become quite demanding if not attended to and may, according to Guishard-Pine, Lloyd, and McCall, (2007) lead to feelings of frustration, disappointment and exhaustion. Sometimes, a carer may simply not be accepted. This may result in anticipation of fear, anxiety and rejection in subsequent cases. However, Buzan (2006) believes that awareness that every situation is different can help a person to process past painful experiences and pave the way to newer learning. This can provide a better understanding of what it means to live with negative childhood experiences of bad treatment, neglect and abuses of all sorts that leave a child traumatized and estranged (Rymanowicz 2018). To understand this, Howe (2013) recommends that an open mind and empathy be applied to build a successful, supportive and transformative relationship. With a growth mindset that sees possibilities in life, the human ability can dramatically unfold to express the hidden

potential within (Dweck, 2008).

In practice, communication and listening are vital tools that enhance care relationship. However, children according to Cottrell (2019 and Kendall and Hedtke (2006)) may sometimes lack the space and trust to speak. Thus, this calls for use of the “detective-like mind”, which hunts for nonverbal information that can improve interventions (Ibid). Kylie, lovely and calm sat quietly at the far end of the room. Although radiant, her body language suggested signs of loneliness, anxiety and sadness. However, when she looked up, a spark twinkled from her eyes. A spark that expressed a desire for friendship. What lies within the human heart, that which is unspeakable can be expressed by the face (McCarthy, 2008) and (Rogers et al. 2017). A quick assessment of a child and the environment for potential risk factor was done, to ensure safety and protection for Kylie and the family. “Speaking about the unspeakable” can inform useful safeguarding and protective strategies, which create a safe place for witnessing to occur (McCarthy (2008)).

The care plan was a participatory one that involved Kylie, her foster parents and the carer, based on empathy, authenticity, love and acceptance (Haltung) (Lefevre, et al. 2017) and (Hatton, 2013). Strategies to help realize wellbeing and overall development were focused on Kylie, underpinned by the principles of social pedagogy which reflects team involvement, egalitarianism and humanistic values like humility, respect and relationship (Cameron and Moss, 2011).

With unpleasant experiences care to restore becomes challenging to build trust again. Helping children who have experienced trauma according to Cameron, Connelly and Jackson (2015) is to create an enabling environment that guarantees safety and secure relationship with people, families, and society to help them process, integrate and heal from the experience. They also argue and believe that daily integration of care and education is the key that enables children to become their best. From another viewpoint, Kyriacou (2009) asserts that ‘social pedagogy’ approach, which in recent time is being highly applied in welfare, care and education of children in the Uk considers an integrated view of the needs of the whole child in terms of welfare; inclusion; academic support; and social education. Petrie (2011) supports Cameron, Connelly and Jackson (2015), adding that effective communication while working with children is paramount to establishing an emotional and intellectually enhancing relationship. Hence, the common third which includes the head (applies professional knowledge and theories), the heart (expresses deep authentic care, connectedness and empathy) and the hand (applies creativity, plays, holds and hugs), becomes useful (Petrie, 2011). Beautifully said, “The creation of something new is not accomplished by the intellect but by the play instinct acting from inner necessity.” (McCarthy, 2008) cites Carl Jung (n.d).

To establish a breakthrough relationship in childcare, relevant strategies, activities and some self-disclosure to facilitate and support subsequent events must apply. For example, storytelling, which can be entertaining, therapeutic and capable of initiating relationships (Moon, 2010). This brought life to her face, made the park in her eyes bubble and then amazingly, made her laugh. A sense of mutual connectedness, accomplishment and satisfaction was obvious and created a foundation on which an enabling relationship took root.

A plethora of relevant games and mind-stimulating activities were used. For instance, gardening, walking, shopping, visit to foster residents, the pool and the cinema. Imaginative ideas like building images to address unpleasant experiences and foster trust were applied.

Creative approaches that stimulate dialogue and egalitarianism rather than “uniformity and conformity” offer appreciable outcome in practice (Gilchrist, R. et al., 2011). Meanwhile, Cooper (2012) recommends that professional, personal and private boundaries, be maintained as care relationship deepens, to uphold care integrity and realize targeted goals. Education on self-image, life experiences, confidence, emotions, human equality and potential in everyone irrespective of past experiences, age, identity, culture or colour gave room for conversations. This according to Charfe and Garder (2019) and Cameron and Moss (2011) supports the process of transformation and unfold the “Diamond” in persons, which is vital for survival. This process builds the confidence needed to process past experiences, improve communication and manage painful memories of sexual abuse that affect self-image (David 2006).

Cognitive behavioural therapy that uses image, as proposed by Kendall and Hedtke (2006) to address anxiety through processing feelings, attitudes and the outcome was good. Images can affect and inform actions that connect to banked conscious and unconscious memories to generate new ones, which form a positive self-image of feeling capable, lovable and valued (Plummer, 2001).

Documenting, collaborating and applying feedback from Kylie’s family, her teacher, psychologist and social worker served as tools for evaluation and further strategies, skills and knowledge needed that align with child care policy to improve outcome (Leiba, Whittington and Weinstein, 2003), (Nijstad and Paulus, 2003), (Jelphis and Dickson, 2008) and (Loxley, 1997). It also made the care more participatory and “cosmopolitan” (Hansen, 2011), offering Kylie the opportunity to invite her foster parents to participate in some of the activities. This is what Kyriacou (2009) calls the “integrated approach”. A growing sense of belonging and a loving relationship between Kylie and her parents ensued. Progressively, she began to communicate her thoughts and engaged in activities of daily living like tidying up, self-minding and eating properly. Her academic performance and relationship in school were also reported to have remarkably improved. Within some months, Kylie became comfortable enough to talk about her experience of sexual abuse and her coming to the foster home. There was a sense of unburdening and a burying of the past. This is what Aubrey and Riley (2019), cites Dewey (1916) call “learner-centred pedagogy” where intellect through association is stimulated and motivated to learn through inspiration. An approach that requires reflective practice to realize a skill called “to learn how to learn” (Ibid), which identifies with Wadsworth (1996) cites Piaget, who believes that learning occurs through explorations and personal experience. Although Piaget’s theory sees children as humans who engage actively in their learning, Wong, Ka Nar (1999) disapproves of the idea and considers it limiting and failing to recognize the inner experience which validates social learning.

Social pedagogy applies in every profession, particularly, in those that relate to human health. For example, Ford (2020) cites Virginia Henderson(1991) who believes that the main role of the nurse is to assist individuals, sick or well, in performing activities that contribute to health, recovery or to a peaceful death, which they could do, if they had the strength, will or knowledge. The humanistic activities embedded in social pedagogy have always been expressed in human relationality and diverse professional practices. However, the name social pedagogy was not used to describe them.

In conclusion, children like Kylie and adults alike carry past hurts that prevent them from reaching and expressing their potential in life. Therefore, social pedagogy in its richness should be centralized in every practice and human relationships to bring out the best in people.

Awareness of how ACEs and some environmental factors can predispose to chronic distress and psychological trauma, calls for social pedagogical approach to build resilience and hope for survival.

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