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Social pedagogy-informed residential child care

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Abstract

This paper discusses the nature of the professional expertise needed in residential child care (RCC) in light of recent debate on social pedagogy. Focusing on the question of what kind of expertise is introduced in this debate, the paper deals with the contribution of social pedagogy to the professional development and professional competences of the RCC field, as well as the characteristics of professional knowhow in particular. The paper discusses also the research on how RCC expertise is constructed among RCC workers and how they demonstrate their expertise to other professional groups. The final aim is to outline a social pedagogy-informed profile of professional RCC competences. The purpose is to stimulate and enable multidisciplinary reflections about different kinds of expertise and shared responsibilities, towards developing an integrated framework for RCCs. Moreover, the paper emphasises the relevance of social pedagogy as a subject for training to promote RCC professionalism.

Keywords: social pedagogy; residential child care; competence; upbringing; child welfare

Introduction

Internationally the focus on developing residential child care (RCC) and its practices has increased; the positive impact of RCC is also increasingly indicated in current research (e.g. Francis et al., 2007; Smith, 2009; Ward, 2006; Gharabaghi and Groskleg, 2010; Cameron and Moss, 2011b). Furthermore, the usefulness of social pedagogy and its contribution to improving care for children and young people in RCC is reflected by many authors (Gharabaghi and Groskleg, 2010; Cameron and Moss, 2011b; Storø, 2013; Grietens, 2015; Janer and Ucar, 2017) and it seems that the tradition of social pedagogical work is well recognised. However, while multiple countries are embracing the concept of social pedagogy, the specific features of such a model and how to implement it are subjects for discussion. In international literature, the concept of therapeutic residential care (TRC) has been recently introduced, offering a starting point for developing a cross-national definition for all forms of RCC (Whittaker et al., 2016). However, this international consensus statement contains few references to social pedagogy and needs to be supplemented by social pedagogy-oriented RCC practices.

RCC has various treatment philosophies and tends to adopt 'generalist' knowledge, a 'milieu-based' orientation and a variety of pedagogical approaches. For example, the content of RCC work is defined as *ordinary homelike* (Laakso, 2009; Shealy, 2002; Ward, 2006; Whitaker et al., 1998), *therapeutic care* (Whittaker et al., 2015), as a form of *home education* (Heim, 2002; Gunder, 2011) featuring *parenting skills* (Gallagher and Green, 2013) and using methods of RCC workers'own choosing (Fyhr, 2001). This constitutes a *broad education and learning approach* (Cameron, 2016) in which daily life is the most important context of care and change (Grietens, 2015). Presumably, such approaches do not offer a clear explanation of the intentions and the contents of the practice; these attitudes presume (with little to no empirical evidence) that the pedagogical environment of residential care settings and their homelike milieu will automatically have a therapeutic effect that will also extend to adolescents' mental health problems (Ward, 2006). For instance, attempts to integrate young people living in RCCs into society (the core aim of RCC) are not formulated among RCC workers as a professional task entailing responsibility to teach citizenship skills as competencies for taking part in society. Instead, the focus is on individual children's deficiencies, pasts and problems (see Bryderup and Frørup, 2011, p. 94). With a comparatively slim evidence base in general and an unclear relation between treatment and practice relevant to effective RCC work (James, 2015a; Sallnäs, 2002), RCC expertise is questioned. Particularly in the UK, RCC practitioners are treated essentially as technicians whose task is to follow prescriptive procedures to produce predetermined outcomes (Cameron, 2016; Cameron and Moss, 2011a; Smith and Whyte, 2008).[1]

Surprisingly, in the current era in which expertise is appreciated and strict borders observed between professions, there has been no system requiring RCC staff to undertake specific training before entering their careers (Lindsay, 2002), and the pattern of preparation for RCC work still varies from country to country (Timonen-Kallio, 2018). Residential workers have been subsumed in different countries into different professional groups, such as residential social workers, social educators, nurses, guards, youth workers, counsellors, child care workers and social care workers, as well as paraprofessionals with limited training. Professionals of these varying types interpret the different approaches described above in many divergent ways. This has led researchers to describe RCC as a 'deprofessionalised field' (Sallnäs, 2009).

There is evidence that many RCC staff members are unable to specify their agency's theoretical approach and identify the methods used in the facility; in Germany a significant percentage could not relate their utilised practices to residential care literature (Gunder, 2011). Furthermore, it is indicated that 'pedagogical language draws on metaphors and implicit language' (Kristensen, 2011, p. 243). When we ask what care workers actually do, responses include guaranteeing a 'smooth everyday life', 'totality of work' and 'we do everything' (Timonen-Kallio et al., 2017; Timonen-Kallio, 2018). Particularly, staff lack knowledge about relevant interventions developed for and in the RCC context (Nunno et al., 2014). Interestingly, 'recent academic discussion in Norway concerning the professional approach taken in RCCs has identified the existence of "love", an idea rather at odds with most conceptions of professional expertise' (Lausten and Frederiksen, 2016; Thrana, 2016; Vincent, 2016). Similarly, in Finland the 'homelike' approach is a dominant ideology; constructing a confidential relationship between children and staff is seen as the main professional task (Laakso, 2009). Social pedagogical care practice is defined

vaguely as 'the art of being with children – an opportunity to create something special' (Eichsteller and Holthoff, 2012, p. 43).

When staff lack knowledge about relevant interventions and have an attitude that interventions and evidence-based practice are too far away from 'real' practice (James et al., 2013; Timonen-Kallio, 2012), practices may turn out to be *quasi-clinical* instead of professional educating and helping sessions; workers 'are left to improvise methods of care and treatment themselves' (Ward, 2006, p. 343). Interestingly, ten years ago only 60% of the RCC workers in the UK defined their work practices as pedagogical (Bengtsson et al., 2008). Furthermore, it is indicated that adaptiveness is too great while implementing social pedagogy perspectives in RCCs; it has lost its distinctive appeal and its impact has weakened. Social pedagogy is taken for granted as everyday upbringing, of the sort that parents do (Cameron and Petrie, 2009). This 'everydayness' and 'substitute parenting' have inhibited wider theorising about upbringing; workers act more like 'technicians', not like autonomous professionals (Cameron et al., 2016). Furthermore, less-trained RCC workers incorporate some elements of social pedagogy at random, implying that social pedagogy could be used alongside other approaches (Bengtsson et al., 2008). What these 'other approaches' are is unclear. In relation to professionalism, it is questioned that 'the unproblematised requirement that workers must provide children with parent-like love might show a tendency towards de-professionalisation of care work' (Neumann, 2016, p. 116). Also the concept of *keyworking* (e.g. Holt and Kirwan, 2012) gives an impression of semi-professional actions and intentions grounded in common sense. All in all, lack of clear RCC intentions might have a deleterious influence on professional identity among RCC workers and a negative impact on expectations about their professional competencies when collaborating with other welfare professionals and services (e.g. Timonen-Kallio et al., 2016; Timonen-Kallio, 2018).

The UK has for over a decade now witnessed an explosion of interest in social pedagogy and its applications in developing RCC practice (Bengtsson et al., 2008; Smith and Whyte, 2008; Cameron and Petrie, 2009; Cameron and Moss, 2011b; Berridge, 2013; Hatton, 2013; Cameron, 2016). Interestingly, the practice of developing RCC toward becoming a social pedagogy profession is termed in the UK as applying the 'European model' of social pedagogy (Hatton, 2013, VI; Cameron, 2016). Implementing social pedagogy as a broad education and learning approach has met some challenges. This problem and the need for a theoretical foundation are indicated in British research. In order to develop the quality of RCCs in the UK, social pedagogy standards have recently been summarised as a *threshold level of practice* 'that should be held in a person's heart and guide their way of living and working' (Social Pedagogy Standards, 2016). These standards represent an attempt to conceptualise the educational philosophy underpinning social pedagogy, but can be seen more as value-based commitments applying to a diverse workforce, rather than a social pedagogy-based conception of skills and competencies.

Given these considerations, it is obvious that social pedagogical expertise in RCCs is desired, and its potential in developing RCC quality is recognised. Nevertheless, the role of the social pedagogical perspective in RCCs and its theoretical concepts should be deepened and models should be enriched (Grietens, 2015; Storø, 2013; Wolf, 2016). RCC workers need a strong professional identity to collaborate with other professionals as well as a solid theoretical knowledge base concerning pedagogy. Focusing on the debate on social pedagogy-related professional competences in RCC, this paper provides insight into its potential to improve professional practice in RCC work. Social pedagogy is considered as a theoretical framework for educational and welfare work combining pedagogical and social intentions. Traditionally, social pedagogy is seen as a form of pedagogical thinking emphasising the educational potential of community (Hämäläinen, 2015). Perceiving education as an instrument of social interests, this paper takes advantage of this idea, regarding RCC as an educational environment with the potential to provide opportunities for educational dialogue, cooperation and participation.

Social pedagogical perspectives contributing to RCC

In the RCC context, particularly, it is important to emphasise that alongside the pedagogical aspect, social pedagogy has a strong social intention towards inclusion, out of RCC institutions. As set out above, social pedagogy has been introduced in many European countries as a discipline that deals

with the professional skills needed in residential child care. This may concern possible professional expertise common to professionals in educational and social fields (Hämäläinen, 2014). The basic idea of social pedagogy is to promote people's social functioning, inclusion, participation, social identity and social competence as members of society, dealing 'with the process of human growth that ties people to the systems, institutions and communities that are important to their well-being and life management' (Hämäläinen, 2003b, p. 76). Children and youths are not reduced to their problems orhe experiences they have had in the past; 'a social pedagogical approach may normalise the lives of children with identified mental health or behavioural needs, reconnecting them with themselves, their environment and society' (Grietens, 2015, p. 293).

There are reasons to view RCCs as a particular field of professional activities benefiting from social pedagogy-informed expertise. On the one hand, social pedagogy has been developed as an individual profession or a particular professional field grounded in designated professional knowhow, and on the other hand, it has been introduced as a particular form of professional expertise relevant for many professions in different welfare and educational work contexts. In the latter case, social pedagogy is viewed as a discipline and a branch of studies for several professions instead of one particular profession only. Social pedagogy has been seen as a wider branch of expertise relevant in several – even all – educational and social professions (Hämäläinen and Nivala, 2015). As a particular tradition of educational thinking and theory building, the term refers both to a general theory of education and to a theoretical framework for professional practice. In the RCC context, it may make sense to see social pedagogy-informed expertise as relevant across the entire composition of RCCs, which consist of different professional groups, instead of limiting its presumed applicability to one profession. However, there are traces of focusing on both perspectives, for example in terms of communication skills (Petrie, 2011), conceptual foundations (Eichsteller and Holthoff, 2011) and the theory practice relationship in social pedagogical expertise, values and methods included (Madsen, 2006; Storø, 2013).

Social pedagogy has been characterised by heterogeneity and ambiguity (Niemeyer et al., 1997) because the term has been developed in the midst of different traditions, policies and practices and distinguished different contexts (Hämäläinen, 2015). Due to this, it is rather difficult to define how the term relates to RCCs and to the conception of professional competences. In general, 'social pedagogy is a holistic term reflecting ethical principles and humanist values that may refer, for example, to a tradition in educational philosophy, a framework of community development activities, and an orientation in social and educational work' (Hämäläinen, 2018, pp. 166–7). It is an umbrella concept for professional activities across various fields of education and care, RCC included.

The understandings of social pedagogy in relation to different professions embody national policies and professional systems shaped by country-specific social, cultural and political factors (Lorenz, 2008; Berridge, 2013). This fact has been considered also in the debate on social pedagogy-informed professional competences in the RCC context (Cameron and Moss, 2011a). Except national paradigms, policies and regulations of professional practices, the practice procedures express prevailing conceptions of the nature of social pedagogy-related professional expertise. In the field of social work, for example, there are reasons to consider how social pedagogy, as a branch of educational philosophy, may contribute to professional activities (Hämäläinen, 2003a). Social pedagogy is described as a form of social work that uses education (Walther, 2012). This perspective is relevant in conceptions concerning social pedagog-related expertise in the professional domain of educational and welfare work in RCCs too.

Social pedagogy has been built up as a distinct profession with the associated professional title of social pedagogue, particularly in Denmark and Norway. In Finland, social pedagogy is introduced as an academic discipline based on a range of theoretical underpinnings and consisting of different focus areas such as citizenship education, activity and community pedagogy, socio-cultural animation and pedagogical methods related to the different contexts and needs of various target groups, including age groups covering the whole lifespan (e.g. Hämäläinen, 2012; Hämäläinen, 2014). Because of the multifaceted nature of the concept of social pedagogy, it is important to specify in which sense the term is used in each case. In the debate on social pedagogy as related to RCC this has not necessarily been done. As a tradition within educational philosophy, social pedagogy is about educational thought affecting all of society by

considering the position and role of education from ethical, political and pedagogical points of view, 'as preconditions of social and cultural development' (Hämäläinen, 2018, p. 168). This has not necessarily been the perspective in which the term has been used in debate around the professional competences needed in RCC, thus deeper analysis of the concepts 'social' and 'pedagogy' is needed to reflect the usefulness of social pedagogy particularly in the RCC context.

Therefore, it makes sense to strive to clarify the possible contributions of social pedagogy to the RCC field. The fundamental question of this mission is how social pedagogy, as a tradition in educational philosophy and a framework, provides the RCC field with the necessary professional knowhow, skills and methods. This paper intends to construct a social pedagogy-informed model of RCC work reflecting the scholarly debate on possible social pedagogy-related professional competences. Attempts to implement social pedagogy principles into practice are especially important since some critics opine that, although 'social pedagogy is said to be a practically oriented expertise, the practice is not sufficiently present in its theoretical foundation' (Storø, 2013, p. 23); theory and practice are not in dialogue.

Modelling social pedagogy-informed professional RCC work

Social pedagogy and its contribution to RCCs are portrayed mostly positively, as a concept grounded in good, reliable relationships between a child and RCC worker. Analysing the field's 'social' intentions and interventions has received less attention. In this section of the article we attempt firstly to illustrate the aspirations for RCC work as homelike 'ordinary' parenting (care) and as professional RCC upbringing (education) in order to discover 'hidden' and 'improvised' RCC practices. After conceptualising these two orientations (Table 1), a deeper analysis of professional RCC expertise will be constructed into a social pedagogy-informed RCC competence profile (Figure 1).

Table 1   Aspirations for RCC practice in homelike parenting (care) and institutional upbringing orientations.

ORIENTATION	HOMELIKE CARE – common sense; *generalist*	PROFESSIONAL UPBRINGING – knowhow; *expertise*
	Parenting skills	**Professional competencies**
Child centeredness	build pedagogical relationships; every - child is unique positive self-image	- build pedagogical relationships; every child is unique *with special needs* positive self-image
Everydayness; living together	- family life, family routines - live together with children	- intervene between children's lifespace and institutional space - build a specialised everyday life with group reflection - maintain quality of everyday life; safe milieu
Scope	'*whole child*' - no division of work or responsibilities - everybody is doing everything	'*whole child*' - interprofessional collaboration - interagency teamwork - integrated care plans
Role as upbringer	- create relation-oriented encounter - 'good model behaviour' - substitute parent - immediate response	- create relation-oriented encounter - key worker responsibilities - upbringer on behalf of society - long-term intentions - advocacy
Knowledge base	- common sense - head-heart-hand - ordinariness - consulting experts	- expert in social pedagogy - a working knowledge of associated disciplines - intervening between social, upbringing, therapy, (mental) health knowledge
Working environment, RCC culture	- home, homelike, 'cosiness' - private family	- public institution - institutionalised state care
Interventions and methods	- no systematizsd use; techniques - tools and methods are chosen haphazardly - no care plans put down systematically on paper	- selecting the appropriate intervention to meet the pedagogical aims - variable methods in use for gathering child information, need assessing, analysing and reporting
Autonomous worker, on-the-job ability, personal judgements	- own life experiences - spontaneous and private reasoning	- informed actions guided by values and grounded in theory - theoretical and practical tools for careful assessment - updating own professional development, 'professional control'

The concepts of homelike, ordinary and 'everydayness' suggest a positive environment for growing up. It is indicated in RCC research and widely agreed upon that this kind of context itself is therapeutic and rehabilitative. However, neither of these concepts resonates well with the special needs of the children living in residential settings, nor the explicit competences required for the workers. Thus, as a matter of fact, there is no 'basic' or 'regular' RCC care. Indeed, the concept 'ordinary' is something that needs to be developed further and built upon (Ward, 2006; Storø, 2013). Indeed, both 'homelike' and 'professional' constitute together a particular professional entity, as will be presented here.

There is no 'basic' or 'regular' RCC care. Indeed, the concepts of 'ordinary' is something that needs to be challenged and examined as well as different versions of the 'special' residential care (Ward, 2006; Storø, 2013). There is a dire need to analyze the RCC work as homelike 'ordinary' parenting (care) and as 'professional' RCC upbringing (education) to discover the 'hidden' and 'improvised' RCC practices. In Table 1, the aspirations for RCC workers responsibilities and tasks are structured and mirrored in homelike 'ordinary' parenting (care) and in institutional RCC upbringing orientations to contemplate the difference between (corporate) parental skills and professional competencies. Competencies define the requirements for success on the job in broader, more inclusive terms than skills do; they are made of the right mix of skills, knowledge, values and result an autonomous worker with on-the-job ability.

To strengthen the interconnection between social pedagogy theory and RCC practice, the 'professional upbringing' column of Table 1 is constructed further as RCC FAN (Figure 1), a social pedagogy-informed competence profile. The profile exploits and re-constructs the definitions and contents of available RCC models and previously determined knowhow for RCC (Madsen, 2006; Fattore et al., 2009; Cameron and Moss, 2011b; Eichsteller and Holthoff, 2012; Storø, 2013; Holden et al., 2015; Cameron, 2016). All these models make their own contribution to elucidating the elements, ingredients and competencies of the RCC field. The competence profile has also been influenced by the list of social pedagogical standards (Social Pedagogy Standards, 2016) in the UK and Australia (Minimum Qualification Strategy for Residential Care Workers, 2017) as well as a framework from the USA with a comprehensive list of 'task statements' (60) for RCC practitioners (Shealy, 2002). Moreover, RCC FAN is based on a longer research project by Eeva Timonen-Kallio where the aims were firstly to investigate how RCC expertise (orientation, methods, language, concepts) is constructed among RCC workers and how they demonstrate their expertise to other professional groups, and furthermore to see how these partner professionals incorporate shared expertise and search for possible integrated approaches (Timonen-Kallio, 2012; Timonen-Kallio et al., 2016; Timonen-Kallio, 2018).

The competence profile aims to summarise the social pedagogy-related debate on RCCs and conceptualise social pedagogy-informed RCC according to areas of competencies, responsibilities and tasks for RCC workers. It is an attempt to improve the conformity around core RCC practices. This model suggests six possible complementary professional competencies to address social pedagogy-informed RCC practice. The competence profile attempts to offer a layout for RCC practice. It is meant to be seen as 'systematic', but not too 'programmatic', with recipes or manual-based interventions (Storø, 2013; Gilligan, 2015; Jakobsen, 2015; Rothuizen and Harbo, 2017).

The social pedagogy-informed profile of RCC competencies is introduced in Figure 1.

It includes competences to

- educate for community through community; build an extra-familiar growing environment with group reflection; maintain a safe homelike milieu
- promote participation in daily life by encouraging children's activity and participation (e.g. school, hobbies, domestic work, conversations)
- plan and 'keep on track' children's individual integration into society via wider networks
- implement a variety of education-related interventions developed specifically for/in RCC
- collaborate in interagency teams; see children's multiple needs in context of an integrated care plan
- reflect relationship with theory, context and practice; develop RCC practice and personal expertise
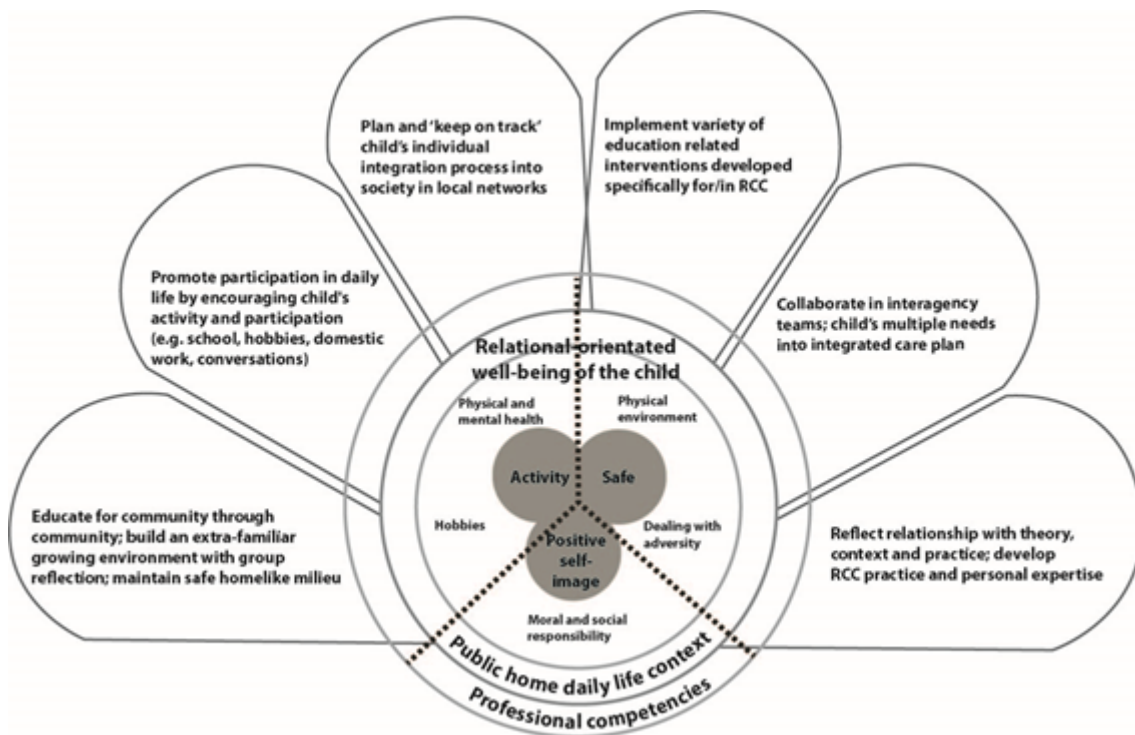
Figure 1 RCC FAN – a social pedagogy-informed RCC competence profile.

The inner circle in the RCC FAN describes the RCC as a homelike ordinary context for practicing social pedagogy. The core element in RCC work – as emphasised in all RCC research – is *relation orientated encountering,* in which an RCC practitioner is in service of growth; creating educational, emotional and trustful relationships with an attitude that every child is unique with special needs. This relationship differs from the parental relationship ('as parents do') and brings a professional layer into a relationship where the well-being of the child is quite often worked out 'throughout the conflicts' (Kleipoedszus, 2011). Social pedagogy-informed professional RCC work requires skills to develop a child's overall well-being: to cultivate a child's positive self-image, create a safe growing environment and arrange meaningful activities (Fattore et al., 2009; Grietens, 2015). It means creating an RCC living environment as a *learning* environment for children who constantly learn and develop, and seizing the opportunity to reflect on how they perceive and experience themselves, their current living situation and their imagined future – plus how they interpret their past, and especially how they have got where they are (Wolf, 2016). The ethical orientation of social pedagogy guides the professional to reflect before, in and on action, using theories, concepts and methods as guides to child-centred practice (Rothuizen and Harbo, 2017).

A coherent definition of social pedagogical encountering is as follows:

The starting point for any pedagogical intervention is a relationship where you as a pedagogue can get a better understanding of the other person. This may result in a relationship which will also be perceived by the other person as valuable. By seeing the other person's individuality and by offering community, the other person also may become more motivated to seek a common meaning with the pedagogue. There is always the possibility of conflict, different wills and different opinions, but when there is a relationship and when the participants in this relationship experience that they are respected and their feelings and thoughts matter, there is a better chance for solving differences and disagreements and for finding a modus vivendi, a mutually acceptable way forward (Rothuizen and Harbo, 2017, p. 21).

The second circle in the RCC FAN describes the RCC as an institutional public home context, an extra-familiar environment with many changing adults. Multiple combinations of relationships during

the day require a certain mix of skills and knowledge for executing practice. The qualified worker is able to intervene between homelike ordinary relationships with children and institutional reflections and assessment with colleagues and co-workers. The second circle, the institutional layer, is conceptualised into six competences (flaps) which together form the fan. Each unit of competency will be described in detail below.

A professional RCC programme takes into account different aspects of the client's life and problems and therefore uses many kinds of dialogue-based, activity-based and community-based **(1) methods and interventions** in everyday practice,[2] where 'the pedagogical relation precedes educational methods' (Cameron et al., 2016, p. 165; see also Gharabaghi and Groskleg, 2010; Storø, 2013). It is important to note that 'if the interventions and methods are not consciously elected and systematically used when building an education process, working is only *practice*' (Storø, 2013, p. 40), not grounded in conscious aims and intentions. Instead, a professional worker has the competence to apply methods and interventions while being sensitive and responsive to the different needs of the children; the practitioner chooses appropriate ways of working according to his or her professional judgement. Then, interventions form a relevant and important component of professional practice and are evidence of social pedagogical expertise; intervention is the main term used to illustrate what an RCC worker does (Storø, 2013). Obviously, interventions need to be developed specifically for/in RCCs and are required by the official task of the institution (Nunno et al., 2014). Adequate resources also need to be reserved for appropriate training and support for staff (MacCuire, 1999; James et al., 2013; Harder and Knorth, 2015). Nevertheless, it is important to note that, as a scientific discipline, social pedagogy is not reducible to a fixed set of methods and techniques but provides the debate upon social and educational activities in RCCs with scientific reflection, knowledge production and theory building. It connects the professional development of RCCs to the tradition of social pedagogy, including key concepts, approaches, readings and policies to implement interventions and methods as one necessary competency of social pedagogical professionalism.

The importance of safety, activity and participation and the way these factors contribute to a sense of self are identified as domains relevant to children's wellbeing (Fattore et al., 2009). Particularly when working with youth in a context of 'everydayness', upbringing work means treating every activity and routine as a valuable educational opportunity, incorporating everyday domestic tasks like cooking and cleaning into the educational process. Simultaneously, it means a conscious effort to involve children in all decisions, big and small, about their lives. Furthermore, upbringing work means discussing regularly their ambitions for the future to empower them on their pathway to adulthood. The concept of the *creative moment* (Holden et al., 2015) encompasses well the worker's desire and competence to design a safe environment for growth and to create as many positive moments as possible, each and every day. More precisely, everything the staff does must be understood as an intervention to **(2) educate for community through community**; activation, boundary-setting, structuring everyday life, conversations, meals, managed group processes, excursions and so on (Storø, 2013, pp. 102–3).

The main focus in social pedagogy-informed RCC is 'a social aspect', a competence to **(3) promote inclusion and participation in children's everyday life**, to keep youths in their families and communities and work against *institutionalisation* (Petrie et al., 2006, p. 33). When pedagogues act as 'upbringers' on behalf of society, social pedagogy is about the relationship of the individual to society, and a pedagogic method of working in RCC is about how to achieve the integration of disadvantaged young people into the wider society. A continuous long-term intention to create opportunities for agencies across different contexts to open and benefit all the advantages the welfare services society has as to offer, to plan and 'keep on track' a child's smooth individual **(4) integration process** into modern society, where the focus is on growing a competent citizen (Rothuizen and Harbo, 2017, p. 11).

A looked after child is likely to have needs that span different agencies (health, education, social work, child protection services etc.) and that can be met only through effective interagency working. Thus there is an urgent demand for closer collaboration between these welfare sectors in order to ensure effective RCC interventions and better outcomes for a child. This collaboration between sectors is highly recommended, encouraged and supported by law in Nordic countries. As a matter of fact, at the core of social pedagogy lies the competency of **(5) interprofessional collaboration with other care**

systems and partner professionals to ensure overall wellbeing and integrated guidance and support on a child's pathway into adulthood. An example would be the competency to create coordinated multiagency collaboration between child protection and mental health services and to incorporate also other expertise and fields of knowledge (e.g. neuroscience) to meet the multiple needs of the children. In particular, working together towards an agreed integrated care plan is a tool to prevent placement change and guarantee continuity of care as well as stable relationships (Fawley-King and Snowden, 2012). However, working together towards integrated care plans is difficult, because RCCs are not currently seen as a necessary part of an organised system of health care, e.g. in Finland (Kiuru and Metteri, 2014; Timonen-Kallio et al., 2016).

As a matter of fact interagency working is challenging across Europe because there are persistent divergences in the status between mental health expertise and RCC 'upbringing' knowhow, as well as unrealistic expectations of the *other* system's facilities to offer help and support for youths (Timonen-Kallio, 2018). In terms of respecting the contribution of others, it seems that mental health practitioners' attitude in collaboration focuses slightly on delivering mental health (psychiatric) knowledge and expertise into RCCs (Timonen-Kallio et al., 2016). Thus, the competency to collaborate in interagency teams requires RCC practitioners to offer a clear conceptional and theory-based connection in order to discuss other eventual interpretations of the children's problems. This is also important in order to share responsibilities so as better to incorporate separate areas of expertise into integrated care plans. Surely good record keeping and documentation is a key part of interagency collaboration.

Apart from mental health partner professionals there are other agencies (education, social services, leisure, youth justice) as resources that will all potentially have a role to play in supporting RCC workers in their upbringing work. Actually interagency working has many outcomes for professionals (e.g. in terms of improved understandings of each other's role, greater willingness to share information, better insights into how a wider range of services can be mobilised to support children, and greater job satisfaction), and there are also positive outcomes for other agencies (e.g. reduction in duplication, achievement of economies of scale, better connection to local communities) (Statham, 2011). In relation to the outcomes for a child, RCC workers are expected to have the capacity to advocate as 'a navigator' to find the most suitable help and support for a child across a range of service systems (Ungar et al., 2014). Moreover, networking competence with theoretical know-how is important, because it seems that 'less-trained workers are more likely to suggest seeking external help and advice or to refer the child to an external agency' (Petrie et al., 2006, p. 113). Of course, parents are also main 'negotiators' of care plan content and represent other kinds of co-working and encountering challenges for practitioners; to facilitate the maintenance of the family bond is one element of the competency of interagency partnership working.

Seen from a social pedagogy point of view, the **(6) reflective relationship with theory, context and practice** is a hallmark of the competent RCC practitioner; such a practitioner can relate their theoretical understanding to practical situations as well as draw on their self-experience (Eichsteller and Holthoff, 2012). Reflection supplies tools for a worker to interpret and respond to the child's behaviour; thus behaviour is treated as a valuable opportunity to incorporate pedagogic interventions into the upbringing process (Ward, 2006; Storø, 2013). It is indicated that social pedagogy-orientated RCC workers see different professional 'layers' (Kleipoedszus, 2011) and recognise more educational responsibilities towards children than less trained practitioners (Boddy, 2011). Practicing social pedagogical RCC requires competent reflective professionals, particularly because practitioners organise their own practice *as it is happening* (Storø, 2013, p. 91) without being able to know beforehand whether they are doing the right thing (Rothuizen and Harbo, 2017). Indeed, competent RCC practitioners are able to alternate in daily life between a spontaneous, ordinary, homelike parenting (care) context with children and a professional, integrated upbringing context with their colleagues and partner professionals. A solid knowledge base also guarantees that the interventions, as an essential part of professional RCC, are developed and applied properly in a social pedagogy framework.

Discussion

In this paper the professional expertise needed in RCCs has been discussed in the light of recent social pedagogy-related debate. These reflections are conceptualised into a social pedagogy-informed profile of possible professional competences as RCC FAN, a map for applying social pedagogy to practice – a practice that emphasises 'the core aims of the educating response where social and educational perspectives and interests meet' (Hämäläinen and Nivala, 2015). The competence profile can be seen as an important contribution to facilitating analyses and interpretations of evidence of social pedagogy-informed RCC. It is also a tool to monitor and evaluate how RCC settings implement social pedagogy in their professional intentions, practice and interventions. The RCC FAN is not constructed with the intention of arguing that all ambiguities and possible conflicts in RCC work can be avoided or solved only by implementing a social pedagogical orientation. Furthermore, especially in situations with a 'diversity' of competences and where no single professional group dominates the residential field nor staff training, it is challenging to advance the potential of social pedagogy. Nevertheless, while 'it is difficult making any certain core care aspects in RCC auditable and insuring their impact' (Pålsson, 2018, p. 61), the presented competence profile aggregates the variety of components of RCC upbringing and clarifies RCC workers' own professional territory. Having a common understanding of actions and professional tasks enables RCC workers tobetter incorporate partner professionals' expertise in order to create and deliver integrated care plans. Nonetheless, research into the evidence base underpinning social pedagogy-informed practice – research on what works – is essential to improving professional action and quality in RCCs.

There are differences within and across countries and welfare systems in how resources for RCCs are distributed and what level of worker expertise and training is required in RCCs. Professionals in the Nordic child welfare system are involved in many ways in social pedagogical activities and social pedagogical programmes. Furthermore, BA-level training among most RCC practitioner,s linked with the Nordic comprehensive system of child welfare services with a child-focused orientation, characterised by the linking of children's overall development and well-being objectives with a 'child-friendly' society, provides a particular context for developing social pedagogy-informed expertise for application across the whole context of RCCs. The present RCC FAN competence profile may bridge the diversity of possible approaches in RCCs as an integrated framework so that a similar understanding of professional intentions can be shared across a diverse workforce with different disciplinary traditions.

Notes

[1] It is important to note that RCC plays a more significant role in services in most other European countries compared to the UK; half of all placements for looked-after children were in residential settings, compared to 9% in the UK. In other countries, younger children live in residential homes; it is often a placement of first choice selected for its therapeutic benefits, and long stays over many years are possible (Berridge, 2013). Placement rates in the Nordic countries are the highest in Europe (Jakobsen, 2015).

[2] For example 'Umbrella Skills for Life', which was originally developed in the EU-funded Leonardo da Vinci project (1997–2000) with partners from Finland, Germany, the Netherlands, Sweden, and Scotland. The Umbrella was developed by RCC workers themselves to facilitate and systematise their educative work in all domains of the child's life (Timonen-Kallio, 2012). The Umbrella Method consists of three different parts: a workbook, child's portfolio and handbook for the RCC worker. In the workbook there are six sections: about myself, social life, school, training and work, at home and money. The workbook is an instrument for equipping children with skills for everyday life and a resource for discussing and reflecting on the child's life situation and building positive self-esteem. It is a tool for viewing future goals and a method to support the educative process of leaving care. The child's portfolio records progress and achievements. The handbook is a guide for care workers to use in applying the workbook in the social pedagogical framework. The Umbrella was updated in 2010. The Finnish version is available at http://julkaisut.turkuamk.fi/umbrella_esimmateriaali.pdf.

Declarations and conflict of interests

The authors declare no conflict of interests.

References

Bengtsson, E., Chamberlain, C., Crimmens, D., & Stanley, J. (2008). Introducing social pedagogy into residential child care in England. An evaluation of a project commissioned by the Social Education Trust (SET) in September 2006 and managed by the National Centre for Excellence in Residential Child Care (NCERCC).

Berridge, D. (2013). Policy transfer, social pedagogy and children's residential care in England. *Child & Family Social Work*, *21*, 76–84. [CrossRef]

Boddy, J. (2011). The supportive relationship in 'public care'. The relevance of social pedagogy. In C. Cameron & P. Moss (Eds.), *Social pedagogy and working with children and young people. Where care and education meet* (pp. 105–24). London: Jessica Kingsley Publisher.

Bryderup, I. M., & Frørup, A. K. (2011). Social pedagogy as relational dialogic work: Competencies in modern society. In C. Cameron & P. Moss (Eds.), *Social pedagogy and working with children and young people. Where care and education meet* (pp. 85–103). London: Jessica Kingsley Publisher.

Cameron, C., & Petrie, P. (2009). Social pedagogy and its prospects in England's children's services. *European Journal of Social Education*, *16/17*, 49–61.

Cameron, C., & Moss, P. (2011a). Social pedagogy: Current ynderstandings and opportunities. In C. Cameron & P. Moss (Eds.), *Social pedagogy and working with children and young people. Where care and education Meet* (pp. 7–32). London: Jessica Kingsley Publisher.

Cameron, C., & Moss, P. (Eds.) (2011b). *Social pedagogy and working with children and young people. Where care and education meet*. London: Jessica Kingsley Publisher.

Cameron, C. (2016). Social pedagogy in the UK today: Findings from evaluations of training and development initiatives/pedagogía social en el reino unido hoy: Resultados de análisis de formación e iniciativas de desarrollo/pedagogia social no reino unido hoje: Achados desde avaliações de formação e desenvolvimento de iniciativas. *Pedagogía Social. Revista Interuniversitaria*, *27*, 199–223.

Cameron, C., Reamer, D., & Smith, M. (2016). Towards a theory of upbringing in foster care in Europe. *European Journal of Social Work*, *19*(2), 152–70. [CrossRef]

Eichsteller, G., & Holthoff, S. (2012). The art of being a social pedagogue: Developing cultural change in children's homes in Essex. *International Journal of Social Pedagogy*, *1*(1), 30–45. [CrossRef]

Eichsteller, G., & Holthoff, S. (2011). Conceptual foundation of social pedagogy: A transnational perspective from Germany. In C. Cameron & P. Moss (Eds.), *Social pedagogy and working with children and young people. Where care and education meet* (pp. 105–24). London: Jessica Kingsley Publisher.

Fattore, T., Mason, J., & Watson, E. (2009). When children are asked about their well-being: Towards a framework for guiding policy. *Child Indicators Research*, *2*(1), 57–77. [CrossRef]

Francis, J., Kendrick, A., & Pösö, T. (2007). On the margin? Residential child care in Scotland and Finland. *European Journal of Social Work*, *10*(3), 337–52. [CrossRef]

Fawley-King, K., & Snowden, L. R. (2012). Relationship between placement change during foster care and utilization of emergency mental health services. *Children and Youth Services Review*, *34*, 348–53. [CrossRef]

Fyhr, G. (2001). Residential institutions requesting supervision: A theoretical analysis of an empirically studied problem. *Child and Family Social Work*, *6*(1), 59–66. [CrossRef]

Gallagher, B., & Green, A. (2013). Outcomes among young adults placed in therapeutic residential care as children. *Journal of Children's Services*, *8*(1), 31–51. [CrossRef]

Gharabaghi, K., & Groskleg, R. (2010). A social pedagogy approach to residential care: Balancing education and placement in the development of an innovative child welfare residential program in Ontario, Canada. *Child Welfare*, *89*(2), 97–115. [PubMed]

Gilligan, R. (2015). Foreward. In J. K. Whittaker, F. del Valle & L. Holmes (Eds.), *Therapeutic residential care for children and youth: Developing evidence-based international practice* (pp. 11–20). London: Jessica Kingsley Publishers.

Grietens, H. (2015). A European perspective on the context and content for social pedagogy in therapeutic residential care. In J. Whittaker, J. F. Del Valle & L. Holmes (Eds.), *Therapeutic residential care for children and youth. Developing evidence-based international practice* (pp. 288–301). London: Jessica Kingsley.

Gunder, R. (2011). *Praxis und methoden der heimerziehung: Entwicklungen, veränderungen und perspektiven der stationären erziehungshilfe [Practice and methods of home education: Developments, changes and prospect of residential child care]*. Freiburg: Lambertus Verlag.

Harder, A., & Knorth, E. J. (2015). Uncovering what is inside the 'black box' of effective therapeutic residential youth care. In J. K. Whittaker, J. F. del Valle & L. Holmes (Eds.), *Therapeutic residential care for children and youth: Developing evidence-based international practice* (pp. 217–28). London: Jessica Kingsley.

Hatton, K. (2013). *Social pedagogy in the UK. Theory and practice*. Dorset: Russell House Publishing Ltd.

Holden, M. J., Anglin, J. P., Nunno, M. A., & Izzo, V. (2015). Engaging the total therapeutic residential care program in a process of quality improvement. Learning from CARE. In J. K. Whittaker, J. F. Del Valle & L. Holmes (Eds.), *Therapeutic residential care for children and youth. Developing evidence-based international practice* (pp. 301–13). London: Jessica Kingsley.

Heim, R. (2002). Family education as a profession. New impulses for an understanding of the profession and for the qualification of educational staff in a family environment. In P. M. van den Berg, E. J. Knorth, F. Verhij & D. C. Lane (Eds.), *Changing care. Enhancing professional quality and client involvement in child and youth care services* (pp. 63–72). Amsterdam: SWP Publisher.

Holt, S., & Kirwan, G. (2012). The 'key' to successful transitions for young people leaving residential child care: The role of the keyworker. *Child Care in Practice*, *18*(4), 371–92. [CrossRef]

Hämäläinen, J. (2003a). Developing social pedagogy as an academic discipline. In A. Gustavsson, H.-E. Hermansson & J. Hämäläinen (Eds.), *Perspectives and Theory in Social Pedagogy* (pp. 133–53). Göteborg: Daidalos.

Hämäläinen, J. (2003b). The concept of social pedagogy in the field of social work. *Journal of Social Work*, *3*(1), 69–80.

Hämäläinen, J. (2014). Developing social pedagogy as an academic discipline and professional practice: Learning from the Finnish experience. *Journal of the Research on Lifelong Learning and Career Education*, *10*, 53–68.

Hämäläinen, J. (2015). Defining social pedagogy: Historical, theoretical and practical considerations. *British Journal of Social Work*, *45*(3), 1022–38. [CrossRef]

Hämäläinen, J. (2018). Social pedagogy. In N. Thompson & P. Stepney (Eds.), *Social work theory and methods. The essentials* (pp. 166–79). New York and London: Routledge.

Hämäläinen, J., & Nivala, E. (2015). Social pedagogy. In L. H. Meyer (Eds.), *Oxford bibliographies in education*. New York: Oxford University Press.

Jakobsen, T. (2015). Varieties of Nordic residential care. A way forward for institutionalized therapeutic interventions? In J. K. Whittaker, J. F. del Valle & L. Holmes (Eds.), *Therapeutic residential care for children and youth. Developing evidence-based international practice* (pp. 87–97). London: Jessica Kingsley Publishers.

James, S. (2015a). Evidence-based practice in therapeutic residential care. In J. K. Whittaker, F. del Valle & L. Holmes (Eds.), *Therapeutic residential care for children and youth developing evidence-based international practice* (pp. 142–55). London: Jessica Kingsley Publishers.

James, S. (2015b). Commentary. In J. K. Whittaker, F. del Valle & L. Holmes (Eds.), *Therapeutic residential care for children and youth developing evidence-based international practice* (pp. 314–15). London: Jessica Kingsley Publishers.

James, S. (2017). Implementing evidence-based practice in residential care – How far have we come? *Residential Treatment for Children & Youth*, *34*(2), 155–75.

James, S., Alemi, Q., & Zepeda, V. (2013). Effectiveness and implementation of evidence-based practices in residential care settings. *Children and Youth Services Review*, *35*, 642–56. [CrossRef] [PubMed]

Janer, A., & Ucar, X. (2017). Analysing the dimensions of social pedagogy from an international perspective. *European Journal of Social Work*, *20*(2), 203–18. [CrossRef]

Kiuru, K. E., & Metteri, A. (2014). Miten lastensuojelun ja nuorisopsykiatrian välinen raja rakentuu palvelujärjestelmässä? [How is the borderline between child protection and youth mental health services constructed in the service system?]. In A. Pohjola, M. Laitinen & M. Seppänen (Eds.), *Rakenteellinen sosiaalityö. Sosiaalityön tutkimuksen vuosikirja* (pp. 162–90). Washington, DC: United Press.

Kleipoedszus, S. (2011). Communication and conflict: An important part of social pedagogic relationships. In C. Cameron & P. Moss (Eds.), *Social pedagogy and working with children and young people. Where care and education meet* (pp. 125–40). London: Jessica Kingsley Publisher.

Knorth, E. J., van der Bergh, P. M., & Verheij, F. (2002). Professionalization and participation in child and youth care; two sides of one coin? In E. J. Knorth, P. M. van der Bergh & F. Verheij (Eds.), *Professionalization and participation in child and youth care. Challenging understandings in theory and practice* (pp. 1–23). Burlington, VT: Ashgate.

Kristensen, O. S. (2011). The institutional set-up: An analysis of social pedagogues' accounts of treatment in everyday practice. *European Journal of Social Work*, *4*(2), 229–45. [CrossRef]

Laakso, R. (2009). *Arjen rutiinit ja yllätykset – Etnografia lastenkotityöstä. [Every day routines and surprises – An ethnographic study of residential child care work]*. Tampere: Tampere University.

Lausten, M., & Frederiksen, S. (2016). Do you love me? An empirical analysis of the feeling of love amongst children in out-of-home care. *Scottish Journal of Residential Child Care*, *14*(3) and *International Journal of Social Pedagogy*, *5*(1), 90–103. [CrossRef]

Lindsay, M. (2002). Building a professional identity: The challenge for residential child and youth care. In E. J. Knorth, P. M. van der Bergh & F. Verheij (Eds.), *Professionalization and participation in child and youth care. Challenging understandings in theory and practice* (pp. 75–86). Burlington, VT: Ashgate.

Lorenz, W. (2008). Paradigms and politics: Understanding methods paradigms in an historical context: The case of social pedagogy. *British Journal of Social Work*, *38*(4), 625–44. [CrossRef]

MacCuire, J. (1999). *What works: Reducing reoffering. Guidelines from research and practice*. Chichester: Wiley.

Madsen, B. (2006). *Socialpedagogik. Integration och inklusion i det moderna samhället*. (P. Larson, Trans.). Lund: Studentlitteratur.

Minimum Qualification Strategy for Residential Care Workers in Victoria. (2017). Community Services Programs and Design Branch Out of Home Care Unit. State of Victoria, Department of Health and Human Services. Retrieved from http://www.dhs.vic.gov.au/about-the-department/documents-and-resources/policies,-guidelines-and-legislation/program-requirements-for-residential-care-services-in-victoria.

Neumann, C. B. (2016). Children's quest for love and professional child protection work: The case of Norway. *Scottish Journal of Residential Child Care*, *14*(3) and *International Journal of Social Pedagogy*, *5*(1), 104–23. [CrossRef]

Niemeyer, C., Schröer, W., & Böhnisch, L. (Eds.). (1997). *Grundlinien Historischer Sozialpädagogik. Traditionbezüge, Reflexionen und übergangene Sozialdiskurse*. Weinheim und München: Juventa.

Nunno, M., Sellers, D., & Holden, M. (2014). Implications of translational research for the field of residential child care. *Scottish Journal of Residential Child Care*, *13*(3), 1478–840.

Petrie, P. (2011). Interpersonal communication: The medium for social pedagogic practice. In C. Cameron & P. Moss (Eds.), *Social pedagogy and working with children and young people. Where care and education meet* (pp. 69–84). London: Jessica Kingsley Publisher.

Petrie, P., Boddy, J., Cameron, C., Wigfall, V., & Simon, A. (2006). *Working with children in care. European perspectives*. Maidenhead: Open University Press.

Pålsson, D. (2018). *The prerequisites and practices of auditing residential care. On the licensing and inspection of residential homes for in Sweden* (Doctoral dissertation). Department of Social Work, Stockholm University, Stockholm. Retrieved from http://urn.kb.se/resolve?urn=urn:nbn:se:su:diva-151624.

Rothuizen, J. J., & Harbo, L. (2017). Social pedagogy: An approach without fixed recipes. *International Journal of Social Pedagogy*, *6*(1), 6–28. [CrossRef]

Sallnäs, M. (2002). Expansion and privatisation of residential care for children and youth. *European Journal of Social Education*, *3*, 45–7.

Sallnäs, M. (2009). Swedish residential care in the landscape of out-of-home care. In M.-E. Courtney & D. Iwaniec (Eds.), *Residential care of children: Comparative perspectives* (pp. 38–52). New York: Oxford University Press.

Shealy, C. N. (2002). Knowing a way toward professional child and youth care: The therapeutic home parent model. In E. J. Knorth, P. M. van der Bergh & F. Verheij (Eds.), *Professionalization and participation in child and youth care. Challenging understandings in theory and practice* (pp. 87–106). Burlington: Ashgate.

Smith, M., & Whyte, B. (2008). Social education and social pedagogy: Reclaiming a Scottish tradition in social work. *European Journal of Social Work*, *11*, 15–28. [CrossRef]

Smith, M. (2009). *Rethinking residential child care: Positive perspectives*. Bristol: The Policy Press.

Social Pedagogy Standards. (2016). Retrieved from http://www.sppa-uk.org/wp-content/uploads/2016/11/Social-pedagogy-standards.pdf.

Statham, J. (2011). *A review of international evidence on interagency working, to inform the development of Children's Services Committees in Ireland*. Dublin: Minister for Children and Youth Affairs.

Storø, J. (2013). *Practical social pedagogy: Theories, values and tools for working with children and young people*. Bristol: Polity Press.

Thrana, H. M. (2016). Love: Recognising relationships in work with vulnerable youth. *Scottish Journal of Residential Child Care*, *14*(3) and *International Journal of Social Pedagogy*, *5*(1), 71–89. [CrossRef]

Timonen-Kallio, E. (2012). Residential child care work – Professional knowledge, orientations and methods. *European Journal of Social Education*, *22/23*, 37–50.

Timonen-Kallio, E. (2018). Interprofessional collaboration between residential child care and mental care practitioners: A cross-country study in six European countries. *European Journal of Social Work*. [CrossRef]

Timonen-Kallio, E., Hämäläinen, J., & Laukkanen, E. (2017). Interprofessional collaboration in Finnish residential child care: Challenges in incorporating and sharing expertise between the child protection and health care systems. *Child Care in Practice*, *23*(4), 389–403. [CrossRef]

Ungar, M., Liedenberg, L., & Ikeda, J. (2014). Young people with complex needs: Designing coordinated Interventions to promote resilience across child welfare, juvenile corrections, mental health and education services. *British Journal of Social Work*, *44*, 675–93. [CrossRef]

Vincent, J. (2016). Perspectives on love as a component of professional practice. *Scottish Journal of Residential Child Care*, *14*(3) and *International Journal of Social Pedagogy*, *5*(1), 6–21. [CrossRef]

Ward, A. (2006). Models of 'ordinary' and 'special' daily living: Matching residential care to the mental-health needs of looked after children. *Child and Family Social Work*, *11*, 336–46. [CrossRef]

Walther, A. (2012). Support across life course regimes. Proceedings of the 2nd European Conference for Social Work Research, Basel, Switzerland.

Whitaker, D., Archer, L., & Hicks, L. (1998). *Working in children's homes. Challenges and complexities*. Chichester: John Riley & Sons.

Whittaker, J. K., Del Valle, J. F., & Holmes, L. (2015). *Therapeutic residential care for children and youth. Developing evidence-based international practice*. London: Jessica Kingsley.

Whittaker, J. K., Holmes, L., del Valle Jorge, Ainswort, F., Andreassen, T., Anglin J., Bellonci, C., Berridge, D., Bravo, A., Canali, C., et al. (2016). Therapeutic residential care for children and youth: A consensus statement of the international work group on therapeutic residential care. *Residential Treatment for Children and Youth*, *33*(2), 89–106. [CrossRef]

Wolf, K. (2016). What is meant by social pedagogical research into foster children? *Social Science and Society*, *14*(2), 1–13.