

Name: Iram Shezadi

Student ID: 1807072

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Lecturer's Name: Dr Mark Gallagher

The family that has been focused on goes by the name of Family C, who have significant issues when it comes to the behaviour of the children, employment status as well as housing needs. The family consisted of a mother, and her four children: a 17-year-old girl, two teenage boys, and a nursery school aged daughter. This specific family had brought out the key elements of vulnerable children, young people and families, helping the critique of the effectiveness of policy and the health and social care agencies involved.

The family were in a state of vulnerability, that made them stand out from the average family, due to the hardship and difficulties they faced together and individually. Firstly, the mother suffered from mental health issues. She had significantly high anxiety levels and depression, which affected her ability to go outside of the house, which meant the children had a lack of socialisation with other children. However, it also meant that the mother lacked a relationship and strong connection with her children as depressed parents continue to parent poorly following a depressive episode (Seifer et al, 2001). A second factor that made this family vulnerable, was the behaviour of one of the boys. The son had anger problems, which affected his attitude at school, and caused him to have disruptive behaviour in the classroom. This made the mother more vulnerable, as she was unable to help her child on her own, as well as the fact that having a 'difficult' child made her depression worse. This makes the family more vulnerable than an average family, as many studies have shown how these early irritable symptoms are associated with mood and anxiety disorders later in life, showing how the vulnerability of this family will be long-term problem (Whelan et al, 2003).

The family had specific issues that put them in a situation of high vulnerability. One of these was the conditions they were living in. As stated in the case study, the family had a particular issue with housing repairs. This could have been anywhere from a broken window and roofs, or even as far as not having hot water and heating. If the family's conditions were as bad as having no heating, this would have led to a cold, uncomfortable environment that is not safe for children to grow up in. This risks the children having recurring illnesses from not receiving the correct care at home. Many studies have shown how experiencing housing problems increases the risk of children developing ill-health and disability up to 25 percent during childhood and early adulthood ([england.shelter.org.uk](http://england.shelter.org.uk)). There was also the issue of the behaviour of the young boy and the attendance of the young girl. The son was said to have behaviour issues that were a particular concern. The risk of this was towards the mom, due to the fact that she would have been unable to help her son in handling his anger or reducing his disruptive behaviour because of her depression. Also, the youngest daughter had very low attendance, as her mother was not dropping her off to nursery as often as she should have because of her anxiety. The risk in this was aimed at the

daughter, as she would have missed many important skills that other kids would have learnt, putting her behind the rest of her class.

Many agencies were involved with this family, in order to better their lives: CAMHS, Youth in Need Team, Anti-Social Behaviour Team, as well as Neighbourhood Services. One of the recommendations these agencies made was to involve the children in extra-curricular activities. The idea behind this was that the children would have extra activities to partake in instead of being bored in a cold home. It also helped with one of the other aims of improving their attendance and punctuality of school. It was said that if the children did extra activities, they would come to love going to school and learning and socialising with their friends. There has been endless research that has found a correlation between school attendance and extra-curricular activities, as school dropout rate for at-risk students reduced for the students who participated in these activities compared to those who didn't (Mahoney, J.L. and Cairns, R.B., 1997. Do extracurricular activities protect against early school dropout? *Developmental psychology*). Another significant action taken by the agencies was parenting and employment training for the mother. This was very important as it made the mother learn and pick up skills she missed out on before, helping her become more employable to help look after her family, as well caring for her children in a proper manner through learning skills from parenting sessions. One of the sons also received counselling in order to help control his anger issues. This helped with making sure it was safe for him to go to school and not cause disruption for the other children, but also more importantly made it easier for the mother to ease into appropriately caring for her children again, which meant she could correctly use the skills she learnt from her sessions.

Even though the agencies provided several different plans of actions for the family to improve their standards of living, there are a few other routes they could've taken to end up with better results. Firstly, the agencies could have made it easy for the mother to tackle her problems, by offering her one to one assessment on a regular basis in the comfort of her own home, so her children can get involved. It was discussed as a group that by involving the children, the mother will build an attachment with them more easily, as well as the children understanding and picking up skills to cooperate easily with their mother. It would also help if the mom took part in activities with the mother, so that these act as bonding exercises, so that the mother could get more involved with her children's lives, without the effects of her mental health getting in the way.

## References

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