

# FOCUS ON PREVENTION\*

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What we are discussing is the notion of prevention as directed toward families. The idea is to prevent the break-up of families in our community which is costly both in economic and social terms ... but, as I hope to demonstrate, there is more to it than that.

Let me also say that the notion of prevention, both in theoretical and conceptual terms as well as in applied, practical terms is nothing new, it has been around for a long time. At the turn of the last century it became a popular theme with the advocates for an expanded role for local government in the U.K.; the work of Sydney and Beatrice Webb, in particular, made a substantial and important contribution there.

Briefly, the message was: provide, through public means, facilities like health services, education, recreation services and a generally healthy environment and you have the basic building blocks for society's future social capital, you prevent breakdown occasioned by disease and ignorance which had been such scourges in the recent past. Of course there was much more to this, but the idea of prevention WAS a part of the great Fabian-socialist dream which was shared by that remarkable husband and wife team - Sydney and Beatrice Webb.

At its most refined point, the debate on prevention today is directed to families and my colleagues at the seminar will concentrate on that aspect. My task is to explore the concept of prevention.

There are some assumptions which are often stated as given but which are not easy to verify empirically. The most commonly quoted is that of benefit - who benefits from prevention? At the broadest (ultimate) level this is believed to be the whole community, at its narrowest (immediate) it is any particular family. I will explore that a bit more in a moment.

First, what do I mean by family? I am not going to fall into the trap of defining what I mean by family, all definitions that I have seen are either too narrow or so wide as to become meaningless. Let me confine myself to saying

that what I mean here is that small social unit of one or two adults who have responsibility for rearing children, usually stemming from their physical and emotional union, though increasingly stemming from only one adult's union with another partner. That would at least cover the bulk of families with dependent children in Australia, if you allow that such a description falls short of purism. We now recognise couples married or unmarried types of families, single, widowed or never-married, single sex couples, and so on, a real rag-bag of combinations, but all are seen as basic social units for bringing up children. Families, particularly nuclear families, have come under attack in recent years for being demanding, tyrannical, hard on kids, suspect and worse, hence the high divorce rate, especially since 1975 when the Family Courts Act freed things up and the rising tide of 'Dinkies' - Dual Income, No Kids - who have foresworn producing children as inimicable to the fast lane life-style of the modern Australian.

Despite all the opprobrium heaped on the family, it has survived the onslaught. Why? I think that there are two major reasons - one is that there are deep, institutionalised values embedded in the notion of the family which have been supported by governments of societies all over the world. They are also relatively cheap to run compared with the alternatives. It is interesting here to recall that in the fervor and ferment of the Russian Revolution, post 1917, the family was destined to be abolished as a social unit, but proved too resistant. And what of the alternatives? The Commune, the Kibbutz, Boys' Town, Children's Homes - none has proved its superiority over the family.

The family has survived and is thought to be worth preserving, it has expressive value in that it provides (ideally) emotional bonds between its members, security, role modelling, formal and informal learning experiences and many more such things. In instrumental terms it provides for practical needs (e.g. shelter,

food, etc.) and as mentioned above, given that children are an important form of social capital investment, comes quite cheap.

The State, for its part, eulogises the family scared to death that if it disappears the alternative will be so much more expensive, but recognises that the cost of raising children, both financial and emotional, has become so high that the family must be provided with help - some of it directly as in the recently upgraded family assistance scheme, and indirectly by providing a swathe of social and recreational services. There is nothing sacrosanct as to the extent of help provided, it can be niggardly or generous depending on reigning ideologies, economic health and abundance or shortage of social capital, i.e. demographic factors. In return for help, the State can and does set standards of minimum functions of families and thereby expects to be given the right to interfere with the rights to privacy of families where required. We can sum up this part of the paper with two short sets of propositions.

The family is a desirable, basic social unit in society, called upon to raise children. It is frail and vulnerable, has some freedom of choice and right to privacy but must be prepared to yield these up if it expects the State to help it survive.

The State is anxious to see the family continue in its child rearing roles, is prepared to share in this task, expects minimum standard of functioning and can be generous or niggardly in the level of support it provides.

As mentioned earlier, the State can be little or much involved with families, from virtually nothing to fullsome support, ideology, economic health, public sentiment, all would be involved. We can present the scenarios in a simple table :

|   | TYPES OF IDEOLOGICAL COMMITMENT                |  |  |
|---|--|--|--|
|   | (1)<br>Laissez Faire                           | (2)<br>Residual  | (3)<br>Institutional/<br>Developmental   |
| Levels of State Involvement in Helping Families | no support, State lets family "get on with it" | limited, episodic, short term intervention (niggardly) | fullsome support, part of fabric of society, goes well beyond minimum or floor level |

\* This is an edited version of a paper presented at the Children's Bureau seminar - 'Prevention - Focus on Family Support', held on 12 March 1988, Melbourne. The seminar was jointly auspiced by the Children's Bureau and St. Anthony's Family Service (Melbourne)

I believe that here in Australia we are somewhere on the far right of the residual box and encroaching strongly on the box marked 'institutional/ developmental'. The reason for using developmental is to indicate that we now want to promote families' potential not just provide a floor level type of support. Although this is not the occasion for a greater discussion on this fascinating topic, which comes out of a study of social policy, I should enter a caveat. The way I have presented the above continuum might indicate that there is always a linear progression from laissez-faire to the ultimate, which I suppose is somewhere beyond the developmental. In other words, things will always get better. There is no guarantee for that, progress can be halted and reversed, as ideas and circumstances change. Over the long term, we know from history that societies, empires, civilisations come, stay for a time and then disappear - the glories of Greece and Rome disappeared in the shambles of the Dark Ages ... I digress, back to prevention then.

Prevention has what I would describe as both positive and negative functions ...

On the positive side there is the enhancement of family functioning, allowing it to realise its potential, encourage its independence. These functions correspond largely with the expressive already alluded to;

on the negative side there is the avoidance of family breakup, avoid providing alternative care for children (I realise that in some cases children may be better off in alternative care, which makes for an expressive function to set against the instrumental.) keeping costs down in areas such as health services, law enforcement provisions, etc. We have here the correspondence to the instrumental.

Using a simple framework adapted from the work of A.J. Kahn (1963) on juvenile delinquency services in the U.S.A., we can postulate three levels of prevention which prevail in our society; they are : the ultimate, the intermediate and the immediate, and they have to do with the way that support provisions are organised.

#### **Ultimate**

This refers to the broad, largely mainstream "across the board" provisions - education services, housing, personal social services, recreation (e.g. national parks) facilities. Some have specified eligibility criteria, some are universal, and their main and common element is that they are there to be used, in a sense like public utilities. The Commonwealth government provides much of this range of provision or else presides over the provision, though not by any means exclusively, the States are much involved at this level.

These provisions are broadly preventive in both expressive and instrumental ways.

#### **Intermediate**

Here we get the more identifiably localised provisions, those that are built into a local community and with which the locals can be

more closely involved. The providers, at government level, are all three levels of government, Commonwealth, State and local government, with the last-named expanding more into social or helping service provisions. Participation at this level too is mainstream and we are looking here at services like health clinics, community health centres, primary, maybe secondary schools, neighbourhood houses, senior citizen clubs, all searching for ways of making themselves relevant and attractive to users. Many non-government services also come into this sector.

Again as for the previous level, prevention is an important if not blatantly recognisable element here. The point though is that in their absence, many (most?) families would soon be in strife, many would collapse in the face of inability to purchase alternatives in the open market.

#### **Immediate**

Whilst the ultimate and intermediate level provisions are sufficient to give most families enough assistance to enable them to soldier on, there are some - how many we cannot say except that the literature of the last few decades refers to the "submerged tenth", i.e. 10% of families with dependent children, say 200,000 families in this country (?) - who find it hard or impossible to cope despite the preventive network cast in the other two levels. That there are such families is argued persuasively in many publications, the most recent example of this being a report by Brian Mitchell (1987), Director of St. Anthony's Family Service, Melbourne. These excluded, or multi-deficit or as they were known in the 1940s and '50s, "problem" families, are near or below the expected functioning level implicitly or sometimes explicitly\* set by the State.

So in addition to the support afforded at the ultimate and intermediate levels, they may be offered a range of services, some aimed at the family as a unit, e.g. shelter or housing subsidy or rent guarantee, or family, i.e. group counselling or else aimed at individual members of the family, e.g. job search for a parent, family planning to mother or father, recreation for a child, etc. The range is wide and could justifiably include any number or type of services depending on perceived need and the capacity of an agency to provide them. At this immediate level, families are singled out, pinpointed and provided with a usually highly personalised set of provisions over and above those provided in the mainstream services available at the other levels.

The aim here is to prevent family breakdown in a more overt way than is noticeable at the other two levels.

These immediate level approaches have come in for much criticism - they are said to be demeaning and stigmatising for families, they promote dependency on welfare, they are highly labour intensive, they are not effective (or at least their effectiveness is difficult to

demonstrate) and they can only reach a small proportion of possibly eligible families.

There is no doubt some truth in all of these criticisms. Nevertheless the intensive family support programs, as these preventive services are known, have taken hold in a number of countries. Brian Mitchell in his Report writes of their spread and prevalence in the U.S.A. In the U.K. the work of the Family Service Units is well known and widely respected, and here in Australia, although they have so far kept a low profile, they are beginning to "raise" their faces. In child welfare we have seen a rapid process of reducing the number of children in residential care and a swing toward fostering as a substitute care alternative, short term if possible, long term if not. After fostering, where do we go? Have we reached the end except to refine the foster care process? I think not because we need to turn our attention to avoiding having to bring children into care in the first place. This should be possible in many instances and "intensive family support" is the area which we should now focus on, it is certainly worth the effort.

#### **FOOTNOTE**

1. The progression toward rational and vigorous local government with its theme of social capital building was amply demonstrated in the Webbs' monumental works.

see WEBB, S. and B.

**English Local Government**  
published between 1906 and 1927

see also

LASKI, H.J., JENNINGS, W.I.,  
ROBSON, W.A. (eds.)  
**A Century of Municipal Progress**  
1835 - 1935  
Geo. Allen and Unwin, 1935

In the introduction it quotes Graham Wallas :  
"for the average English citizen, the possibility of health, of happiness, of progress towards the old Greek ideal of 'beautiful goodness', depends on his local government more than on any other factor in his environment."

2. Kahn, A.J., **Planning Community Services for Children in Trouble**  
Columbia University  
Press, N.Y., 1963 pp. 60 - 63
3. Mitchell, B. **Helping Families in Great Need An American Perspective**  
St. Anthony's Family Service, 1987

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\* Explicitly set in statutory settings like child neglect legislation, health regulations, compulsory school attendance requirements, etc.