What matters to people in their family lives and personal relationships? And what are the implications for policy?

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Thank you very much for inviting me here today. It’s my first time in Lisbon and I am delighted to be your guest and to hear about your work.

In my presentation today I shall talk about three aspects of my research. The first highlights some of the findings about the values and ethics that are important to people as parents and partners. This is from the CAVA research project which I wrote about in the book ‘Rethinking Families’. The second part is drawn from research on parental empowerment that I did on the Sure Start projects. These were introduced 11 years ago as services for parents in the most deprived areas in the UK. And, third, I want to reflect on the political and policy implications of these two pieces of research.

I The ‘CAVA’ Research

CAVA stands for ‘Care and Values’: the context for this research, which was carried out between 2000-2005, was family change. The changes are similar across Europe: over our lifetimes many of us will cohabit, marry, separate, or parent on our own, live on our own, or do all of these. Our support networks may well include parents and step-parents, children, close friends, same-sex partners, ex-partners, ex-daughters-in-law. There is more acknowledgement of the diversity of living arrangements and family forms. These combine with other changes – women’s increased participation in the labour market; growing economic inequalities; growth in housing costs, and an ageing society.

Public debate about these changes has been, in the UK at least, quite critical. There are those who see in these changes a loss of commitment, a self-seeking individualism, a parenting deficit and moral decline. On the other side, changes in family lives and
intimate relations are seen to herald the emergence of self-actualizing men and women, less bound by tradition, obligation and duty, who have greater independence to pursue more satisfying and democratic relationships. This so called individualization thesis has been influential in the sociological work of Anthony Giddens and Ulrich Beck.

Against this backcloth of change we asked what it is that matters to people as they cope with new situations in their lives - situations such as divorce, and repartnering, combining work and motherhood, living without a partner, or caring for kin across continents. These were all in-depth qualitative studies, aiming to throw light on the processes and meanings behind the changes in people’s family practices. If the traditional sources of moral authority of church and state appear to hold less of a grip on people’s family practices, then what is it that people value in their family lives and personal relationships? What are the practical ethics they use?

Overall, we found that the critique of a moral decline was not borne out. Although relationships may be changing this has not undermined people’s sense of commitment to one another. When faced with dilemmas, people generally negotiate ‘the proper thing to do’ in and through their commitments to others, especially with reference to the well-being of their children.

There was some evidence of individualization in that people do make choices and relationships that matter to them, but they are not free-floating individuals but very much embedded in relationships that matter to them. And while people aspire to more democratic relationships, they are not free of older hierarchies – between men and women and adults and children.

The changing shape of commitments
So, we found that the shape of commitments is changing but there is no loss of commitment itself. Take, for example, the situation of lives after divorce. The effect of family policy (the 1989 Children Act) has been to emphasize shared parenting after divorce. Doing this is not always easy especially where there has been violence, or where trust has completely broken down, or where divorce runs counter to a family’s faith. However, research showed that many divorced parents, usually but not exclusively women, would take it upon themselves to perform an active ‘kin-keeping’ role after divorce in order to sustain significant relationships, not just with the other parent, but with ex grandparents and in-laws.

Sometimes of course divorce provides the opportunity to withdraw from problematic relationships with in laws. Either way, we found the principle that mattered was that these were usually negotiated for the sake of the children. Where divorced parents could ultimately sustain their relationship it is because ex-partners were able to re-orient themselves as separate parents to their children and to prioritise their children’s capacity to express their needs.
Diversity in work and care
Another project looked at how mothers of very young children make decisions about combining paid work and child care. It found that even though there are differences in whether mothers work full-time, part-time or not at all, there were some things that are held in common. Mothers’ decisions – whether or not they had partners – were based, first and foremost, on doing the right thing for their children. Central in this was the meaning that being a good mother held for them. These meanings were influenced by social networks, class, ethnicity and culture, as well as by local conditions and customs.

So, for some women being a good mother meant being a provider for your child, and for these women they were more likely to find full-time work an acceptable option. But if being a good mother meant ‘being there’ for your child, then they were more likely to want to work part-time or, for pre-school children, not at all. There were also differences in what sort of child care mothers chose – mother substitute or professional day care. These preferences were of course influenced by financial circumstances, but as importantly, by views as the affective quality of different forms of care as well as by what mothers in their social networks did. Money mattered of course but it was combined with an ethic of care.

So what was the overall message from the research?

We found that people’s commitments may be different, but this does not mean there has been a loss of commitment itself. We found that moral reasoning based on care informed the way people attempted to balance their own sense of self and the needs of others. What it means to be a good mother, father, grandparent, partner, ex-partner, lover, son, daughter or friend is crucial to the way people negotiate ‘the proper thing to do’. This does not mean everyone behaves well or is successful in negotiating these things, nevertheless we found that in working through their dilemmas, certain practical ethics emerge for adults and children. These are the ethics which enable resilience, which facilitate commitment and lie at the heart of people’s interdependency. They constitute what I call a compassionate realism of ‘good-enough’ care.

- fairness,
- attentiveness to the needs of others,
- mutual respect,
- trust,
- reparation,
- being non-judgmental,
- adaptability to new identities,
- being prepared to be accommodating, and
- being open to communication.
I shall come back to what these imply for policy but now I want to turn to another piece of research which showed how some of these ethics could inform practical interventions.

II Sure Start Research

The first Sure Start Local Programmes (SSLPs) started in 1999 as services for parents and their children of under 4 years of age in neighbourhoods of greatest deprivation where there were between 400 and 800 children under 4. The last New Labour government introduced these as part of its child poverty programme. At its heart was a belief that labour market activation will reduce poverty so the aim was to improve parents’ skills as parents and as workers in the belief that better parenting contributes to better educational outcomes and this will get the next generation of children into work and out of poverty.

One of the distinctive features was that managers of the programmes were given considerable autonomy in judging how best to use their funding to meet the needs of a local area. SSLPs were also encouraged to deliver services in a responsive and inclusive way, and to challenge negative perceptions about the local communities they served. Engaging with parents was seen as a way of developing community cohesion and combating social exclusion. Such an approach marked a significant break with past professional practices, which were characterised by a more individualised, hierarchical, formal and expert approach to the relationship with users.

The study I did investigated whether and how SSLPs facilitated individual parental and community empowerment. It used qualitative, in-depth, and semi-structured interviews with parents, volunteers, staff and other local stakeholders in six case-study areas.

Findings

Overall, we found substantial evidence for experiences of individual parent empowerment in all the case study areas. This was usually expressed by parents in terms of

- feeling less isolated,
- more valued (especially as mothers)
- more listened to, and
- more confident in voicing their concerns and in their parenting activities, and
- feeling a closer bond with their children who they felt were mixing more with other children and were better prepared for school.

There was less evidence of this generating group and community empowerment, whether through mutual support amongst parents and other family members,
parents’ community-oriented actions. Where community empowerment had worked it depended on the strength of programme ethos, how this interpreted empowerment in practice, and how its messages were communicated to the local community. Another influential factor was the development a core of involved parents as ‘community champions’ who could mobilize at the grass roots.

Let’s look at the key practices for empowerment in Sure Start Local Programmes. They included:

1. Transforming professional relationships with parents

The style of programme delivery was very influential in drawing parents into the services, in determining whether they felt recognized, valued, and in enhancing their trust, self-esteem and respect for themselves, service providers and other parents. Where parents felt valued and trusted, they were more likely to ‘bond’ and develop better mutual support systems. Important aspects included:

- Being welcoming, friendly, informal, facilitative and respectful.
- Being supportive and non-judgmental.
- Valuing parents’ own experience and knowledge.
- Encouraging parents to articulate their needs. This provided a better basis for consultation and for providing a responsive and participative service. It could also provide opportunities for discussion and dialogue about different needs. Talking about community needs could also reinforce a sense of common identity and belonging.

2. Providing responsive and accessible services

This involved

- Dedicated outreach work,

The chair of the local Bangladeshi Welfare Organisation explained about the cultural and domestic constraints some of the Bangladeshi women face in accessing local services: “You have to go out to them. You have to meet them where they are at, to empower them, you need to meet them, in their houses.../.. They live very local lives.”

- flexible times and location for activities,
- regular information in the community targeted at those with and without English language skills, created more accessible services.
Services that were responsive to local needs and were able to balance particular needs with general needs, that were sensitive to local political histories and cultural composition seemed to have greater success in involving parents.

3. Having a strong programme ethos

It was important that the ethos made sense to the experiences of parents, volunteers and staff. Where it did, then it tended to generate greater trust, reciprocity and greater capacity for individual and community self-determination. It was also helpful for staff empowerment. A strong ethos usually, but not necessarily, involved:

- combining the goals of personal development and community development;
- putting a premium on responsiveness, respect, inclusion, and involvement
- having a vision of alternative ways of developing the provider/user relationship,
- a holistic and preventative approach to problems and problem-solving,
- an interdisciplinary approach to professional expertise,
- a constructive rather than pathological approach to the capacities of parents and communities. For example, where Sure Start teams worked with such a view, where they held regular and well attended events celebrating parents’ achievements or the diversity of the community, they had a better chance of involving parents. But where staff stereotyped the community or ethnicities/groups within it, where they indirectly blamed them for not taking advantage of what Sure Start had to offer, they found parents less forthcoming
- being prepared to take risks and not simply be ‘target driven’
- having an ethos that connected to how parents experienced the community. It was better when staff themselves were embedded in the community. In areas of ethnic diversity needed workers who had knowledge of different cultural practices and incorporation into service provision and delivery and sensitivity as to how to avoid ethnic divisions

In summary, Sure Start made a difference to parents by making them feel

- respected and generating respect for others,
- having greater individual, and sometimes collective, voice to articulate needs and, in some cases, to pressure for change,
- developing greater self-determination to use resources and access services in the ways parents felt fit, and, again in some places, enhancing a sense of belonging and inclusion in local communities.

So what was important in Sure Start was providing a supportive environment which enables parents and communities to articulate their needs, and to create respectful dialogues especially when there are conflicting needs or perceptions of unfairness, and to apply this through a holistic approach and a robust ethos which makes sense to communities’ own sense of priorities.
Problems and Tensions

There were also problems and tensions. Some were immediate problems of delivery, and some were wider political problems. The immediate problems in some of the programmes were where parents felt that:

- too much was expected of them when they got involved or
- that Sure Start raised aspirations which could not be met;
- they felt that teenagers were more in need of resources and support than under 4s.
- Sometimes their lack of language and literacy skills was not fully appreciated;
- they felt labelled as ‘needy’ or ‘deprived’;
- sometimes those parents who had got involved became ‘cliquey’; and the barriers to accessing services were considerable - to do with timing, location, transport, mobility, waiting lists, costs and domestic demands.

And more generally

- The informal relationships between staff and users could create problems, often staff needed to be more objectively impartial in their work.
- There were also considerable difficulties in engaging with fathers as a group rather than just at an individual level.
- Some parents who had gained skills by working with Sure Start found they could not gain equivalent work in the world outside their community.
- Sometimes training up local people enabled them to leave an area which then lost their skills.
- More generally, because eligibility to use the programme was based on where you lived, it meant that people who really needed services could not access them because of where they lived.

There were also wider problems:

- Programme managers were concerned that targets set nationally were not always the same as local needs or did not fit with local culture. For example, valuing women as mothers made them more self confident as mothers and, in some areas, it reinforced their mothering as their ‘work’ and this did not necessarily lead to fathers’ involvement or in mothers’ wish to return to work.

However, what was interesting was that the ethics underlying this new approach to professional ways of engaging and empowering parents were similar to the ethics we found in the CAVA project on what matters to people in their relationships:

- openness,
- accessibility,
- informality,
- non-judgementalism,
- listening,
- respecting
• learning from parents’ own experiences.

As you can see there are similarities in these and the practical ethics I highlighted earlier from my research on parenting. And to add to this, in the another project I worked on involved interviewing senior representatives from twenty four national voluntary organizations who campaign and advise on parenting and partnering issues. We found that the majority looked to an ethos of welfare which emphasizes holistic, accessible, affordable user-centred support for parents and children and which places value on care as an activity, on interdependence and on state support for financial adequacy. This ethos is underpinned by notions of social justice. In this they placed special emphasis on valuing care and respecting childhood.

III Implications for Policies

It has to be said there is a bigger political tension between developments in social policies and both the practical ethics of care and the successful Sure Start approach. What do I mean? In the UK families policies and anti-poverty programmes emphasise parental responsibility and getting parents into work. And in this respect they are similar to policies within and across Europe which are framed by what is called a ‘social investment approach’. This involves amongst other things:

• An investment in the capabilities of human capital - mothers as workers and children as citizen-workers-of-the-future.
• This is to be achieved through supports for labour market activation, anti-poverty measures, and education.
• Targetting particular groups such as poor children who pose risk to the investment project.

These policies are encouraging a new normative family which appears, in some respects but not all, to leave the male breadwinner society behind. It revolves around the adult couple whose relationship is based on their parenting responsibilities, and whose priorities are rooted in work, economic self-sufficiency, education and good behaviour. The result of this approach has been contradictory: on the one hand, there has much greater recognition of the rights of parents to child care in order to enable mothers to work and also of work/care reconciliation policies. If we look across Europe over the last decade we can see that most countries have introduced measures of child care and parental leave for young children even those countries that were very traditional in their gender roles such as Germany UK, NL, Spain, Italy, and Portugal. On the other hand,
• it has been accompanied by policies which led to the commodification and marketisation of care provision – people having cash benefits to buy their care support in the private market, and in many countries that has meant it is often performed by those with least negotiating power and this is where migrant
labour steps in. (My current research has been looking at the development of migrant care work in Europe)

- Also, in so far as the rationale has been in terms of encouraging women’s employability then women have found themselves entering work in the more low paid and precarious areas of employment.
- Similarly, while disabled people’s claims for social inclusion in the labour market has been met to some extent but reframed within a fiscal concern to make work-test criteria stricter for disabled people in their eligibility to invalidity benefits.

Whilst this social investment approach is better than pure neo-liberalism it still, in my view, lacks a recognition of the ethics of fairness, attentiveness to the needs of others, mutual respect, trust, reparation, being non-judgmental, having a holistic approach which I have said seem to enable resilience, which facilitate commitment and lie at the heart of people’s interdependency.

To put this in a broader context, what I am arguing then is that the ethic of paid work on which many recent policy developments have been based, are not broad enough to meet the aspirations which people have around the quality of their relationships. The emphasis on work overshadows care; interdependency is subservient to economic self-sufficiency; and educational achievement focuses on children as workers-of-the-future rather than citizens-of-the-present. The practical ethics of fairness, attentiveness and so on which I have talked about cannot simply be transposed into the political arena but we can use them to develop a wider political ethic of care.

**Developing a Political Ethic of Care**

What do I mean by this?

At a basic level this means policies that provide *time, space and financial security* for people to balance their work and care responsibilities and for children to flourish are crucial. It is these that can help break down older inequalities and provide a context to enable people to meet care commitments. In practical general terms, these imply, instead of starting from how to fit care around work, policy-makers need to think much more as the parents we interviewed: how do we fit work around our care needs

- **time**: at work – rights to part-time/ flexible hours; shorter full-time hours; paid maternity/ paternity/ carer leave; job-sharing; annualized hours; unpaid sabbaticals

- **financial support**: for the costs of children; to help buy in care or an allowance to cover loss of carer’s wage; anti-poverty measures – guaranteed minimum income, etc.
• **services and practical support**: work-based and community-based childcare services, breakfast clubs, holiday clubs; home care services, cleaning, laundry, food services, domiciliary services, and residential services, advice centres, underpinned by principles of accessibility, affordability, variety, choice, quality, flexibility, respect and user involvement.

But more than this we need a **social environment of care** which would involve:

• The disability movement have been very influential in raising the issue of an environment that does not disable people. It is possible to apply these ideas to the needs of children, older people and carers – safe and accessible public spaces with accessible, and affordable transport; developing local strategies which integrate issues of work, time, care, space and welfare services, such as the ‘Time in the City’ projects in Modena, Italy. Strategies would involve building stronger local communities and local democracy to determine care needs which include both carers and children.

• Shifting from the focus on children and young people as ‘investment’ to respecting them as citizens of the present: education should be a site for children’s enjoyment of their social relationships and for creativity in order to enhance self-esteem, whatever their educational potential, as well as a place for gaining qualifications.

• Strategies to enhance paid care work - establishing and formalizing career paths into both care work and the household service sector; developing training for care work that is person-centred rather than task-oriented and based on the practical ethics of everyday life.

This would be a start to recognize the social value of care, but we also need a political principle about care which is equivalent to that of paid work. But it is necessary to argue also for the economic and political value of care. The ‘social investment’ approach I mentioned earlier prioritises those people – adults and children – who have productive potential, but what about those, such as severely disabled or older people, who have no productive potential? We need also to develop the arguments as to why it is necessary to invest in those who have no so-called ‘productive potential’. And that means understanding the importance of caring relationships in society:

• Care sustains and repairs society. Without it there is no society.

• Care is a universal practice and an ethic. We all provide and receive care at some level.

• The practice of providing and receiving care and support in conditions of mutual respect provides the learning of civic virtues: care is part of citizenship; it is a civic virtue.

The value of supporting care needs is that it is cumulative: the more people are supported the better they are enabled to provide care for others, and this promotes social solidarity. Social solidarity enhances general well being which in its turn enhances productivity, mental and physical health and self sustainability. In these terms, investment in quality care is a productive investment which over the long term
can generate wealth. That is part of the economic argument for providing support for care.

But this economic argument needs also to be supported with the arguments for the social and political value of care. Care ethics challenge those ethics that prioritise economics, paid work, self sufficiency, independence and individualism. The political principles behind the ethic of care are central to society – they’re about interdependence, mutuality, and human frailty rather than individualism and self sufficiency. In these ways, care is what all of us need time to give and receive. It is not about caring just for ourselves or our families – I am not talking about a return to traditional family life - but having the time to care for our communities, and, if we take an issue like migrant care labour seriously, to care about global inequalities.

This may be a big ask in the context of a financial crisis – in my own country the effects of the cuts in the public sector will be to create another 1.6M unemployed, and analysis has shown women will shoulder 72% of the costs of these cuts. So we need first to be very vigilant that the crisis does not push back what has been gained. But second, the financial crisis has exposed the limits of a society hell bent on the pursuit of profit without thought to the consequences of actions. Its dramatic failure should give us the opportunity to develop an imagination for a society which gives much greater priority to the ethics and practices of care.