www.AUSTRALIANACADEMICPRESS.com.au

ARTICLE AVAILABLE ONLINE
Children Australia
Volume 36 ▮ Number 4 ▮ pp. 199–206

Social Pedagogy: Differences and Links to Existing Child Care Practice

Robyn Kemp
ThemPra Social Pedagogy C.I.C., United Kingdom

Some commentators have pointed to the United Kingdom (UK) having a tendency towards reducing 'new' concepts or practices so much that they bear little resemblance to the original form. This is why I wish to highlight in this article some of the sometimes subtle, yet profound, differences in a social pedagogical approach to child care in order to better understand the potential of social pedagogy for developing practice. There are five main sections to this article: first, I describe social pedagogy and a conceptualisation of a social pedagogical approach; second, the UK context is examined so as to set the scene for the third, fourth and fifth sections, which examine reflection, relationships and the concept of lifespace through a social pedagogic lens, drawing links to existing good practice in the UK. Although this commentary does not discuss Australian practice, I believe there are some important aspects in the way in which the UK has tried to familiarise itself with social pedagogy that can help Australian readers to better understand some of the subtleties and nuances of the paradigm and inspire their own reflections.

■ **Keywords:** social pedagogy, residential child care, relationship, reflection, lifespace.

Social pedagogy is a relatively new concept in the United Kingdom (UK) but has a very long history in many continental European countries. I am a UK social worker whose passion for over 20 years has been with residential child care, in particular, and children in care, in general. Over the past few years I have had the honour, joy and relief of learning about social pedagogy through working with European social pedagogues, studying for a Master of Social Pedagogy at the Institute of Education in London, and through a great deal of reading, reflecting and — my favourite — dialogue. I have been co-facilitating training courses on social pedagogy across the UK with European social pedagogues for the past three years and, if I had a pound for every time I have heard 'oh, we do this already', I would be a rich woman. There are two main sides to this statement I wish to consider: one is that it shows there are elements of social pedagogy that are intrinsically familiar to a UK residential child care audience — and probably to an Australian audience as well — and which can build on existing good practice; the other is that perhaps it shows how complex social pedagogy can be to fully understand and indeed to practice.

Some commentators have pointed to the United Kingdom (UK) having a tendency towards reducing 'new' concepts or practices so much that they bear little resemblance to the original form (Hämäläinen, 2003; Lorenz, 2008; Smith & Whyte, 2008). This is why I wish to highlight in this article some of the sometimes subtle, yet profound, differences in a social pedagogical approach to

ADDRESS FOR CORRESPONDENCE: Robyn Kemp, Associate Project Manager, ThemPra Social Pedagogy C.I.C., 95 Thorpe Road, Forest Gate, London E7 9EA, United Kingdom. E-mail: robyn@thempra.org.uk

child care in order to better understand the potential of social pedagogy for developing practice. There are five main sections to this article: first, I describe social pedagogy and a conceptualisation of a social pedagogical approach; second, the UK context is examined so as to set the scene for the third, fourth and fifth sections, which examine reflection, relationships and the concept of life-space through a social pedagogic lens, drawing links to existing good practice in the UK. Although this commentary does not discuss Australian practice, I believe there are some important aspects in the way in which the UK has tried to familiarise itself with social pedagogy. These can help Australian readers to better understand some of the subtleties and nuances of the paradigm and inspire their own reflections.

Describing Social Pedagogy and a Social Pedagogic Approach

Ask 16 social pedagogues to describe social pedagogy, and you will get 16 different answers. It is widely acknowledged that, due to the nature of its development in different countries, defining social pedagogy is problematic as there is no accepted single definition (Kornbeck & Rosendal Jensen, 2009; Lorenz, 2008; Petrie, Boddy, Cameron, Wigfall, & Simon, 2006). To quote a few, it has been described as 'a theory of all the personal, social and moral education in a given society, including the description of what has happened in practice' (Mager, as cited in Winkler, 1988; also cited in Eichsteller & Holthoff, pp. 176–178 in this issue); 'educational action by which one aims to help the poor in society' (Diesterweg, 1850, as cited in Cannan, Berry, & Lyons, 1992, p. 73); and 'educational solutions to social problems' (Hämäläinen, 2003, p. 71). In terms of a social pedagogic approach to working with children, Petrie et al. (2006) argue that social pedagogues see themselves 'as a person, in relationship with the child or young person' (p. 22). Being 'in relationship' is 'ambiguous and not easily measured' (Steckley & Smith, 2011, p. 188) but relies on demonstrating key principles through the head, heart and hands.

Eichsteller and Holthoff (2011) use the diamond model as a way of illustrating the key principles of a social pedagogic approach — seeing the diamond as a metaphor to describe the belief that there is a diamond in everyone, no matter who they are or what they have done or experienced, and that the role of the social pedagogue is to help bring out and polish the inner diamond so that it shines as brightly as it can. Cameron (2011) summarises the elements of the diamond model, all of which are interconnected and developed through positive experiences

- a multi-dimensional and holistic understanding of wellbeing
- learning from a standpoint of the 'competent' or 'rich' child, where education does not impose but facilitates children's capacity to think for themselves
- authentic and trusting relationships between professionals and young people that acknowledge and work with both the authoritative and affectionate, as well as retaining a sense of the private
- empowerment or promoting active engagement in one's own life and within society, and as such is fundamentally concerned with children's rights and developing the skills for living in a democracy.

While these four aspects of caring for children — wellbeing, learning, relationships and empowerment — are familiar to, and practised by, UK care practitioners to some extent, influences of the political and socioeconomic background of our culture, discussed below, may skew our interpretations. The UK's deficit based, technical/rational and bureaucratic systems can make it hard for individuals and organisations to care for the wellbeing of the whole child, or to see and respond to them as competent social beings with rich and extraordinary potential. There may well be systemic conflicts with social pedagogy, but relationships play a key role in realising 'the diamond', and this means that there is much that the individual can do and develop.

The UK context

Social constructivism forms part of the conceptual framework of social pedagogy and underpins its practice. It highlights the importance of culture and context in understanding what occurs in society and how people experience their lives. As such, reality, learning and knowledge are believed to be socially constructed (Berger & Luckman, 1966). Hetherington (2006) argues that factors influencing child welfare systems are 'structures, professional ideology and culture' (p. 33) and that 'the aspects of culture … are about the relationship between the citizen and the state and the reciprocal expectations of parents and the state about each other's role in assuring the welfare of children' (p. 36).

Over the past 30 years or so the UK, especially England where three quarters of the UK population reside, has had a neoliberal political and socioeconomic system. The power of the state has been diminished — as has the power of the unions — and an emphasis on individualism, consumerism and the free market economy now pervades the powerful and authoritative cultural texts of law and policy (Harvey, 2005). One in three children in the UK today lives in poverty (OECD, 2011) — a shocking number given the wealth of the nation. This negatively impacts on education, health, quality of life and opportunities for the future and means that these children 'experience deprivation of the material, spiritual and emotional resources needed to survive, develop and thrive, leaving them unable to enjoy their rights, achieve their full

potential or participate as full and equal members of society' (UNICEF, 2005).

Our state laws relating to children are widely considered to be centred on a deficit construction of children and childhood, influenced by developmental psychology (James & Prout, 1997; Mayall, 2000; Oakley, 1994). Professional ideology and structures relating to child welfare in the UK are built upon the premise that children should follow 'normal' developmental paths, and those who veer from this need to be protected or saved from harm, and/or treated (and 'cured' if possible) for emotional and behavioural difficulties, and/or controlled when they are perceived as challenging (Petrie, 2010). Under our laws and systems we focus on protecting children from harm: any likelihood of or actual 'significant harm' 'suffered' by the child must be attributable to the parent(s), or it must be shown that the child is 'beyond parental control' in order for the child to be taken into care (Children Act, 1989, §31). The responsibility for child rearing, therefore, is attributed to parents and State support or intervention is initiated when parents are perceived to be failing.

Our UK system can be described as having a child protection orientation, in contrast to some social pedagogic continental European countries (see Cameron, pp. 187–198 in this issue), which can be described as having a child and family welfare orientation (Hetherington, 2006). There are a great number of services and sectors supporting children and families in the UK (such as social work, health, education, youth work, or youth justice), yet we have no common underpinning philosophy to working with children and families and with each other.

Over the past 30 or 40 years how we care for children who live away from home for whatever reason has come under much scrutiny following the deaths of children who were known to social services and the exposure of incompetence and abuse in some children's homes and within some organisations. The ideal of bringing up children who live away from home in a way that resembles usual family life means that foster care is used widely as the preferred option in the UK, and residential child care is generally seen as the last resort (Children, Schools and Families Committee Report, 2009). The majority of English children's homes (and nearly all homes for elderly people) are now provided by profit making companies. Children's homes tend to try to emulate a family home environment by accommodating between 4 and 8 children, but practice is highly proceduralised and technically focussed, and there is a heavy emphasis on recording to provide practice evidence (Petrie et al., 2006; Smith, 2009).

Reflection, relationships and lifespace are three aspects of care practice that are central to a social pedagogic approach and to some extent each aspect can be seen in UK residential child care practice. I begin with exploring reflection as this is so central to social pedagogy and social pedagogues; and as it is crucial for the following sections, which explore relationships and the concept of lifespace.

Reflection

Reflection is an aspect of practice that has received increasing attention over the past ten years or so. The ability to reflect must be demonstrated as part of the minimum qualification for the children's residential care workforce. Nowadays, many or even most UK children's homes have some allocated time for group reflection — for instance in team meetings, sometimes with a facilitator from psychological services — and individually within professional supervision that is not entirely task centred. However, practice is highly proceduralised in the UK. Understanding of, and valuing, reflective practice is patchy. Within English National Minimum Standards (NMS), for example, although recently revised, reflection is discussed only in terms of reviewing incidents of challenging behaviour as well as supporting and encouraging the child to reflect upon his/her history. There is no explicit expectation that practitioners reflect upon their actual or potential impact on children, nor the impact children have, or may have, on practitioners.

Social pedagogues reflect frequently and regularly using a solution-focused approach and theories (a word not found in the NMS) to analyse and learn from practice and, as such, it is seen as empowering. Cameron, Petrie, Wigfall, Kleipoedszus and Jasper (2011) found that reflection was often a struggle for some residential services and practitioners in a national project piloting social pedagogy. This was largely due to organisations and individuals not allocating enough time, but also because some homes were in a 'constant crisis mode' (p. 32). When critical reflection was enabled, some practitioners, managers and organisations very much welcomed the opportunity and acknowledged its unique value in improving the experiences and outcomes for both staff and children.

Reflection is a constant element of individual and group social pedagogic practice. It takes place in the moment and following events — reflection in and reflection on. It uses both theoretical understanding and self-knowledge and is allied to professional accountability (Petrie et al., 2006). Practitioners reflect by themselves and with colleagues on a day-by-day basis, in team meetings and in supervision. A social pedagogic approach to reflection encourages practitioners to be critical, to understand power relations, to draw out learning from experiences and theory, and does not apportion blame. It also requires critically reflecting on the extent to which the team is moving in the right direction, making progress, thinking and getting into dialogue about what the right direction actually is, thus taking a process perspective on 'outcomes'.

The Danish social pedagogical concept of the 3Ps (the professional, the personal and the private; see Holthoff & Harbo, pp. 214–218 in this issue for further explanation)

helps reflective processes in understanding and planning for the impact of events and developing empowering relationships. It distinguishes the professional, the personal and the private, thus helping to clarify professional boundaries. This concept is something I have found to be liberating as it encourages us as practitioners to use theory to better understand ourselves, other people and situations, plan the work, to be self-critical and to continually learn. It also encourages us to use aspects of ourselves in relationships (as relationships are a catalyst for change), and allows us to use the self more safely by making sure that any use of self is grounded in theory and ethical purpose.

In my reflections on the 3Ps I have tentatively concluded that in UK social work and social care we tend to recognise 2Ps: the professional and the private. Without clear ethical purpose and theoretically based understanding of the personal (what we bring to the relationship and which is about who we are and what we can offer), the private can become synonymous with the personal. Reticence about crossing the line between professional and private means that practitioners can steer clear from becoming close to young people as the fear of becoming too close is at its heels. The extra dimension of the private in the 3Ps helps practitioners to be authentic and to develop close relationships with young people in ways that support and empower them to take control of their lives — and in ways which also take care of the practitioner.

Self-knowledge is critical if we are to develop strong, authentic relationships with children and young people. We have to be able to recognise what is going on for us emotionally, as the children and young people are likely to challenge our emotions at times and connect us with feelings that are private; and it is when our private emotions take over in practice that we risk overstepping professional boundaries. Taking personal and collective responsibility for reflecting in and on practice on a frequent and regular basis strengthens our relational abilities and our competence to contain the distressed and distressing emotional behaviours, reactions and responses from children and young people. Critical reflection encourages us to be curious, to steer away from making quick judgements and acting upon them, and to gather the perspectives of others involved in the child or young person's life before setting and when reviewing goals.

Making time for reflection may seem to be a considerable challenge, but it saves time in the long run. Most importantly, it helps us to develop empowering and transforming relationships with those we care for and care about. For me, critical reflection is a cornerstone to a social pedagogical approach, and there is no good reason why we cannot step up its development in UK children's homes.

Relationships

Under Standard 3 of the NMS entitled 'promoting positive behaviour and relationships' the outcome 'children enjoy sound relationships, interact positively with others and behave appropriately' is promulgated and assessed through inspection. But what meaning lies behind the notion of a 'sound relationship' and how children should 'enjoy sound relationships' is less than clear, and, to me, grouping relationships with behaviour in this way is problematic as it focuses on one aspect of the child, as opposed to the whole person. Indeed, a recent government report noted 'the failure of the care system to replicate or compensate for the stable relationships that most children have with their parents is one of its most serious and long-standing deficiencies' (Children, Schools and Families Committee Report, 2009, para. 27). I have long found the legal, regulatory and policy frameworks and guidance for children's homes to be confusing, lacking in coherence and divorced from a holistic approach to being with and helping children and young people. This has been echoed by participants during training courses I facilitate. The deficit construction of the child and the need to rescue, treat and/or control the child in care, as mentioned earlier, is evident in the standards and regulations for children's homes and focuses practitioner attention on these perceived deficits. Frequently this has detrimental effects on recognising and developing strengths and on developing strong, healing, empowering relationships. Residential child care in the UK has become a technical-rational set of tasks, heavily regulated and bureaucratic (Steckley & Smith, 2011).

However, there is some excellent relational work in UK children's homes, where practitioners patiently walk alongside a child in crisis, being careful to praise and encourage all the positives, nurture their physical, social and emotional development and where the relationship is clearly valued by both the child and the practitioner. I have seen practitioners go out of their way to be there for the child when they need it the most and also when it's just a good thing to do, despite the practitioner's own needs. I see social pedagogical work even where the term is unknown or little understood. What is common among these practitioners is a sense of ethical purpose, authenticity and congruence, of using everyday situations to develop power-sharing relationships and learning opportunities, and of using theory and self-knowledge to continually improve their relationships with children and with the children's other social relationships. They pay attention to the little things that are important to the child and show that they care by knowing what the child wants and values — we all appreciate it when someone knows how to make us a cup of tea just the way we like it. Working alongside the child — to 'Velcro' ourselves to the child, as a Danish colleague puts it — helps children to feel secure. They know that they can depend on us, and through this security they can develop independence (see Maier, 1979, for further development of this).

'Every child needs someone who is crazy about them' is a phrase perhaps familiar to many, coined by Uri Bronfenbrenner, a Russian-American psychologist who developed ecological systems theory. Residential practitioners have the opportunity to be that someone, but it is often a complex relationship due to the child's previous experiences of relationships, which may have been abusive or difficult. As human beings we all depend on social relations with others, especially the significant others who have an emotional meaning to us. We need to feel important to someone and to feel that someone has a special meaning in our life. We need to be recognised and appreciated by others — we need our feelings and intentions to be recognised and appreciated as they are. We use others as mirrors in the way they relate to us. The way other people react to us tells us how we are interpreted and perceived; this again has an impact on our behaviour and self-knowledge. Berit Bae, a Norwegian social pedagogy researcher, developed her work on the pedagogy of recognition. According to Harbo (2011, personal communication), Bae's studies are rooted in the philosophical work of Georg Hegel, who argued that recognition is about both parties being able to take the other person's view for a moment.

> Bae describes the pedagogy of recognition as requiring an understanding that:
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> - All development is relational and it is always the adults who have responsibility for the relationship.
> - The quality of the relationship has an impact on the relationship.
> - Recognition is oxygen for the mental health and joy is relational vitamins.
> - Recognition is about self worth and being "confirmed" as a human being.
>
> We cannot integrate or include a person who is negatively described. (Harbo, 2011, personal communication)

In terms of relationships in UK residential child care Bae's key elements of the pedagogy of recognition are poignant. They point us to the importance of developing strong and authentic relationships, help us to find ways of recognising the child in ways that perhaps they have not experienced before, and encourage us to find and create joy, laughter and moments of happiness. Eichsteller and Holthoff's diamond model describes happiness together with wellbeing, acknowledging that happiness is usually experienced in the short term, while wellbeing is more about the long term. As practitioners we have the responsibility to acknowledge and develop opportunities for happiness on a day-to-day basis as these contribute greatly to overall wellbeing, and especially as the children we care for may have had few or confused experiences of happiness and joy before coming into care. The joy we experience through and within a relationship impacts positively on the quality of the relationship and, in turn, also helps us to address the difficult stuff, making those conversations perhaps easier to manage for both the child and the practitioner.

Bae's last point resonates with me strongly, as within our culture and systems the negative description of children in care dominates. For example, I have never seen a referral for a child that has not described them in mainly negative terms. However, most children's homes I've worked with tend to wait to experience the child before accepting negative judgments. But this is not just about referrals, this is also about every moment of every day living and communicating with children, families and colleagues. Separating judgments about the child from their behaviour means we can describe negative behaviour without explicitly or implicitly describing the child negatively. This requires practitioner reflection in the moment and on the situation and relationship (as described above) in order to develop our individual and collective self-knowledge. We must manage our 'natural feelings of aversion, attraction or counter-aggression as well as any issues of our own that can often be triggered' by children's behaviours (Steckley & Smith, 2011, p. 188).

Relationships in residential child care are deeply complex and require us to think before we act. This emphasises the importance of using listening, reflection, theory and dialogue in order to develop what Petrie et al. (2006) describe as 'our capacity to accept others' (p. 24). Through our capacity to accept others, and through relationships, we have the power to enable and empower the children we care for and care about to accept themselves and successfully manage the triumphs and difficulties in their lives.

Lifespace

Lifespace is a word that is relatively new to the UK, but as a concept it may be more familiar. It is described as 'the arena for promoting growth …: the physical, social and psychological space shared by children and those who work and live with them' (Steckley & Smith, 2011, p. 187). What is central to the concept of lifespace is a commitment to power-sharing, and to paying attention to the small detail, oft-overlooked. Children's homes across the UK these days do not resemble the institutional group homes of previous decades; they tend to be smaller now and similar to family homes, cosy and well kept. Staff take care to keep the home well maintained as it is recognised that, in order for children to feel that it is worth investing emotionally, socially and physically in a home, those in charge need to demonstrate that they too value and take ownership for the surroundings. In many UK children's homes cooks and cleaners are employed, but this is not the case in many, if not most, social pedagogic homes. The everyday tasks of cooking and cleaning are seen to be excellent opportunities for relational work, getting to know children, for developing a sense of belonging, helping everyone to feel ownership for the lifespace, and for developing independence skills. Some of the best social pedagogical work I have observed in the UK has been at

the kitchen sink with a child, doing the dance of the vacuum cleaner with another, or with a group of children preparing and serving meals for each other. When children are actively engaged in the mini society that characterises lifespace, ownership for that society grows and thrives.

Petrie et al. (2006) argue one principle of pedagogical approach is that 'children and staff are seen as inhabiting the same life space, not as existing in separate hierarchical domains' (p. 22). This is where lifespace as a concept poses challenges for practitioners and children to consider. For example, the staff office in a children's home has long been a place of contention. Power is held in the office: it is where staff congregate without children and talk about children, it is where all the recording about children is stored and sometimes created, where the money is. Sometimes it is where staff go to relax, it is locked when there is no-one there, and sometimes when staff are there it is where the phone is and where the keys are stored. Teams I have worked with who have developed a positive lifespace have looked at how the use of the office can be changed so that it is not seen as a place children are not allowed to share. We have responsibilities under UK law to keep records and other things securely and safely and to be able to have confidential conversations in person or over the phone, so the office is needed (they have offices in children's homes in Denmark and Germany, too). But there are many ways of sharing the power base; for example, one home I worked with used to have a sign on the usually closed or locked door saying 'Staff Office — Keep Out'. The children were constantly at the door and occasionally tried (sometimes succeeding) to break in. The staff decided they would keep the door open as a rule, only closing or locking it when absolutely necessary, and replaced the sign to say 'please knock before you enter'. They made a point of not gravitating toward the office but spending as much time as possible in the rest of the home with the children. They started completing the children's daily recording in the living room or kitchen, often with the children, many of whom regularly added to their own records. The office became just another room and was no longer a place of power and intrigue but a place that the children recognised as the place for confidentiality. This can be seen as a very social pedagogic way of finding a solution and illustrates how the approach can be allied to and built on existing good practice. The lifespace is where children can develop or redevelop trust and sense of belonging through relationships with staff and with each other; these are essential building blocks for human development and wellbeing.

Conclusion

I have attempted to outline the cultural and systemic contexts of the UK and a few of the subtle yet profound differences of a social pedagogical approach that may appear similar to UK practices. Reflection is at the centre of a social pedagogue's practice and, although there is growing recognition that reflection is an essential element of practice with people in the UK, our practice of it could be much enhanced by taking a social pedagogical approach. Similarly, relationships are widely understood to be a key conduit for helping people cope with difficulties and manage their lives, but without a holistic and well thought out approach to all our professional relationships, not only relationships with children, we run the risk of limiting the potential within relational work, including that which takes place in the lifespace.

What is important to social pedagogy as an approach and as a paradigm is trust. During my visits to Danish children's services I have been struck by (and envious of) the culture of trust and accountability that was evident between professionals, and between professionals and the public. Although some UK services and organisations value trust, a culture of mistrust is widely thought to permeate societal views of public services. Scandals and failures have led the call for greater accountability, and in the UK auditing has become the way for public services to demonstrate accountability. The notion of audit has been transported from the financial sector to cover ever more detailed scrutiny of nonfinancial processes and systems, using targets and performance indicators to measure performance, often in rather incoherent ways. O'Neill (2002) argues that among all public services 'professionals have to work to ever more exacting — if changing —standards of good practice and due process, to meet relentless demands to record and report, and they are subject to regular ranking and restructuring. I think that many public sector professionals find that the new demands damage their real work'. She adds that, 'if we want a culture of public service, professionals and public servants must in the end be free to serve the public rather than their paymasters'. Nearly a decade on, the situation has not yet changed for the better.

Our heavily hierarchical structures, the relatively low level of workforce education and low status of residential child care mean that residential practitioners are rarely seen as authoritative by colleagues in related fields, despite their close relationships with children and their often considerable years of experience. Decision-making about children in care is ultimately the responsibility of, and deferred to, the social worker, and this surely affects the residential practitioner's own sense of having legitimate authority as well as trust between practitioner and child, but also more widely.

The final report of the social pedagogy pilot notes: 'as trust is at the foundation of social pedagogic relationships, the social pedagogues were doubtful about whether the current structures for expertise and communication were serving the young people's best interests' (Cameron et al., 2011, p. 76). I echo this concern and also see it as pointing to a crucial issue: education of the workforce. The UK res-

idential child care workforce is educated mainly to the equivalent of what young people at age 18 achieve at school, not the degree level education of social pedagogues. Despite countless calls for higher education over many decades, those caring for the most vulnerable, troubled and sometimes challenging children in the UK are not afforded an education commensurate with the needs of the children cared for, and outcomes for children in care in the UK remain extremely poor, despite countless government funded initiatives to address this. This is not the case in Denmark and Germany, for example, where the welfare systems are based on a family service orientation as opposed to the UK's child protection orientation (see Cameron, pp. 187–198 in this issue for a detailed discussion) and where a coherent framework, with clear ethical purpose and appropriate education and training for the workforce, fills the practice toolkit with an array of ways to help children fulfil their unique and extraordinary potential. There are many practitioners in children's homes across the UK with little or no formal education who, with the right support and guidance, are able to reflect professionally, develop strong relationships with children and colleagues, and create and develop emotionally warm and secure homes where children can thrive. Social pedagogy has enormous potential for improving the experiences and outcomes for children in care and for developing individual and sector abilities, knowledge and attitudes, and I have found through my work that education and training in social pedagogy liberates a thirst for knowledge and understanding from those with no formal qualifications to those with a doctorate, from those in residential child care, foster care and social work to those in youth work, health and education. In my view, this can only be a good thing for children and for society, and if there was ever a time when the UK needed the coherent framework social pedagogy offers, it is now.

Examining the cultural and systemic challenges that our political and socioeconomic structures pose for social pedagogy could lead readers to understand that social pedagogical approaches cannot thrive easily in the UK, or indeed Australia. But I would argue, and have attempted to illustrate, that by starting with ourselves and how we relate to children, families and to each other, we can nurture the conditions for social pedagogy to develop and thrive. At the start of this article I stated that I have had the honour, joy and relief of learning about social pedagogy, and I would like to explain what I mean by this a little more. Before I began to delve into social pedagogy I had spent 10 years or so trying to identify what worked in residential child care, but every time I thought I had found the answer a young person would illustrate that I had not. Social pedagogy led me to ask another question — the question of how. There are no panaceas for children in care, and what works will ultimately depend on the individual child, their family, the carers, the children's group, the organisation, and the systems and culture within which we all exist. Social pedagogy helps me to see the whole picture, the whole child, myself as a whole person, not only as a professional but also as a citizen of my society and the world. It helps me to identify where my practice is social pedagogical and where it could benefit from further development through examining complexities, subtleties and subtexts. This is not painless, as the journey to understanding and practicing social pedagogy does not take the path of least resistance, but it has been and continues to be challenging and transformative, and hugely uplifting (hence the honour, joy and relief). And as such I recommend readers to delve into this discipline to see what it can offer and how the lived experiences and futures of children in Australia could be improved. ◻

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