CAREER EXPERIENCES IN RECEIVING PSYCHOSOCIAL AID FROM CARE CENTRES

Rita Virbalienė¹, Dijana Bajoraite²

¹Vilnius College, Faculty of Educational Science, Lithuania
²Vilnius City Integrated Services Centre "Family Valley", Lithuania

Abstract

The Lithuanian child care system is undergoing reforms, with the aim of reducing and phasing out the number of children growing up in care homes. In order to do so, there must be alternatives to guardianship – not only guardianship authorities, but also guardians and on-call guardians. So far, the service network has been a missing element. If we want to have guardians/carers who are courageous to undertake this complex and difficult mission, we need to think about how we can help when a person or family is committed to this mission. ‘In 2020, 18.2 % and in 2019 23.2 % of cases for children deprived of parental care were placed in institutional care, 58.8 % in families (53.4 % in 2019), 0.5 % in families (0.9 % in 2019) and 21.6 % in care centres (2019: 22.5 %)’ (VKT report) The establishment of care centres in Lithuania started in 2018 and currently there are 66 care centres in Lithuania. There is at least one guardianship centre in each municipality. In Lithuania, the care centres have only recently started their activities. They are responsible for carers/guardians and children in care, meeting their needs and providing adequate assistance. These centres are a new function of social security activities with a strong focus on child care reform. There is a lack of research to analyse the activities of the care centres and their specificity in the child care process, and it is therefore appropriate to carry out studies to reveal the experiences of guardians/carers in receiving the services provided by the care centre. This would help to determine whether the care centres pay sufficient attention to guardians/carers and children in care, thus improving the support system for guardians/carers to ensure a child care.

Keywords: child under guardianship, child care, care centre, psychosocial services

The aim of the study is to examine the experience of guardians/carers in obtaining psychosocial services in care centres.

The study was carried out using the Qualitative Study Method using a semi-structured interview tool, which allows a closer and deeper analysis of the experience of the research participant (Žydžiūnaitė and Sabaliauskas, 2017). A qualitative analysis of the content (content) was chosen to analyse the information collected. According to Žydžiūnaitė and Sabaliauskas (2017), the researcher has the opportunity to make a summary and interpretation of the written data by means of this ‘content’ analysis. In the course of the study, the method of analysing content (content) allows for a better understanding and analysis of the text, while searching for useful information helps to find the main ideas of the participants in the study.

Test ethics: All participants in the study were informed of the purpose of the research. The survey participants participated freely and were not forced. All confidentiality requirements were respected during the survey. During the analysis of the survey data, the information was carefully analysed and correctly quoted.

Test sample: The selection of participants in the survey was made on the basis of specific selection criteria using a targeted sample. (Rupšienė, 2007) The selection included three criteria: first is to take care of child for more than one year, the second to be a women, and the third the child cared is not a relative. In order to respect the protection of personal data, to ensure the anonymity of the participant in the research and in accordance with ethical principles, the names of the participants in the trial have been changed. The study involved women aged between 33 and 60.

When, for various reasons, a child can no longer grow with his or her biological parents, he or she is removed from his or her family and the type and form of care is determined. In accordance with Article
3.252 of the Civil Code of the Republic of Lithuania, the latter establishes two types of guardianship: Temporary and permanent forms and four forms of guardianship: care in the family, foster family, care centre and institutional care (Lithuanian Civil Code, 2000).

In Lithuania, it is a priority to establish child care/care for the family, in an environment as close as possible to where the child can fully develop, grow, build lasting and decent relationships and live a normal life and normal family life. By organising the custody of children, the State takes over the rights and responsibilities of their biological parents to ensure the exercise of the rights and interests of the child and transfer those to a natural or legal person. There are two types of guardianship in Lithuania: temporary or permanent care and four forms of guardianship: child care in a family, foster family, care centre and institution. Each form of guardianship has its own distinct features, which aim to create an environment close to the family, so that the child can realise himself.

When biological parents are unable to play the role of parents, guardians become those who fully take over the role of parents and represent the parents for the children (Mosek, 2004). The primary task of carers when taking care of a child is to know, accept and respect the child’s biological nature. The child must be admitted with all the disadvantages and advantages (Rimkus, 2016).

People before becoming guardians/carers should understand that children who have lost their parents are particular ones. They need not only love, like guardians own children, but also more attention, sacrifice, great perseverance and patience while caring, educating and growing them. (Blebiénė I. 2006). According to Appleby (2003, p. 205), a motivation is personal ‘dispositions, desires, incentives and needs that direct, control or explain human behaviour’.

“The child’s guardian/carer shall be chosen on the basis of his/her personal characteristics, state of health, ability to be a guardian, his relationship with the child deprived of parental care and the best interests of the child” (Articles 2000, 3.268 of the Civil Code of the Republic of Lithuania). In addition to being able to replace children with lost biological parents, guardians are able to restore their trust in adults, although this is a long and difficult job for both children and carers (Lieselot De Wilde, et al., 2019). Guardians/carers need continuous support to understand the causes of the child’s behaviour and learn how to respond appropriately in specific situations. As the child’s ill-treatment is most often linked to the grievances experienced before entering the guardians, it is important to help guardians understand that children’s ill-treatment is not always directly related to them. Persons who wish to become guardians of a child are subject to specific requirements which are formalised in the Civil Code of the Republic of Lithuania (2000), which lays down rules for the assessment and selection of future guardians (carers) laying down age limits, health, legal capacity and paternity abilities of the applicant. The most important and basic requirements for the prospective guardian/carer are the desire to do so, to receive the child with all the disadvantages and advantages, and to create the right conditions for them to grow and develop. When a person wishing to become a guardian/carer submits to children’s rights specialists all the necessary documents and the children’s rights department verifies a person’s health, the person's criminal record, consents shared by persons over sixteen years of age living together, then the household conditions in the homes of future guardians/carers will be assessed, most often by specialists in the Child Rights Protection Unit or by professionals working in the guardianship centre who will provide training. Once all the necessary documents have been collected, the specialists in the Children’s Rights Protection Unit will carry out a pre-selection and send the person seeking guardianship to the GPTC training.

GPTC training is a training and counselling for guardians, adoptive parents. Without them the person is not able to become a guardian/carer unless care is sought for a relative, then this training is only recommended. “The aim of the programme is to share relevant information with prospective guardians and adoptive parents so that they can become appropriate guardians and adoptive parents. The programme provides with the following training forms for guardians and adoptive parents: group activities, individual contacts, individual consultations” (Guidance, et al., 2013). At the end of the training, GPTC training specialists produce an opinion, assess the motivation for choosing to be a guardian and assess his/her ability to act as guardian, then a recommendation on whether or not to be a guardian is proposed.
Social workers and child rights protection professionals working in the care centre provide advice at the very early stages to prospective guardians/carers, familiarise them with the child’s care as widely as possible, as well as with the psychological preparation for a new resident in the family. At the beginning of GPTC training, and during all trainings, there is a fundamental rethink of the desire to choose a care path. It is also essential for prospective guardians (carers) to have, at least to some extent, a knowledge of the child’s custody legislation, since the custody of the child is precisely determined in a legal manner. A person wishing to be a guardian must properly fulfil this responsible, new and important role, as a child who has been deprived of parental care has already been subjected to ill-treatment (Girdim, et al., 2013).

To sum up, the decision to become a guardian/carer is very responsible and therefore special attention is paid to those who wish to become a guardian. Future guardians/carers are provided with all relevant information on guardianship/care, both child rights protection specialists and social workers working in the guardianship centre are consulted when needed.

In Lithuania, more intensive work with foster families started on 1 January 2018, when the care centres became operational in Lithuania and are governed by the provisions of the Law on Social Services and other legal acts. A total of 66 guardianship centres are already in place in Lithuania to train guardians, adoptive parents and caregivers on standby and assess their readiness to raise a child, provide assistance in case of distress, provide counselling, strengthen family assistance, organise training and mutual assistance teams. Almost all municipalities have at least one guardianship centre (SPCC). The main objective of the centre’s activities is to ensure that all children in care, guardians/carers are “have an access to and provided with the necessary advisory, psychosocial, legal and other assistance with a view to the appropriate education and upbringing of the child in a family environment”. (Order of the Ministry of Social Security and Labour of the Republic of Lithuania “Description of the procedure for the supervision of the organization and quality of the activities of the care centre and the care provided by the on-call guardian of the child”, 2018). The guardianship centre’s functions with the families of guardians/guardians are the following: training of the GPTC programme followed by continuous periodic training; organization of mutual assistance teams for guardians/carers, provision of psychosocial assistance, psychotherapy, intensive assistance, temporary respite, legal and other assistance, providing of counselling, mediation services, assessing of the quality of the activities carried out by the guardian, coordination of the provision of assistance to children and guardians under guardianship (Order of the Ministry of Social Security and Labour of the Republic of Lithuania on the description of the activities of the guardian and the procedure for organising and monitoring the quality of the care provided by the guardian).

Before providing any assistance, the social workers working in the guardianship centre identify the services and support needed by the guardians/carers and the children they are cared for. All assistance is organised according to the expectations of the family itself, and then discussed with the family what assistance and services will be provided and how often. One of the most important services provided by the guardianship centre is GPTC training, training and counselling for guardians, adoptive parents. Future guardians/carers must undergo GPTC trainings before starting the guardianship, the guardianship/care is not possible without these trainings. During these trainings the most important information on the custody of the child and the characteristics of the child under guardianship is discussed, how to help them grow safely, how to develop a relationship based on trust, etc. (ICR). “GCC training is for persons who intend to care for, adopt child, provide childcare services, adoptive parents, guardians/carers, on-call guardians and people working in community-based child care homes” (ICPD). The subjects of GPTC training for future guardians are the “needs and satisfaction of the child under guardianship” and the “development of basic skills of guardians”(Giedrimas et al., 2013). The guardian/carer must have general knowledge not only about the child’s development and the creation of appropriate environments, but also on how to properly understand the psychology of the individual child affected(Reporting, 2017).

Since 2018, the care centres have started their activities in Lithuania, have become one of the most important links between the guardianship system and guardians/carers, children under guardianship and adoptive parents. Before someone becoming guardians/carers, social workers working in the
guardianship centre, certified GPTC training specialists provide for those persons preparatory training for several months. Once the guardian/carer starts to care of the child he has a guardianship coordinator assigned who provides coordinated assistance to the family, draws up an individual assistance plan for each child under guardianship, if there is a need involves other professionals and cooperates with other institutions (description of the organization and supervision of quality of care of the care centre and the carer on stand-by, 2018). According to the authors, Liobikienė and Radvilienė (2009), social workers are required to provide a wide range of assistance, not only to help with the child’s care formalities, but also to psychologically, morally support families in caring for children, to help them to resolve disagreements, to develop their social skills and to provide them with all the information they need.

The study looked at the experience of guardians/carers with psychosocial services.

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<td>Experience of guardians in accessing services provided by Care Centres</td>
<td>Good Practice</td>
<td>“...but it also benefits from this human additional support, as there is really a young, frank team, where everything can ask for reality.&quot;; 'help more than necessary'; (A3); “...when you call and ask for help, a truly special guardianship coordinator is really looking for those solutions, and I suppose they surely never left me without calling or writing back, without not taking into account my problem in some extent.” “...they are telling us what they have, they have that, let’s try to see what you need, how they can help.&quot; (A2); “They shall always invite us to attend events, training...”; “...if they cannot help themselves, they can always direct it, and they do so successfully.” “In my eyes, everything is good. And the professionals who work in our city are really young, they are really pleasant, they understand what they work, where they work, and I am personally satisfied with what I get, in the sense that I need &quot; (A1); “We regularly received invitations to training, mutual groups...” (A4); “My need is satisfied by a care centre and more than needed... (A4); “...this was a lot of consultations I received, and I received a lot of advice...”; “...they call and ask, do I need anything else, in that sense this is a very close communication, assistance, real help.” “that the people, the adoptive parents, how to say, that they should understand, that if something happens to them, there is a problem, they should not afraid to go to a care centre, which is not the bad policeman who comes and says, look what you have done, it is more as my advisor, assistant, consultant, who tells, how we can do better and looks for solutions.” “...at first, they care and call us at all times and ask us, what is happening, or what kind of assistance is needed...”; “I am really receiving the aid and they always ask if I need it and offer assistance.”; “will always give advice, explain, will always refer to someone, will recommend something, and it’s for sure. No reproaches.&quot; (A5)</td>
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<td></td>
<td>Bad practice</td>
<td>“…there is another employee I see no willingness to act, to be organised, perhaps in some cases, let's say, lack of categorical approach...” (A2);</td>
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Feeling of security

“When we need some kind of help, we know that we can ask and get help, we see taking care of us and get what we really need.” (A1)

“I have received this kind of fun support, just in a living situation that does not seem to be directly related to the child, but I received attention, was heard and got an advice.” (A4); “...the centre is composed of highly skilled professionals with very long experience and this is really well organised...” (A4); “It was beyond the expectations, I am really happy, and this is making our care very successful, namely the services provided by the care centre...” (A4); “... we are seeking and receiving qualified, fast and efficient services.”; “I really get great attention and receive information here and now” (A6); “We now go to this care centre for a psychologist, a girl likes this psychologist very much...”; “I know this is all satisfied because... (A5)

Evidence from the study confirms that the professionals working in the guardianship centre perform well one of the essential services of advice, mediation and cooperation, demonstrating that social workers are ready to provide full assistance to guardians/carers in order to resolve all issues and problems, thus ensuring a smooth guardianship system. However, some participants argued that some professionals working in care centres lack activity and organization, and in some cases may be more demanding and categorical. These competences could be developed by Care Centre staff during supervisions or trainings to provide the highest possible quality of service. To sum up, the Care Centre is a proven establishment in the guardianship system, with qualified and professional specialists who provide the necessary information and services to the guardians/carers.

The aim of the study was to reveal the extent to which guardians/carers were aware of the services provided in the care centres they cooperate with.

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<td>How guardians/carers know about the services provided</td>
<td>Don't know exactly</td>
<td>‘I don’t know this precisely, in detail, I was not interested in this’ (A3); “...too much we were not interested in the services provided...”; “…what kind of specific services, I can’t say for this minute.” (A1); “I could also get more, but I don’t know what is included, I did not ask.” “Officially, to say the truth, they have not been officially interested...” (A4)</td>
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<td>You would like to get more help</td>
<td></td>
<td>“You could ask for slightly more and much more assistance.” “Moreover, we have not enough services...”(A2)</td>
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<tr>
<td>All what I ask for I receive</td>
<td></td>
<td>“We get enough” (A3); “…all what I asked for I received.” (A4)</td>
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The findings of the study revealed that guardians/carers are not in a position to specify which services they are entitled to get, indicating the need for a closer and smoother communication relationship between the social workers working in the care centre. To sum up, guardians/carers do not know exactly which services they and the children under their care are entitled to get, but in case of a problem all the services requested are provided at that specific time. In order to ensure a smooth guardianship system,
timely and adequate services are essential, and it is therefore important that guardians/carers know what services are available to them and to the children they are cared for.

The study highlighted the expectations expressed by guardians/carers and the desired changes in care centres in order to increase their effectiveness.

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<td>Desired changes in the care centre</td>
<td>A wider set of services</td>
<td>“...there is a need for mutual groups, continuous training.”; “...accept as many psychotherapists as possible, try to write someone else and try again, not wait for the guardian to say...” (A2); “...therapist, speech therapist and lawyer should be a mini-package that ensures the timely and local provision of services” (A4); “...it would be appropriate for guardianship centres to have professionals who can provide practical assistance to foster and adopted children in the same centre, without recourse to polyclinics, as a general rule...”; “...other services, the same ergotherapist, the same speechtherapist, perhaps even, perhaps not, I did not deal with it, but in reality the legal services that are really needed...”; “Such an extension of services would be useful and necessary.” (A6)</td>
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<td>Duplication of the same procedure</td>
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<td>“...in order to avoid duplication of that check-up procedure on an annual basis...” (A4); “...many duplications, many duplications in children’s rights services and e.g. care centres have not yet been arranged in such a way that, for example, they carry out supervision of child care, not care as such, but look at is care they provided good or not. This is done by both children’s right services and care centres, i.e. identical questionaires, identical questions, in both cases need to come and assess in both places, if assessed otherwise theoretically this disturbs the child, disturbs the family” (A6)</td>
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<td>GPTC training</td>
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<td>“…the training provided as GPTC training is provided by two social workers and not by a social worker and psychologist, I think it is essential to be a psychologist and a social worker, and the psychologist needs to assess very well whether this potential guardian...” (A4)</td>
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Participants of the study want to expand the range of services provided in guardianship centres, such as speech therapist, ergo therapist, physiotherapist, legal services, etc. The recipients of the services stated that these services could also be available in the other institutions for children under their care and adopted, but would be more convenient for them if these services are provided in a single establishment, in the same centre, without contacting polyclinics. Participants in the survey would like to see more meetings of guardians/carers’ mutual assistance groups, as these meetings provide an opportunity to share their own experiences, share experiences in various problematic situations, as well as organise more training. One of the desired changes is the GPTC training. As it is one of the most important steps before becoming a guardian/carer, it is relevant to hear insights of those who have already completed this training. Participants of the survey believe that induction training should be provided not by two social workers, but by a social worker and a psychologist, as this choice to become a guardian/career is a very responsible step and needs to be assessed from another perspective, as the psychologist is able to assess, whether the potential guardian/carer is fully prepared for this responsible step. To sum up, guardians/guardians are satisfied with the activities of the care centres, but see possible changes to further the smooth running of their activities.
CONCLUSIONS

Guardianship centres have become the most important link between the child’s overall guardianship system and the guardians/carers and the children under their care. They help those persons who are committed to guardianship/care, so that both sides can assure themselves that these persons are ready and fit to become guardians/carers. Guardianship centres are responsible for GPTC training, i.e. training and coaching for guardians, adoptive parents. During the training, guardians/carers are made aware of the specific nature of the child’s care and possible problems. Information shall be provided on the taking into care of the biological parents who have been deprived of the child. After an induction training, individuals are given an opinion with a recommendation whether or not to be a guardian. If those wishing to become guardians/carers receive a positive opinion, they formally become guardians/carers, and the care centre starts searching for children in need of new homes. When the child is already in a foster family, psychosocial and other services start on a need-by-case basis.

Care centres are needed and useful for carers/guardians, and the services they provide are of high quality. The care centres are equipped with competent specialists who are familiar with their work and are able to provide the necessary services in an appropriate and timely manner. Guardians/carers can apply without hesitation with the knowledge that they will receive all necessary assistance. However, guardians/carers must be made aware of all the services and support provided in the care centres.

RECOMMENDATIONS

The guardianship centre and its staff working directly with the guardians/carers and the children under their care:

- Shall promote the development of their profession, as only a competent worker with sufficient knowledge and skills can provide professional and appropriate assistance.
- Should continue to provide psychosocial services for carers/guardians and children under their care.
- Should organise more mutual assistance groups where guardians/carers can share their life experience, as this helps to understand that they are not alone in their distress and can share their life experience and be heard.
- Shall prepare a leaflet for guardians (carers) listing all the services and support available to them with specific addresses.
- Shall consider proposals made by guardians/carers to extend the range of services to them and to the children under their care.

REFERENCES


