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Social Support and Organisation in Swedish Family Centres and Dutch Youth and Family Centres

The role of professionals and organisations

Master thesis

**Social Support and Organisation in Swedish Family Centres and Dutch Youth and Family
Centres**

The role of professionals and organisations

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Abstract – The aim of the present study is to gain insight into how parents benefit from social support in Dutch Youth and Family Centres and Swedish Family Centres. A comparison has led to some recommendations for the Dutch Youth and Family Centres. Professionals and parents in both countries were interviewed. Results showed that the Dutch parents, in contrast to the Swedish parents, did not engage in social contacts in the centre and only benefitted from social support from professionals. Further, Dutch professionals had a different task than Swedish professionals, which contributed to a different approach. The combination of an open preschool, a well-being approach, and professionals with the task to promote the well-being of families seemed to be the most important precondition for a successful centre. These findings led to the recommendation to change the atmosphere in the Dutch Youth and Family Centres from a ‘problem-oriented’ to a ‘supportive-oriented’ atmosphere. Only then the open preschool could be introduced in the centres.

Samenvatting – Het doel van deze studie is het verkrijgen van inzichten in hoe ouders baat hebben bij sociale steun in Nederlandse Centra voor Jeugd en Gezin en Zweedse Familie Centra. Deze vergelijking heeft geleid tot aanbevelingen voor Nederland. Professionals en ouders zijn in beide landen geïnterviewd. Resultaten laten zien dat Nederlandse ouders, in tegenstelling tot de Zweedse ouders, geen sociale contacten aangaan in het centrum en alleen sociale steun ervoeren van professionals. Daarnaast hadden de Nederlandse professionals een andere taakopvatting dan de Zweedse professionals, wat bijdroeg aan een verschillende benadering. De combinatie van een open voorschool, een welzijnsbenadering en een welzijnsgerichte taakopvatting van professionals leek de meest belangrijke voorwaarde te zijn voor een succesvol centrum. Deze bevindingen hebben geleid tot de aanbeveling het klimaat in de Nederlandse centra te veranderen van een ‘probleem georiënteerde’ naar een ‘steun georiënteerde’ atmosfeer. Alleen dan zou een open voorschool geïntroduceerd kunnen worden in de centra.

Keywords: Social support – Social network – Well-being – At-risk – Youth and Family Centre – the Netherlands – Sweden.

Introduction

This study examines the social support of parents in Youth and Family Centres in the Netherlands compared to Family Centres in Sweden. The aim of this study is to find out what we can learn from the Swedish Family Centres. Therefore, it is necessary to explain first where Youth and Family Centres find their origin in the Netherlands as well as in Sweden. Subsequently, a description of a theoretical framework of the general needs of parents for social support and related concepts to social support will be given. Then the methods and results will be described. The article ends with a conclusion and discussion. Finally, by combining the theoretical background and the present findings, recommendations are given.

In January 2006, seven municipalities¹ wrote a so called ‘Gideon’ report in which they plead for a network organisation with the youth health care as the backbone (Schnieders, 2008). This was also the main point of the evaluation of Van Eijck (2006), in which he pointed out that Dutch youth policy did not respond to the problems related to parenting, experienced by a large group of children and parents. Too many children ended up in the social care system instead of the universal and preventive services. There were several reasons for not fully addressing the problems of families (Van Eijck, 2006). For instance, there was dissatisfaction about the chain of services (Van Eijck, 2006) and the fragmentation and compartmentalization of the local child policy and youth policy (Ross-van Dorp, 2006).

When the ministry for Youth and Families was created in 2007, the Youth and Family Centres became a priority area. The minister decided that every municipality should have a centre by 2011. A Youth and Family Centre is meant to be a familiar, low-threshold meeting place in the community where both (prospective) parents and youth (till 23 years) can go to when they have questions associated with growing-up and parenting (Darwish & De Vries, 2010). Each municipality is based on the local ‘made to measure’, as long as they meet the required basic set of tasks (Nederlands Jeugd Instituut, 2011).² That is why it is possible for each municipality to have a Youth and Family centre with a different structure and role. The centres have the task to give information and advice, to detect possible problems, and to offer light pedagogical help. They are also meant to act as a front office to refer to appropriate help and to coordinate care (Darwish & De Vries, 2010).

There are a few critical notes on the Youth and Family Centres. First of all, De Winter (2011) points out that the Dutch Youth and Family Centres mainly focus on early detection of possible problems and adequate, accessible support to individual parents and their children. According to Van Dijk, Stetter and Prinsen (2009), these two functions may conflict with one another. In practice, Youth and Family Centres mainly concentrate on adequate help and early detection. In other words, the

¹ Municipalities of Rotterdam, Eindhoven, Almelo, Almere, Delft, Oude IJsselstreek and Urk

² Information and advice; minor pedagogical support; identification of problems; guidance to help; coordination of care, including social work, family coaching and parenting support

centres are more focussed on risk factors than on the well-being of children and their families. Another point of criticism on Youth and Family Centres is that people hardly utilise the walk- in location of the centres (Kriek et al., 2010). Rather, parents come in because they visit the baby well-clinic to weigh and measure their baby. Research of Kriek and others (2010) shows that the municipalities are active in shaping the earlier mentioned front office, however, the threshold to parents and youth could be improved. Last, due to the local 'made to measure', Dutch Youth and Family Centres offer different forms of support, which means that it can vary from advice and information to parents who actually participate in the centre.

Viewing these critiques, it is interesting to look at the Swedish variants of the Dutch Youth and Family Centres. The first Swedish Family Centres were introduced more than a decade ago (Hjortsjö, 2005). Prior to the introduction of Family Centres, services organised around the child and its family already existed. According to Hesse and Vinnerljung (2006), this seems to be the reason why it was not difficult for local governments and professionals to decide to build the Family Centres around the places where they could reach parents easily, such as the open preschool. This is an informal meeting place for children from 0 to 6 years and their parents or grandparents. By law, every municipality in Sweden should provide the same social services, including parenting support. Children and parents can visit the open preschool spontaneously without being registered, nor are their parents' questions and concerns. Furthermore, Lindskov (2010) points out that the national government does not play a formal role, the local partners are responsible. The municipalities introduced services where already existing services were located under one roof in the community, such as maternal and child health care, a preschool, and social services (Lindskov, 2010). The centres aim to emphasize the supportive perspective. This is in line with the goal, namely promoting the well-being of the children and their families. In addition, the centres offer parents and other caregivers possibilities to create or to strengthen their social network.

Professionals who are involved in the Swedish Family Centres can include pedagogues. Their role is to invest most of their time in supporting families and guiding conversations between parents (Lindskov, 2010). According to Lindskov (2010), the social workers offer individual support and give advice to the families. In addition, midwives and nurses invest time in supporting parents by giving them advice.

Not much research has investigated the differences between Dutch Youth and Family Centres and Swedish Family Centres. Lindskov (2010) points out that Swedish centres are doing quite well concerning social support. In the field of Youth and Family Centres, there is a discussion going on whether the Dutch centres are capable of reaching a wide audience. As Swedish Family Centres are organised in such a way that they reach many parents who turn to the centre for social support, it would be interesting to gain more insight into what Dutch Youth and Family Centres can learn from Swedish Family Centres. Consequently, the two following research questions are formulated:

1. *How do parents benefit from social support in Dutch Youth and Family Centres and Swedish Family Centres?*
2. *How can differences in support be explained by organisation, the content of the work of professionals, and objectives?*

Theoretical Framework

Social support & social networks

Youth and Family Centres are created to offer social support to parents and other caretakers. Therefore, the concept of social support is important for a better understanding of the dynamics of Youth and Family Centres towards parents. Consequently, literature concerning social support is outlined in this section.

According to the Social and Cultural Planning office (SCP, 2010), the majority of Dutch parents is satisfied with the way they raise their children. Of course, there are also parents who are insecure about their parenting skills. An analysis of the Statistics Netherlands (CBS, 2008) shows that 36 percent of the parents with children who still lived at home had their concerns about parenting and their child's development. According to Van Yperen (2009), every parent has to deal with light pedagogical problems and certain difficulties, such as stubborn behaviour of their children, refusing to sleep or eat, and a slowly development of language skills. These examples are common difficulties parents have to deal with in certain developmental phases of children's lives (Van Yperen, 2009). These difficulties are normal and dealing with it belongs to the task of the parents.

In addition, Zeijl, Crone, Wiefferink, Keuzenkamp and Reijneveld (2005) show that the need of Dutch parents for social support has increased in the last ten years. The authors offer a couple of explanations for this phenomenon. For instance, the loss of traditional parenting models (Bolt, 2000), too many complicated and contradictory advices (Glazemakers & Deboutte, 2005), and the lack of support from other adults (Pels & Meeus, 1999). Van Yperen (2009) points out that parents and other caretakers have the possibility to get support from professionals. The Youth and Family Centres, for instance, have the purpose to support families. Nonetheless, it seems that for a substantial number of parents the threshold to turn to the centre for support might be too high (Bol, 2011). Therefore, it can be argued that parents need social networks in the centres in which they can trust one another, in order to make it easier for parents to share their concerns with professionals and other parents.

Möhle and Van Katwijk (2010) pointed out that social networks are important for a positive parenting environment for children. Families with a broad social network and who are well embedded in their social environment, function better and do not need professional help as often as families without a broad social network. These social networks play a central role in primary prevention (Hermanns, 2009). By strengthening the social network in families, schools, and in the public domain, the chance to prevent children and youth from psychological problems increases. To achieve this, parents need social support.

May-Chahal, Katz and Cooper (2003) defined social support, or family support, as the assistance families receive to ensure the health and well-being of their children. The offered support varies from therapy in an office setting to the community self-help with little constitutional involvement. Several studies make a distinction between a 'informal' and a 'formal' support network. Informal support includes support from the partner, family, and friends, among others. This kind of support has gained increased interest as a predictor of how parents raise their children (Kotch, Browne, Dufort, Winsor, & Catellier, 1999). An investigation of the predictors of child maltreatment by Kotch and others (1999) showed that the lower the social support parents receive, the higher the risk of child maltreatment.

As pointed out by Hermanns (2009), parents need social support to enhance their social network. According to a meta-analysis by Andresen and Telleen (1992), physical assistance and tangible aid is necessary to reduce maternal stress. Usually, this occurs when the mother feels isolated and does not take part in a social network. Andresen and Telleen (1992) concluded that the so-called parent-child activity centres help to decrease the sense of isolation experienced by mothers. These centres are places where mothers can meet and talk about parenting, while their children are playing with other children. This form of social support might improve the mental health and well-being of mothers who feel isolated. This results in positive behavioural and mental health outcomes, because it empowers mothers to interact more successfully with their child (Andresen & Telleen, 1992).

A study that addressed the effects of attachment style and social support on parenting behaviour in an at-risk population, showed that social support influences changes in parent-child activities, mainly because of its effects on ambivalent attachment (Green, Furrer & McAllister, 2007). Green and others (2007) pointed out that social support has not only a positive effect on middle class parents, but also on parents living in at-risk environments who experience chronic stress. Taken these points into consideration, it seems that social support has a positive effect on both universal and targeted populations.

As stated before, Youth and Family Centres offer social support to parents and other caretakers. However, not only Youth and Family Centres offer social support. Hermanns (1992) described that community schools also offer several forms of parenting support: 1) stimulation, organisation, and guidance systems of self-help and social support with respect to children and parenting; 2) information about growing up and parenting within the family, but also in other settings, such as day-care centres; 3) advice about the context in which parenting takes place; 4) realisation of a place where parents and other caretakers can ask questions and get advice about development and parenting. According to Hermanns (1992), it should be possible to ask light pedagogical questions, but there should also be enough professional experts who can advise parents about intensive help when necessary. In short, parenting support exists of all measures and activities to help and to support parents with parenting (Hermanns, 1992).

Parental involvement

It is possible to assume that the involvement of parents is important for a successful Youth and Family Centre concerning social support. The concept of parental involvement can give some useful insights into the influences on, for example, children and parents. Therefore, some literature about the necessity of parental involvement in the Youth and Family Centres will be discussed in more detail.

No clear consensus exists with respect to the definition of parental involvement (Van der Schaaf & Van den Berg, 2009). In the present study, the definition of Blumenthal (1984, p. 2) is adopted. Blumenthal (1984) defined parental involvement as follows: “The inclusion and-or active participation of mothers and fathers in activities, tasks, services and decision-making throughout the process of child protection.” Johnson (1998) pointed out that practitioners have to stimulate parental participation if parents are to get involved. In this thesis, parental participation is seen as part of parental involvement and is defined by Smit, Driessen, Sluiter and Brus (2007) as the active participation of parents in activities in, for example, the community school. Since the majority of studies have focussed on the parental involvement in the school and scant research has been done on the parental involvement in Youth and Family Centres, literature focussed on parental involvement in (community) schools will be discussed.

According to Bol (2011), not many parents turn to Youth and Family Centres for support. One of the reasons might be that parents want to go to places where they already come with their child. An explanation for not showing up could be that parents do not feel involved with the centre and that they prefer to go to places where they feel emotionally connected. It can be argued that if parents are involved in the centre they will visit it more often and it will be easier to get more support this way. Therefore, it is not only of importance that parents participate, but emotional involvement could be crucial.

Several studies suggest that parental involvement has an influence on a number of aspects regarding the development of children (Blumenthal, 1984; Verdonk, 2005). First, according to Blumenthal (1984), involvement is a critical condition for getting better parenting skills. Second, another study showed that parental involvement plays a decisive role in the social-emotional and cognitive development of children (Verdonk, 2005). In addition, parents should have the opportunity to participate in the education of their children. According to a international study of Smit, Sluiter and Driessen (2006), parental participation in education seems to have a positive effect on children’s cognitive development and school performance. Overall, parental involvement in the Youth and Family Centres seems to be of great importance for both parents and children.

Despite the finding that parental involvement can lead to a better social and cognitive development of children and better parenting skills (Smit et al., 2006; Verdonk, 2005), the dialogue between parents and schools is generally limited to daily conversations (Smit et al., 2006). Smit and others (2006) pointed out that parental involvement in schools does not often entail contributing ideas

and participating in decision-making. The fact that the majority of the parents do not show up in Youth and Family Centres (Bol, 2011), suggests that parents also do not contribute ideas and participate in decision-making in a non-educational context. To conclude, it seems to be necessary to improve the parental involvement in the Youth and Family Centres to contribute to better social networks. As a result, it might become easier for parents and other caretakers to turn to the centre for social support.

Threshold

Making parents come to the Youth and Family Centres, so that they can utilise the offered social support, is not easy. There are some struggles and thresholds, which need to be overcome. Van Dijk, Kalsbeek, Prinsen and Nota (2008), for example, pointed out that if the threshold is high, parents will not show up. As a consequence, parents will not receive as much social support as when the threshold would be lower. The lower the threshold for parents to visit Youth and Family Centres, the easier it will be for parents to ask for social support. According to Van Dijk and others (2009), a low threshold is therefore one of the defining factors of the success of a Youth and Family Centre.

Van Dijk and others (2009) distinguish three factors that contribute to a low threshold in a Youth and Family Centre, namely familiarity, accessibility, and the utility of the centre. Van Dijk and others (2009) pointed out that people are familiar with a centre if they know of the existence of the centre and know what the centre has to offer. A survey in the Dutch municipality of Kaag and Braassem (Gemeente Kaag en Braassem, 2010) showed that 46% of the citizens in that municipality is familiar with the Youth and Family Centre. In other words, one may say that almost half of the population in that municipality knows of the existence and what the centre can offer them.

The second factor is accessibility, which can be subdivided into emotional accessibility and physical accessibility (Van Dijk et al., 2009). Van Dijk and others (2009) describe emotional accessibility as the extent to which parents and youth experience thresholds when they want to make use of information, advice or support. According to the authors, positive communication is essential for emotional accessibility. Next to the emotional accessibility, the location and physical accessibility are also important. Parents come more often if the centre is nearby their home and if the atmosphere of the centre is more inviting (Van Dijk et al., 2009).

The third factor is the utility of the centre. Several studies show that when parents have questions, they usually address them to direct contacts in their own environment (Bolt, 2000; Van Dijk et al., 2009; Doorten & Bucx, 2011), for instance, someone in their own social network or professionals in day-care centres or schools. According to Van Dijk and others (2009), partners in Youth and Family Centres should make use of this by facilitating activities on low-threshold locations. This way, it is easier to reach parents and their children. Taken these factors together, it could be argued that the lower the threshold, the easier it is for parents to turn to the centres for social support.

Well-being versus at-risk

Two different angles can be chosen in the Youth and Family Centres. The chosen angle has a big influence on how Youth and Family Centres function. That is why this section will look in more detail to these different angles.

The context seems to play an important part when it comes to social support. In the Netherlands, it is not common to share questions and problems concerning parenting and growing-up with others. Van Dijk and others (2008) pointed out that if parents do share problems concerning parenting with others, it usually happens from a problem-oriented perspective. According to Van Dijk (2008) and De Winter (2011), it is important to have a supportive oriented approach in order to gain social support. However, Cowen and Kilmer (2002) claim that since the beginning, the mental health field has focussed on the traditional medical model, which emphasizes problems and focuses on repairing. To put it differently, the traditional model seems to focus on the dysfunction of families or individuals as a disclosure of pathology and individual risk factors (De Winter, 2008). De Winter defines this as the 'at risk'-model. Since De Winter (2011) claimed that Dutch Youth and Family Centres fit in the problem-oriented approach, it does not stimulate parents to visit the centre for social support.

Moreover, according to Cowen and Kilmer (2002), the medical model is not sufficient as an all-inclusive societal model and contains two severe limitations. The first limitation is that the model is individual-oriented and therefore does not reach diverse groups who are in need. The second limitation is that the model is not effective for continuing dysfunction. De Winter (2011) claims that during the previous decades, this model has gained an increasingly dominant position; not only in the scientific research on behavioural and family problems, but also in practice and youth welfare policy. Taken these limitations and the contemporary developments into consideration, alternatives of the at risk-model are presented.

One of the alternatives is wellness enhancement, or as described by McAuley (2010) "well-being". In contrast to the at risk-model, it is health-oriented and has a positive approach. According to Cowen (1994), the well-being approach focuses on more than just the absence of dysfunction. This means that the extent of the presence of positive factors is examined. In addition, it includes primary prevention, but is not limited to this concept. Felner, Felner and Silverman (2000) explain that this means that both primary prevention and wellness enhancement focus on groups and are introduced before problems arise. Primary prevention, however, is focused on preventing problems, whereas wellness enhancement is focused on promoting well-being (Felner et al., 2000). In the present thesis, the term well-being will be used.

In order to make it more attractive for parents to come to the Youth and Family Centres, it seems to be important to have only a supportive-oriented approach instead of a combination with the at-risk approach. Lindskov (2010) describes that Swedish Family Centres promote the well-being of children and their families. According to Lindskov (2010), Swedish parents have many contacts in the centres.

This could explain why parents visit the centres regularly, which makes it easier for them to turn to the centres for support. Lindskov (2010) also points out that numerous Swedish Family Centres emphasize that it is important to share responsibility and collaboration with parents in the organisation. In addition, the thresholds seem to be limited for Swedish parents (Lindskov, 2010). Although relatively little research has been conducted on the connection of the well-being approach and the three concepts of social networks, parental involvement, and threshold, it could be argued that it is important to have a supportive-oriented approach. A good attendance of parents in the centres for social support can be seen as a result of the explicit choice for only a supportive-oriented approach in the centres. Therefore, the question arises whether it is possible to combine the well-being approach with the at-risk approach.

Methods

Participants

In the present study, 26 half-open interviews were conducted with parents and professionals of both Dutch (13 persons) and Swedish (13 persons) origin, all with children aged between 0 and 6 years old. The individual interviews with the parents gave them the opportunity to display their own perspective without being influenced by someone else. In this study, Swedish respondents were obtained by a foreign contact of the Netherland Youth Institute, Vibeke Bing. She is a lecturer at Kristianstad University and founder of several Family Centres in Sweden. Dutch parents were approached in the waiting room during a visit to the participating Youth and Family Centres.

In this study, two centres have been approached in each country, of which one in a smaller city and one in a bigger city. One manager and one director were approached in a smaller city in the Netherlands (Vlaardingen) and one coordinator, one project manager, and three executive professionals were approached in a bigger city in the Netherlands (Haarlem). Five executive professionals were approached in the country side in Sweden (Åmål) and two executive professionals (two open preschool teachers, pedagogues) were approached in the second city of Sweden (Gothenburg). In both Sweden and the Netherlands, centres were approached in a smaller and a bigger municipality. As such, the reliability of the study was enhanced. Within the centres in these municipalities, professionals and parents from the same centre were interviewed. This made it possible to compare their answers. Their answers were consistent, which contributed to the reliability of the results.

It was more difficult to find Dutch parents who were willing to participate as opposed to Swedish parents. This could be explained by the amount of time the parents spend in a Youth and Family Centre in both the Netherlands and Sweden. More Swedish parents were recruited than initially was planned. The Dutch sample consisted of five parents (all mothers) and eight professionals working at a Youth and Family Centre. The Swedish sample consisted of six parents (one father and five mothers) and seven professionals working at a Family Centre. Of the five Dutch mothers, two did not have a job, and three worked part-time. All Swedish participants were free for several months at the time of

the interview, because of the paternal leave. They indicated that as soon as their child becomes old enough to go to preschool (between 1,5 and two years old), both parents would go back to work full-time. Four of the Dutch parents had two children, one had one child, all with a mean age of 23 months. Four of the Swedish parents had two children, one had four children and one had one child, all with a mean age of 29,8 months.

Procedure

Not only interviews were conducted, also direct observations were carried out in all centres in both countries. The interviews were half open. The most important subjects were fixed, but during some of the interviews mothers started a topic themselves that had yet to be discussed. That is why the order differed for some of the interviews. The first topic that was discussed during the interview with the parents was about the approach in the centres, well-being versus at-risk oriented. The second topic was about the threshold. The focus was mainly on the reason for entering the centre and if a parent entered the centre spontaneously or not. The third topic of the interview with the parents was about the social support and social network. The focus was on the contacts parents made because of the centre and on the use of these contacts. Last, questions were asked about the parental involvement in the centres. The interviews with the professionals discussed the same topics. The order of the topics used throughout this study were social support and social networks, parental involvement, threshold, and well-being versus at-risk.

Results

The results were analysed using the four topics identified in the literature. The first section contains the results of the interviews conducted with Dutch parents and professionals. The second section contains the results of the Swedish parents and professionals. The four topics are divided into three categories. The first category concerns the way how parents benefitted from the social support in the centre and includes the topics ‘social support and social network’, and ‘parental involvement’. The second category is the content of the work of the professionals in the centre and includes the topic ‘threshold’. The last category is about the organisation and objectives of the centre and includes the topic ‘well- being versus at risk’.

How Dutch parents benefitted from social support. The Dutch parents claimed that they did not have the need to meet other parents in a Youth and Family Centre. All parents argued that they had a social network at home. They only had contacts with the professionals in the baby well-clinic. Some of the parents were conscious of the fact that there are parents who do want to meet other parents, for instance, people who just moved to another city or people with a small social network.

None of the Dutch professionals have ever seen parents talking to each other. If there was any contact at all, it was a quick chat about the age and the name of the other parents child. The professionals thought that Dutch people were very individualistic and did not easily talk to other

people, especially not about problems or parenting. One of the professionals said the following about this:

“If it’s about raising a child, people don’t talk much about it. You don’t wash one’s dirty linen in public.” (“Als het om opvoeden gaat dan wordt er niet zoveel over gesproken. Je gaat geen vuile was buiten hangen.”)

One of the Dutch Youth and Family Centres organised special thematic meetings for parents. During these meetings, professionals stimulated parents to talk to each other and to give each other advice. The professionals of this Youth and Family Centre tried to decorate the centre in such a way that it attracts parents to stay after the appointment, for example a reading table with books about the theme of the meeting. The second Youth and Family Centre was still working on the organisation of thematic meetings. The professionals of this Dutch Youth and Family Centres claimed to focus more on strengthening the social networks of parents in the future.

Dutch mothers indicated that if they have a small question about parenting, for example, about having a hard time putting their child to bed, none of them would ask other parents in the Youth and Family Centre. They mentioned that if they would need help, they would first ask people in their direct environment or go to a professional. One of the Dutch professionals stated:

“People prefer not to talk about parenting or raising their child, because they consider it as a private thing which you keep to yourself. It is still a taboo. People tell each other about nice things, but not about difficult things. Or people don’t want to bother others with their worries or problems.” (“Er wordt eigenlijk mondjesmaat over opvoeden of opgroeien gesproken, omdat het toch wel binnendringt in de privacy van mensen. Er heerst nog steeds een taboe op. Mensen vertellen elkaar wel over de leuke dingen, maar niet over de moeilijke dingen. (...) Of mensen willen een ander niet belasten met zijn zorgen of problemen.”)

One of the professionals told that most parents visit the centre to go to the baby well-clinics, but some parents also ask questions over the telephone about parenting or growing up. According to the professionals, there were parents who entered the centre without making an appointment. The professionals pointed out that parents who came to the centre spontaneously already had very severe problems related to, for example, parenting, marriage, or finances. All professionals expressed the wish that parents would enter the centre at an early stage of the problems, so that it would be easier to prevent escalation of small problems.

None of the Dutch parents felt emotionally involved and therefore did not participate in the Youth and Family Centre. Professionals at both Youth and Family Centres indicated to work on a feedback group of parents to promote parental involvement. Professionals at one of the Youth and Family Centres had already started with such feedback groups with respect to parent participation. They mentioned surveys aimed at asking if they wanted to be involved or not. A number of parents responded positively to these surveys and were asked about their preferences for opening schedules

and about the subjects they would like to discuss during thematic meetings. One of the professionals explained that, in general, professionals indicate what parents want in the Youth and Family Centres. Parents were not directly asked by the professionals in the centres what they wished for with respect to services from the centre.

Content of the work of the Dutch professionals. All professionals indicated that the Youth and Family Centres have the task to give advice and signal problems as early as possible. One of the professionals explained that the professionals in the Youth and Family Centre do not have the task to strengthen the social networks around families. Dutch professionals experienced better cooperation in the field of children and youth compared with the situation before the Youth and Family Centre was realised. According to the professionals it is very easy to exchange knowledge with other professionals and discuss more often about parents who have severe problems. It was mentioned that it was a great advantage to work with all professionals under the same roof. One of the professionals emphasized that there is intense cooperation during case meetings and that there is a clear problem owner according to the 'one family, one plan' approach, which is received with great enthusiasm by the professionals.

The professionals had different working schedules. Most of them indicated to work part time at the centres. One professional made clear that many professionals are physical present for approximately three hours a week. This has to do with the fact that the Youth and Family Centre is a network organisation. The professionals worked for other (health) organisations where they spend most of their working time and where they have their own employer. The professionals with a management position in the Dutch Youth and Family Centre indicated that they wish to have more influence on the presence of the executive professionals. One of them explained that it could happen that a parent comes in with a question and that the right professional is not present at that time.

When people came to the centre with a question related to parenting or growing up, the professional had to register the personal details. One professional told that it would be better if people could come to the Youth and Family Centre anonymously. This professional thought that registration was one of the reasons for parents not to enter.

One of the professionals expressed to be content with the physical appearance of the Youth and Family Centre. There were professionals who also were not satisfied about the physical appearance of the building. Some of the professionals pointed out that the atmosphere of the Youth and Family Centre was not attractive. A professional suggested to extend the centre with a day-care centre or other activities to make it more attractive for parents to enter the centre. According to this professional, it was not inviting for people to just have a look without questions:

"If people want to come here out of curiosity, a professional will immediately address if they can help. If there would be some space where people can have a look at some books or materials, something that invites them to browse, without asking questions...I think it would lower the threshold." ("Als

mensen hier naar binnen willen komen uit nieuwsgierigheid, dan word je meteen aangesproken van kan ik u helpen. Maar als je nou ruimte hebt waar je ook boekjes kunt bekijken of materialen, wat uitnodigt om een beetje te snuffelen, zonder meteen wat te moeten vragen...Ik denk dat het daardoor laagdrempeliger wordt.”)

Organisation and objectives. Professionals indicated that they had organised prevention programmes at the Youth and Family Centre. One professional explained that most of these programmes had a targeted approach. This means that the parent was depended on the starting date of the prevention programme. If parents wanted to join a prevention programme, it could be that the programme started later than the parents needed it.

Some of the professionals mentioned that the Youth and Family Centres worked mainly from a problem oriented perspective. One professional explained they did not want to take risks in working with families, because in case of any problem the professionals would be held responsible. Another professional told that the Youth and Family Centre should be a preventive place:

“The Youth and Family Centre should be the preventive department, like the first stop, and if there is more going on it should concern a department with a different name. It shouldn’t become the second child protection service. Taken this into consideration, I argue for not bringing the youth resettlement and the family guardianship in the Youth and Family Centre. But it seems like it’s going into that direction. If that is becoming the front office of the youth care agency again, then everyone will say: I don’t want to go there, I don’t want them to take my child.”

(“Het CJG moet het preventieve zijn, echt de voordeur en als er meer aan de hand is moet het anders heten. Dus het moet niet zo zijn dat het echt het tweede BJZ gaat worden. Ik pleit er ook erg voor niet de jeugdreclassering en de gezinsvoogdij onder te brengen in het CJG. Het ziet er wel naar uit dat het wel die kant op gaat. Als dat weer de voordeur wordt van de jeugdzorg dan zegt iedereen, daar hoef ik niet heen, want ik wil niet dat mijn kind uit huis wordt gehaald.”)

How Swedish parents benefitted from social support. Almost all Swedish parents had expanded their social network by going to the Family Centre and making new friends. These parents indicated that they dropped in spontaneously to meet other parents in the open preschool of the Family Centre. The parents had contacts with both professionals and parents. The parents also met each other outside the Family Centre in cafes or at each others’ homes.

“We like to meet other people. I need other people, I need other mothers. I’ve learned to know other parents in this place. We are still in contact. With some of them I have deep contacts, we meet at our homes. Parents can have these discussions about changing diapers and about not sleeping well at night. I can’t have these discussions with my friends. Without this place I wouldn’t have met other parents.”

One of the parents did not have contacts with other parents, only with professionals. This parent did not feel the need to meet other parents, because the friend of this parent were also sitting at home with their newborn child. However, she understood that other parents needed the social contacts. According to this parent, the open preschool in the Family Centre was a good place to meet others.

The Swedish professionals tried to bring parents into touch with each other. All professionals pointed out that they knew that parents keep in touch and meet each other outside the Family Centre. The nurse, midwife and social workers tried to stimulate parents to go to the open preschool to meet other parents. The preschool teachers play an important part in this by starting conversations and involve parents in these conversations. They tried many things to lower the threshold for parents to talk to each other. For example by removing the chairs and sofas, so parents had to sit on the floor.

According to all parents and professionals, it was easy for Swedish parents to get lonely when being free from work for a long time. Three Swedish parents went to the Family Centre, because they felt isolated or lonely. Another parent explained about the fact that it was easy to get lonely when friends and family of the existing social network are working fulltime.

“Because sometimes just being home all the time you get isolated. I think it’s very easy that when everybody is working and you’re at home and none of your friends are at home with the child, you can easily get lonely. When you come to this place you can make friends. It’s absolutely great.”

The parent explained that when a child is born, parents are free for approximately 480 days. Fathers and mothers could split these days, but the father has to take at least 60 days. A mother can be at home for almost two years. Parents with children older than two years usually work full time. This means that if the friends of the parents work full time, the social network around the parent is not very accessible. According to the parent, parents can feel isolated because of this. Also Swedish professionals indicated that loneliness and isolation were reasons for some parents to visit the Family Centre.

All Swedish parents felt comfortable in the Family Centres for parents. They felt welcome, especially because of the professionals working at the centres and because of the pleasant atmosphere. Swedish professionals indicated that they did not come up with the things they offer in the centres. One of the professionals explained that they tried to indicate what was best for the parents to offer in the centres, but this did not work. Parents come to the professionals with ideas themselves now. For example, one of the professionals told that one parent of a twin wished to talk to other parents with twins. The nurse looked up in the file how many families lived there with twins of about the same age. The professionals sent those families a letter with an explanation and invitation. Some of these families met in the Family Centre. The nurse and the preschool teacher were also there to answer questions and give some advice. Parents also supported each other.

Content of the work of the Swedish professionals. All parents indicated that the nurse and the midwife informed them about the open preschool and sometimes they even walked with them to meet

the preschool teachers. According to the parents, this facilitated to ask professionals for help easier within the Family Centre when they had a problem or a question. One of the parents explained: *I felt really welcome. They told me about the whole place and they showed me around, that was really nice. It felt good in here, I felt really welcome. This is so nice, also the other women who work here. The social workers, they work here in the house as well, so you can talk to them if you maybe have problems in your home or in your relationship or whatever or with the children. You can also sit down and talk to them and have some coffee. That was really nice, because I had some problems in that time with my daughter's father.*

The Swedish professionals claimed to inform parents about the open preschool and stimulated parents to go there. One of the professionals thought that when parents visit the open preschool, the preschool teachers are able to notice how parent and child are doing and how they interact with their child. Both parents and professionals explained that some of the families begin with visiting the Family Centre in the nurses' room, when the parents are expecting a baby. The professionals claimed that almost every parent in Sweden goes to parenting courses. During these courses the parents learn about parenting skills. They will also get familiar with the faces of the professionals of the Family Centre, because all the professionals play a specific part in this course. Once the child is born, the parents already know the professionals and visit the Family Centre more often. The professionals stated that one of the tasks of the nurse is to see if a parent needs more social contacts and if they are feeling lonely. If that is the case, the nurse can suggest the parent to have a cup of coffee at the open preschool in the centre. All professionals in the Family Centre have the task to get to know the families as good as possible. One of the professionals stated that when a parent only visits the open preschool or only the nurse, they do not know all about the parent. That is why they organised meetings where the professionals discussed about the parents who visit the Family Centre. One of the roles of the preschool teachers was to stimulate parents to talk with each other. One professional explained:

“When we heard from the nurse during the meeting that this is a very lonely parent, we can take care of this parent. We can look at her with different eyes. We take care of the children more and we try to bring her or him into contact with other parents or something like that. Sometimes we bridge the gap between a parent and a parent.”

One of the professionals indicated that it has also worked the other way around. If the preschool teacher mentioned that a parent has a problem and needs help, the preschool teacher would recommend the parent to see the social worker. A parent told that sometimes the preschool teacher guides the parent to the social worker.

A professional explained that parents can come to the Family Centre when they have problems or a question without having register their personal details into a computer system. This professional indicated that they try to reach more parents this way.

Organisation and objectives. One professional mentioned that it is very important for them to help families in the early stages. This professional explained that it was all about prevention in this Family Centre. One of the parents also told that the professionals in the Family Centre were very keen on promoting the well-being of the children and the families. In one of the Family Centres, all professionals were educated in the International Child Development Programme (ICDP). The professionals in this Family Centre started a parenting group for young parents to teach them this programme. Another professional stated that they did not have the resources to spread this programme among all parents. Therefore they tried to be a role model for the parents by showing them how to respect their child.

All Swedish parents claimed to visit the Family Centre often, because of the open preschool. A parent made clear that all parents come to the Family Centre in the first place to weigh and measure the baby, but after a while parents come to meet other parents in the open preschool. According to the parents, they would not easily have met other parents in the same situation without the open preschool. One parent explained:

“The open preschool is the most important place for mothers. When I sit in the waiting room of the building, I say hello, but you also have the respect not to start a conversation, because you are there in private. The open preschool is the most important place. I wouldn't make the same contacts without the open preschool. The open preschool is the main reason to visit the Family Centre.”

One of the Swedish professionals confirmed this by saying that parents did not talk much in the waiting room. Parents did talk, but not in the same way as they did in the open preschool. In the waiting room they only asked about the name and the age of the child.

Conclusion & Discussion

The Youth and Family Centres have the purpose to offer social support to all parents and other caretakers. In the field of Youth and Family Centres, there is a lively, continuing debate among experts, whether the centres are capable of reaching a wide audience in the Netherlands. Results from the present study confirm the notion that Swedish Family Centres in fact, do reach a wide audience and are organised in such a way that parents turn to the centres for social support. For this reason, the aim of the present study was to gain insight into how Swedish and Dutch parents benefit from social support in respectively Swedish Family Centres and Dutch Youth and Family Centres. Data was generated from half-open interviews conducted with professionals connected to the Swedish and Dutch centres, and Swedish and Dutch parents who regularly attended the centres. An interview protocol has been used with the following topics: social support and social network, parental involvement, threshold, and well-being versus at-risk.

The present study yielded two striking findings. In the first place, Dutch parents benefitted from social support in the Youth and Family Centres differently compared to Swedish parents in the Family Centres. Dutch parents only benefitted from social support from professionals. They did not engage to

social contacts in the Youth and Family Centre and did not express the desire to receive social support from other parents in the centre. In contrast, Swedish parents did engage to other parents and appreciated the social support they experienced from both parents and professionals. In addition, Dutch parents were less involved in the centres than Swedish parents.

As a second finding, the differences in social support could be explained by differences in organisation, the content of the work of professionals, and objectives. Dutch Youth and Family Centres had other goals than the Swedish Family Centres. In addition, Dutch professionals had different task descriptions opposed to Swedish professionals. Dutch professionals worked fewer hours in the Youth and Family Centre, because only a small part is dedicated to working in the centre. Swedish professionals stimulated parents to talk to each other, and they discussed amongst themselves who visited the centre and why. This way, professionals were able to anticipate to possible problems. Furthermore, several factors were the key to the success of the Swedish Family Centres. It could be argued that the focus on well-being, the open preschool, the content of the professionals, and the number of free days in connection with parental leave were the most important conditions. Differences in culture were also of importance, but to a lesser extent.

Interviewing both parents and professionals from the same centre had the advantage that the vision of the parents could be compared to the vision of the professional and vice versa. The answers of the professionals were compared with the answers of the parents. The consistency of the answers of professionals and parents underline the reliability of the findings of the study. There was also attention given to the validity of this study. The half open interviews made it possible to observe which subjects the professionals and the parents found most important and relevant. Some professionals and parents repeatedly talked about the same subject, which could indicate that they valued this subject. This way, there was a small distance between the data and the reality. Due to the small sample, it is not possible to generalise the findings of this study.

In this section, six explanations for the differences in the extent to which parents turn to the Swedish and Dutch centres for social support will be discussed. First of all, Dutch parents did not engage in social contacts with other parents and did not benefit from social support from parents in the Youth and Family Centre. This is in contrast with the study of the municipality of Haarlemmermeer, in the West of the Netherlands (Van Dijk et al., 2009). The municipality conducted interviews with parents and children to find out their motivation for using the services of the Youth and Family Centre. This study shows that parents and children in that municipality needed the social contacts and they wanted to be taken seriously. This finding suggests that there are parents in the Netherlands who do need contacts and want to be engaged in social contacts in the centre. The difference in results might be explained by the small sample of the contemporary study, which is also a limitation of this study. Instead of turning to other parents in the centre with parenting concerns, the Dutch parents addressed their direct contacts, such as close friends and family members. This finding is in line with several

studies (Bolt, 2000; Van Dijk et al., 2009; Doorten & Bucx, 2011). According to Möhle and Van Katwijk (2010), Dutch society is strongly individualised, which could be a possible explanation for this finding. Nonetheless, like many Western societies, also Sweden has a more individualistic culture (Lindskov, 2010). However, Van der Meer (2009) points out that the volunteering tradition in local communities is stronger in Sweden than in the Netherlands. Nevertheless, the volunteering tradition plays only a slightly bigger role in Swedish communities than in Dutch communities (Van der Meer, 2009). For this reason, culture does not seem to explain the differences in needs of Dutch and Swedish parents regarding social support.

Second, Swedish parents indicated to feel the need to meet other parents in the Family Centre. One of the reasons they mentioned for this need was a worry of feeling isolated. The main cause for feeling isolated was because of the number of free days subsequent to delivery. In Sweden, parents are entitled to a total 450 days paid parental leave (Heap, 2001). In comparison, Dutch parents are entitled to a total 106 days parental leave. It seems that the differences in parental leave in both countries could partly explain the sense of isolation. As mentioned before, parents who do not feel isolated, might address the direct environment (Bolt, 2000; Van Dijk et al., 2009; Doorten & Bucx, 2011). As a result, it could be argued that the parent might turn to professionals or other parents for social support less frequently than parents who feel more isolated. In short, the feeling of being isolated seems an important reason for Swedish parents to turn to the centre.

Third, Dutch parents were not involved in the Youth and Family Centres as Swedish parents. In the two Dutch Youth and Family Centres, professionals indicated that parents either were or will be in the future, given the opportunity to get involved through feedback groups. Parents in the two Swedish Family Centres seem to be more involved. They had influence on the services provided in the centres. This difference could be explained by the fact that the Dutch municipalities principally determine as to what services the Youth and Family Centres can offer to parents (Jeugd en Gezin, 2009). Executive professionals in the Netherlands indicated the needs of parents. In other words, Dutch parents participated less and did not come to the professionals with personal ideas. In contrast, Swedish parents regularly come with ideas of one's own accord. These differences in parental involvement might be an explanation for the extent to which parents show up and therefore might have its influence on the extent to which parents turn to the centre for social support. However, one should keep in mind that the Dutch Youth and Family Centres are in a starting phase.

Fourth, Dutch professionals have different tasks than Swedish professionals. This seems to contribute to differences in approach. Professionals working in the Dutch Youth and Family Centres appear to cooperate quite well if parents have severe problems, for example during case meetings. It is not their task to stimulate parents to have contacts with other parents in the centres. This could be explained by the fact that the Dutch Youth and Family Centres are mainly focused on the early detection of problems and adequate help for individual parents and children (De Winter, 2011). In

contrast, one of the tasks of the Swedish professionals in the centres is to strengthen the social networks of parents. In Sweden this is formalized in policy and one of the goals of the Family Centres. This finding is in line with Van Dijk and others (2008) who point out that Swedish professionals try to make it easier for the parents to talk about small problems related to parenting. They do this by making sure that parents know the professionals who work in the centre. This way, professionals try to prevent escalation of small problems. Another difference is that the Dutch Youth and Family Centre is a network organisation, which implies that some professionals are only present for a few hours a week. In contrast, the Swedish professionals work full time in the Family Centres which makes it easier for parents to turn to the professionals in the centre. All together, the content of the work of the professionals seems to be an important reason for the differences in the extent to which parents turn to the Dutch and Swedish centres for social support.

Fifth, Swedish professionals seem to promote health and the well-being of the child and family. According to Lindskov (2010), this is one of the most important goals of the Swedish Family Centres. Professionals also indicated that by promoting the well-being, the emphasis is less on problems. This could contribute to a more comfortable feeling of parents. In turn, this creates an atmosphere where it is normal to ask questions about parenting and growing up without being scared that professionals think they are a bad parent. This finding is in line with Van Dijk and others (2008). They claim that a supportive-oriented perspective contributes to a natural environment for parents where they do not worry about asking questions. The emphasis on only the well-being seems to be one of the most important explanations for the differences in the extent to which parents turn to the centres for social support.

Finally, according to the Swedish professionals and parents, the open preschool is the main factor creating an atmosphere where parents are not worried about turning to other parents for sharing parenting concerns. Without the open preschool, parents would only come for their appointments with the professionals and just meet parents in the waiting room. However, this is not the place where parents want to talk about parenting concerns. In contrast, the open preschool seems to invite parents to talk to each other. On account of the open preschool and its positive atmosphere, Swedish parents visit the Family Centre regularly. In fact, it seems fair to state that the open preschool contributes to the differences in how parents benefit from social support in the Swedish and Dutch centres.

Taken all these points into considerations, it could be argued that the differences in support can be explained by the differences in organisation, the content of the work of professionals, and objectives. The combination of an open preschool, a well-being approach as main objective, and in addition professionals who have the task to promote the well-being of children and parents by stimulating social contacts in the centre, seem to contribute to an increasing number of parents who visit the centre for social support. Finally, also the parental leave seems to play a part in the extent to which parents turn to the Swedish Family Centres. Nevertheless, to work with only the well-being approach seems to

be the most important factor that contributes to a lower threshold for parents to enter the centre. This way, a broad audience could be reached, which could contribute to more parents who turn to professionals and other parents for social support. The Dutch centres, however, operate with both a well-being perspective and an at-risk perspective. The question remains whether it is possible to maintain these two contrasting approaches. There should be more research into whether a Youth and Family Centre is able reach a wide audience when both approaches are combined.

Practical consequences

Knowing the differences between the Dutch Youth and Family Centres and the Swedish Family Centres in combination with the good results in Sweden, this section will discuss some recommendations for the Dutch Youth and Family Centres. There are several options. The first option is to extend the parental leave, since the Swedish parents indicated that this is one of the reasons for them to visit the Family Centre so frequently. Another option could be the introduction of an open preschool. The last option would be the explicit choice for either the well-being approach or the at-risk approach. It could be argued that it is better to keep these functions separated. This option seems to be the most open to change, since the Dutch Youth and Family Centres are still in transition. However, only changing the approach does not seem to be sufficient. Also the parental leave and the open preschool are the key to the success of the centres.

The first option requires some nuance. In spite of the differences between Sweden and the Netherlands concerning maternity leave, there are also parents in the Netherlands with a small social network who need a place where they have the opportunity to meet other parents (van Dijk et al., 2009). Therefore, the national government could start by formalizing the goals in policy for being accessible as a meeting place and strengthening the social networks of the families. Dutch municipalities could start by introducing a similar meeting place like the open preschool in the Youth and Family Centre. To make this work, not only an open preschool could be included to the Youth and Family Centre, but also the atmosphere of the other parts of the centre could benefit from a shift from a problem-oriented perspective to a focus on the well-being of children. Currently, many Dutch parents associate Youth and Family Centres with a place where every question leads to a note in the computer system. As one of the Dutch professionals claimed, one has to be careful that the centres do not become the new child protection services. As the open preschool operates from a well-being perspective, the rest of the centre could also focus on the well-being of the child and the family and on prevention. Otherwise, Dutch parents would still not go to the meeting place, because they would associate it with problems. Therefore, the national government could also include the goal to promote the well-being of children and their parents.

One possibility to give shape to the proposed meeting place, is to connect to already existing facilities, for instance, a day care centre or a community school. Another possibility is to connect to already existing services. Some Youth and Family Centres participate in the project ‘strengthening the

pedagogical civil society', which started in 2009 (Möhle & Van Katwijk, 2010). The aim of this project is to strengthen the informal social support around families. The Youth and Family Centres play an important role in this initiative. A meeting place such as the open preschool and the project will attune to one another. It could be a first step in the direction of the policy that is employed in the Swedish Family Centres. Explicitly, Dutch Youth and Family Centres do not need to copy every aspect of the Swedish centres, but it could be worthwhile to try to introduce some components of the Swedish model to the Dutch Youth and Family Centres. Swedish Family Centres are doing well in the earlier mentioned aspects, but one has to keep in mind that they were introduced more than one decade ago. Accordingly, it took time before the Swedish centres were as successful as they are today. Hence, it seems reasonable to assume that it will also take time before the Dutch Youth and Family Centres function well concerning social support.

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Appendix A

Datum interview:

Tijd interview:

Introductie gesprek professionals

- Dank voor deelname
- Uitleg doel onderzoek
 - o In kaart brengen van de verschillen in aanpak van CJG's tussen Nederland en Zweden.
- Uitleg over anonimiteit
- Geen goede of foute antwoorden: uw ervaring is van belang
- Toestemming voor bandopname
- Opbouw interview
 - o Context & feiten
 - o Binnenkomst
 - o Verbeterpunten

Situatieschets

Ingaan op de achtergrond van de professional.

Welzijn/ probleem-georiënteerd

Introductie: Ik wil het graag met u hebben over wat jullie ouders te bieden hebben.

Beginvraag: Kunt u me vertellen wat het aanbod is van het CJG?

Aandachtspunten:

- Wat doen jullie? Betrokkenen?
- Welzijn versus probleem-georiënteerd

Laagdrempeligheid

Introductie: U heeft me net uitgelegd wat het CJG ouders te bieden heeft. Nu zou ik het graag met u willen hebben over hoe het proces verloopt als ouders het CJG binnen komen.

Beginvraag: Wat gebeurt er als een ouder binnen komt?

Aandachtspunten:

- Ontvangst
- Opleiding/training uitvoerder
- Gebouw

Sociaal netwerk & sociale steun

Introductie: U heeft me net verteld wat er gebeurt wanneer een ouder het CJG binnenkomt, nu wil ik het graag met u hebben over contacten tussen ouders.

Beginvraag: Komen ouders met elkaar in contact binnen het CJG?

Aandachtspunten:

- Hoe?
- Rol van de professional

Tips

Introductie: Net heeft u mij verteld over de contacten tussen ouders binnen het CJG, nu zou ik het graag met u willen hebben over punten die u liever anders ziet binnen het CJG.

Beginvraag: Tips voor beginnende CJG's?
Mist u nog iets binnen het CJG?

Afsluiting

- Nogmaals dank voor deelname
- Contactgegevens uitwisselen mochten er nog aanvullingen zijn
- De uitkomsten van het onderzoek worden opgestuurd

- Presentje geven

Date interview:

Time interview:

Introduction conversation professionals

-Thanks for attendance and participation

-Explanation aim research

- Mapping of the differences in approach between Dutch Youth and Family Centres and Swedish Family Centres.

-Explanation about anonymity.

-No good or false answers: it is about your experience

-Consent for voice recording

- Structure interview

- Context & facts
- Entrance
- Improvements

Situation

Background of the professional.

Well-being/ at-risk oriented

Introduction: I would like to talk about the services you offer to parents.

Starting question: Can you tell me what the offer is of the Family Centre?

Point of special interest:

- Well-being versus problem oriented focus

Threshold

Introduction: You just explained to me what kind of services the Family Centre offers to the parents. Now I would like to talk about how the process works when parents enter the Family Centre.

Starting question: What happens when a parent enters the Family Centre?

Points of special interest:

- Reception
- Education/training professionals on the executive level

Social network & Social support

Introduction: You just told me what happened when a parent enters the Family Centre, now I would like to talk about the contacts between parents.

Starting question: Do parents come into contact with each other because of the Family Centre?

Points of special interest:

- How?
- What is your position and part in this?

Tips

Introduction: We just talked about the contacts between parents within the Family Centre, now I would like to talk about things you would like to see differently.

Starting question: Is there anything you miss in the Family Centre?

Closing off

- Again, thank you for participating
- Exchange contact information
- The results of the research will be send to the professional
- Present

Datum interview:

Tijd interview:

Introductie gesprek ouders

- Dank voor deelname
- Uitleg doel onderzoek
 - o In kaart brengen van de verschillen in aanpak van CJG's tussen Nederland en Zweden.
- Uitleg over anonimiteit
- Geen goede of foute antwoorden: uw ervaring is van belang
- Toestemming voor bandopname
- Opbouw interview
 - o Context & feiten
 - o Binnenkomst
 - o Verbeterpunten

Situatieschets

Ingaan op de samenstelling van het gezin om het ijs te breken en de context in beeld te brengen.

Voorbeeldvragen:

- o Hoeveel kinderen heeft u?
- o Hoe oud zijn uw kinderen?

Ik wil graag van u weten wat uw ervaringen zijn met het Centrum voor Jeugd en Gezin. Eerst zou ik graag uw eigen ervaringen willen horen, daarna de ervaringen van anderen.

Laagdrempeligheid

Introductie: Ik wil het graag met u hebben over de eerste keer dat u het Centrum voor Jeugd en Gezin bezoekt.

Beginvraag: Kunt u me vertellen hoe de eerste kennismaking eruit zag?

Aandachtspunten:

- Reden van binnenkomst
- Op afspraak/spontaan
- Gebouw

Sociaal netwerk

Introductie: U heeft me net uitgelegd hoe het in zijn werk ging toen u voor het eerst het CJG bezocht. Nu zou ik het graag met u willen hebben over de contacten die u op doet binnen het CJG.

Beginvraag: Doet u contacten op binnen het CJG?

Aandachtspunten:

- Met wie?
- Is er veel veranderd in de omgeving/contacten in de omgeving door het CJG?
- Zo niet, had u daar wel behoefte aan gehad?

Sociale steun

Introductie: U heeft me net verteld over de contacten binnen het CJG, nu wil ik het graag met u hebben over hoe u de contacten heeft ervaren.

Beginvraag: Heeft u wat aan de contacten?

Aandachtspunten:

- Nut van de contacten.

Tips

Introductie: Net heeft u mij verteld over uw ervaringen met de contacten binnen het CJG, nu zou ik het graag met u willen hebben over punten die volgens u anders kunnen worden binnen het CJG.

Beginvraag: Mist u nog iets binnen het CJG?

Andermans belevenissen

Introductie: We hebben het net over u gehad, nu zou ik het graag met u hebben over andermans belevenissen.

Beginvraag: Waarvoor komen ouders over het algemeen naar het CJG?

Afsluiting

- Nogmaals dank voor deelname
- Contactgegevens uitwisselen mochten er nog aanvullingen zijn
- De uitkomsten van het onderzoek worden opgestuurd

- Presentje geven

Date interview:

Time interview:

Introduction conversation parents

-Thanks for attendance and participation

-Explanation aim research

- Mapping of the differences in approach between Dutch Youth and Family Centres and Swedish Family Centres.

-Explanation about anonymity.

-No good or false answers: it is about your experience

-Consent for voice recording

- Structure interview

- Context & facts
- Entrance
- Improvements

Situation

Discuss the composition of the family to break the ice and to bring the context into vision:

- How many children do you have?
- How old are they?

I'd like to know what your experiences are with the Family Centre. First I would like to hear your own experiences, after that I would like to talk about the experiences of other parents.

Threshold

Introduction: I would like to talk about the first time you visit the Family Centre.

Starting question: Can you tell me what the first acquaintance was like?

Points of special interest:

- Reason of entrance
- Appointment or spontaneous
- Building

Social network

Introduction: You just told me what happened the first time you visit the Family Centre. Now I would like to talk to you about the contacts you have because of the Family Centre.

Starting question: Do you have any contacts in the Family Centre?

Point of special interest:

- With whom?
- Has there anything changed in your environment of contacts in your environment, since you visited the Family Centre?
- If not, did you have the need for new contacts?

Social support

Introduction: We talked about the contacts with other parents in the Family Centre, now I would like to talk about how you have experienced these contacts.

Starting question: Heeft u wat aan de contacten?

Point of special interest:

- Value of the contacts.

Tips

Introduction: We just talked about your experiences with contacts in the Family Centre, now I would like to talk to you about things you would like to see differently.

Starting question: Is there anything you miss in the Family Centre?

Experiences of other parents

Introduction: We talked about your experiences, now I would like to talk to you about the experiences of other parents.

Starting question: What is the reason that parents visit the Family Centres?

Closing off

- Again, thank you for participating
- Exchange contact information
- The results will be send to the parent
- Present

Appendix B

Outside the Dutch Youth and Family Centres



Inside the Dutch Youth and Family Centres





Outside the Swedish Family Centres



Inside the Swedish Family Centres





