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COOPERATIVE RELATIONSHIP BETWEEN THE PARENTS OF PERSONS WITH INTELLECTUAL AND DEVELOPMENTAL DISABILITIES AND PROFESSIONAL STAFF

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Abstract

To successfully educate and rehabilitate persons with moderate, severe and profound learning disabilities it is vital to have an effective cooperative relationship between their parents and the professional staff working with these persons. This paper presents the results of a study which examines how the level of cooperative relationship between the parents of persons with moderate, severe and profound learning disabilities and the professional staff of Training, Occupation and Care Centres in Slovenia is correlated to the interactive style and family competence of their families. The sample comprised 296 randomly selected parents and 298 randomly selected professional staff. The results show that the level of the relationship between parents and professional staff is significantly correlated to the level of the interactive style and family competence both in the parents' families and the families of the professional staff. The conclusion proposes some steps for improving the situation in this field.

Key words: Parents of persons with moderate, severe and profound learning disabilities, professional staff, family competence, interactive style, cooperative relationship.

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Introduction

The partnership between a family and a Training, Occupation and Care Centre (hereinafter: centre) may be defined as a cooperative relationship between the family members and the professional staff who are focused on the needs of persons with special needs – with moderate, severe and profound intellectual disabilities (hereinafter: PSN) and their relatives. Cooperation between the parents of PSN (hereinafter: parents) and professional staff (hereinafter: staff) has been linked to better PSN achievement by a number of studies (Smith et al, 2004: 76, Beveridge, 2005: 39-43, McLaughlin et al, 2008: 228). Successful cooperation has proved to be extremely useful in educating these persons. Slovenian legislation accordingly gives parents the right to take part in the educational process of their PSN under the Special Education Programme (Zakon o usmerjanju otrok s posebnimi potrebami, 2007, Article 11), carried out by centres (Zakon o usmerjanju otrok s posebnimi potrebami, 2007, Article 16). However, staff attitudes to this right vary as does the parents' willingness to cooperate (Končar, Antič, 2006: 14). Cooperation is influenced by various factors and parental attitudes (O'Shea, O'Shea, 2001, Gray, 2002, Miller, 2003), in particular mutual understanding, trust, respect, warmth, the presence of hope, recognition of diversity, knowledge, assistance, successful communication and the search for opportunities conducive to a positive and bright future for individual PSN and their families. The listed qualities of a cooperative relationship are based on the relationships within the parents' families and families of the staff working with PSN at the centres, and the interactions between members of such families and beyond them. The study puts family competence and interactive style as defined by the Beavers systems model (Walsh, 1993: 77-103) in relation to the cooperative relationship between parents and staff. Family competence describes the characteristics of family relationships and the way in which the family functions with regard to leadership, hierarchy, autonomy and parental coalition. Interactive style, on the other hand, describes the frequency of family interactions with outsiders, the family's adaptive style and the interdependence of family members. Brajša (1991: 122) argue that it is also important to maintain relationships which improve the relationship prospects for both the parties involved. The study of factors which predict successful parent-staff cooperation is therefore vital for theory and practice.

Family competence and interactive style

Experts engaged in family research nowadays avoid terms which characterize families as ideal, happy, healthy or normal (Tomori, 1997: 151, Pols, 2006). When discussing families which perform their roles in

an appropriate and effective way they use the term functional families which, however, also vary from each other. Looking at the theoretical background, concepts which characterize the family and determine how the family system functions generally include family characteristics, interactions among family members and with the environment, family functions and the family life cycle which brings many unexpected events and changes into the life of individual families (Turnbull, Turnbull 1997: 80, Park et al, 2002). Beavers (Walsh, 1993: 74-77) refers to family competence and interactive style to define similar areas of family functioning and adds that it is also important how successfully the family is able to perform its role and tasks and how it deals with the stress of daily life. Important indicators of his systems model comprise family structure, a strong parental coalition, clear family leadership and clear boundaries, development of autonomy in individual family members, trust, spontaneity and flexibility, the presence of emotional expression, interaction between family members and with the environment, clear and direct communication and the ability to resolve or accept, i.e. understand, changes and conflicts. The Beavers systems model emphasizes family competence, which defines how successfully the family as an interactive unit performs the necessary nurturing tasks of organizing itself and coping within the family system. Important elements of his model include relationships between family members which indicate whether warmth, hope and feelings are being expressed, and family unit structure which does or does not reveal clear family leadership, strong parental or other adult coalitions, fixed generational boundaries and hierarchy, all of which are the main indicators that define family competence. Inadequate relationships between family members, a weak parental coalition or father/mother-child coalition, ineffective leadership and confused attempts at leadership indicate a lower level of family competence. A higher level of family competence involves greater autonomy of individual family members which is related to growing trust, clear boundaries, clearer and more direct communication, the ability to solve unexpected problems and accept diversity, in contrast to lower levels of family competence. Competent, more functional families solve problems faster and without delay and communicate more openly and directly. They are more spontaneous, show warmth between family members, express a wider range of different feelings and their overall outlook is more optimistic, whereas less functional families display fewer feelings and have a more pessimistic view of life. When assessing family competence it is important to recognize that while some families may perform certain tasks better than others, it is unlikely for a family to demonstrate an extremely competent role in one area and a non-functional level in another area of functioning (Beavers, Hampson, 1990).

The Beavers family interactive style (Walsh, 1993: 75) distinguishes between centrifugal families (hereinafter: CF) with a more open interactive style, which means more interactions in relation to the environment, more adaptation and less interdependence of family members, and centripetal families (hereinafter: CP) with fewer interactions with the environment, less adaptation and higher family member interdependence. Style refers to the respective levels of CP and CF characteristics in a family. Members of CP families mostly seek satisfaction within the family, are less trusting of the greater world beyond their families and the children leave home later. In contrast, CF family members seek satisfaction largely in the outside world, beyond the family and the children usually leave home earlier than typical of their normal development. The functional family system is flexible and competent families adapt their interactive style to developmental needs in the family life cycle. More competent families which are able to adapt their reactions and responses to the requirements of time and development thus demonstrate a style which indicates functional adaptation. Less competent families are more rigid and have more difficulty finding an adaptive style and answers to changes in the family life cycle.

Assessing family competence and interactive style based on the Beavers model (Walsh, 1992: 73) can provide useful guidance in establishing the level of family functioning. Based on the characteristics that determine the level of family competence and interactive style, Beavers categorizes families into groups: optimally functional families, adequate, mid-range, borderline and dysfunctional families. Family functioning ranges from extremely rigid (chaotic, no interaction) and visible dominance/submission patterns to great and greater abilities to balance power and use successful transactions in the family. Several extreme styles are suggested in more dysfunctional families and greater variety and flexibility in more functional families. Functional families exhibit a flexible and varied interactive style by accepting special and different behaviour in individual family members during their development, and respecting individuality and family needs as they change with time. An extreme and inflexible family interactive style is marked by rigidity and limited repetitive activities which exclude any variety in the interactive style itself. This fact supports the old observation that "system rigidity is system sickness" (Bertalanffy, 1969 in Walsh, 1993: 77) and that parents or carers, as the family's adult coalition, define family competence and interactive style.

Cooperative relationship between parents and staff

The importance of the staff having a cooperative relationship with the parents is emphasized by many experts, as well as parents (Kroth, Edge, 1997, Lin, 2000, Smith et al, 2004: 2, Morgan, 2006: 101-102, Končar, Antič, 2006: 7-8). Cooperation is of vital importance for the progress of PSN and involves a comprehensive approach by parents and staff to examining and assessing the special needs of PSN and planning, carrying out and evaluating individualized plans (Končar, 2003). A positive cooperative relationship is also important for the active and successful operation of expert teams, parent groups, inclusion in the local community, raising public awareness and the propagation and spreading of programmes and networks of appropriate support for PSN and their families. Based on the above theoretical background and professional practice it has been established that the key qualities and values of a positive cooperative relationship include mutual trust and sincerity, mutual respect, positive communication and an exchange of assistance and knowledge in the parent-staff relationship.

A cooperative relationship between parents and staff is vital not only for the progress and development of PSN but for the parents and staff in developing their future partnership. O'Shea and O'Shea (2001) refer to some key qualities which form such a relationship. These include personal warmth, mutual respect, sincerity, trust, knowledge, help, self-help, verbal and non-verbal communication, problem-solving ability and organizational skills, all important factors which stem from the dynamics of family functioning and are related to effective cooperation. Beavers (Walsh, 1993: 76) defined similar factors on the basis of family competence and interactive style in the framework of his model for family functioning assessment – the Self-Report Family Inventory, which covers the areas of mutual relationship development within and beyond families, adaptive ability, dependence of family members, the style of interaction and the ability to resolve conflicts. Parental cooperation is influenced by a number of factors, including the process of accepting a special child (Seligman, Darling, 2007: 185), which is related to emotional and socio-economic difficulties and greater temporal and physical demands. All this requires much greater willingness, more knowledge, communication and skill for cooperation from the parents as well as the staff.

Until quite recently, the general view was that parents were treated as part of the problem owing to their reticence in expressing their needs and cooperating with staff when it comes to identifying the needs and interests of their children. This clearly does little to help assess the real situation and understand the important experience and role of parents in

relation to the social circumstances of persons with special needs. This idea was grounded in the assumption that in all spheres of life, there are great contrasts and differences between the experience of PSN and its absence, which come from ignoring the existing stigma, social deprivation and ruling out any possibility of the family members living a normal life together with PSN (Brett, 2002). A combination of perspectives in PSN care and ideas from feminism and critical psychology helps us learn about the lives of families with PSN in many possible ways (McLaughlin, Goodley, 2008). This enables us to focus on PSN and consider the individual situation of specific families; to avoid using overused expressions or labels such as "parents", "handicaps", "disability", "experts" and "institution"; be critical of PSN diagnosis and prognosis; develop ways of combining the knowledge of parents and staff about PSN and their lives to create various elements for developing the subjectivity, personality and identity of individuals; to seek new forms of knowledge, which includes using modern means of communication and also to be critical of new findings. Russel (2003) found that what parents need most of all is information, advice, support and practical help in the process of facing and accepting life with PSN in the family, and that families can achieve a more active and successful cooperation with suitable support and help from the staff. All parents should be provided with the necessary information about the professional programmes and the work policy of the institution, ways of accessing individual services within the institution and other support services, the names of its staff and people working with the institution. This helps families to understand the institution's system of operation, which reduces the likelihood of any conflicts of interest. Warger (2001: 1-2) also drew attention to cultural and linguistic coordination in parent-staff cooperation, especially in today's rapidly developing society where frequent and long-term migration is commonplace. The family's cooperation with the institution can never be overemphasized and it falls to the staff to understand and support this.

Summers (2004) thus highlighted six major factors which impact successful cooperation and should be noted by any staff working directly with PSN and their parents or other family members. These are successful communication (clarity, sincerity, tact, openness, listening, frequency, providing information), commitment (flexibility, seeing one's work as more than just a job, encouragement and positive acceptance of PSN and their families, consistency, sensitivity to feelings), equality (promoting equal action and partnership with parents, respect for others, exploring different options, protecting the interests of PSN and parents when working with other staff members, regard for different opinions, developing harmony between parents and staff, avoiding information

concealment and manipulation), skills (willingness to learn, activities in various areas, expectations and goals, a comprehensive view of the cooperation between all parties in a relationship, balancing individual needs), trust (reliability, discretion and the inviolability of PSN) and respect (esteem and consideration for PSN and their parents, avoiding judgement and intrusion, politeness, non-discrimination). There are now manuals with similar useful and practical advice on how to handle conflict situations more easily and make the cooperation between parents and staff more effective (Finnegan, 2002: 7). They emphasize the new role of the parents which still needs to be learned by most of them. It is primarily about being involved in goal development, programme implementation and assessment of PSN programme goals. Successful programme implementation requires both parties to further develop areas of agreement. In theory and practice, many authors set out the characteristics that form the parent-staff relationship. Parents indicate the following characteristics as the most desirable in staff: having energy and showing dedication and enthusiasm for their work, having positive attitudes, being receptive to change, taking the time to really get to know their child, making a personal effort for each child and being willing to go beyond their established ways and responsibilities to do something for the child and family (O'Shea, O'Shea, 2001). Staff members should be aware of the fact that PSN are not always popular members in a family and that families function with varied success. The feelings of family members for them vary from rejection and denial to acceptance, from intense hate to intense love, from neglect to overprotection (Boushey, 2001). Regardless of the strategies and qualities of good cooperation which involve families in the educational programme of PSN, it should be noted that any parental involvement in this programme ensures the person's development and progress. In this context, staff should observe the important rule that families have invaluable knowledge as regards the history of PSN, their habits, wishes, dislikes, behaviour, reactions, established daily routine and as regards the needs of the whole family (Lytle, Bordin, 2001: 41).

As the theoretical background shows, cooperation between parents of PSN and staff is significantly correlated with the interactive style and family competence of families of both parents and staff. A cooperative relationship between parents and staff is one of the major factors in everybody's education but especially in planning and coordinating the process of meeting the special needs of persons with learning disabilities and the interests of all those involved in the cooperative relationship. While the concepts that influence this relationship are known, our primary interest in the light of the importance of the cooperative relationship for PSN education and rehabilitation was to

examine the interactive style and family competence of the families of parents and staff and, as a result, their cooperative relationship in training centres for persons with moderate, severe and profound learning disabilities in Slovenia.

Research questions and hypothesis

The aim of the study was to examine the correlation of the level of cooperative relationship between parents and staff with the interactive style and family competence of the parents' families and the families of the staff. Based on the study results, activities are proposed which should help improve the development of their cooperative relationship in the future. In keeping with the study's aim, the following study hypotheses were formulated:

H1: Interactive style and family competence in the families of parents are significantly correlated with the level of cooperative relationship between parents and staff.

H2: Interactive style and family competence in the families of staff are significantly correlated with the level of cooperative relationship between parents and staff.

Research method

This study is part of a wider research project (Novak, 2011) which applied the exploratory quantitative research method. The Pearson correlation coefficient was used to establish correlation of interactive style and family competence with the cooperative relationship.

Sampling, dependent and independent variables and the methods of analysis

Two sample groups were formed for the purposes of this study:

- a group of 296 randomly selected parents, fathers and mothers of PSN placed in centres across Slovenia, of whom 180 were women and 116 men aged from 30 to 72 years, with an average age of 52.38 years;
- a group of 298 randomly selected staff who work directly with PSN in the above centres, of whom 239 were women and 59 men aged from 20 to 54 years, with an average age of 38.10 years.

Two survey questionnaires for parents and staff were used in the study, both translated and adapted to its research purpose. The questionnaires consisted of two parts. In addition to general questions, the first part included the translated Beavers systems model questionnaire (Walsh,

1993: 96-100) with a focus on questions examining the family competence and interactive style in the families of the staff and the families of the parents, and consisting of 40 questions. The second part of the questionnaire, developed in this work, comprised 21 questions focusing on the cooperative relationship between parents and staff. The answers to the questions were scaled from 1 (the minimum value) to 7 (the maximum value). The instrumentation was pilot tested and had the following characteristics:

- independent variables: parents, staff
- dependent (composite) variables and reliability:
- family competence – determined by two variables:
 - relationships: Cronbach's alpha was .89 for parents and .88 for staff;
 - leadership: Cronbach's alpha was .80 for parents and .81 for staff;
- family interactive style – determined by the CP and CF family style: Cronbach's alpha was .84 for parents and .81 for staff;
- cooperative relationship between parents and staff – determined by four variables:
 - parent trust: Cronbach's alpha was .92;
 - staff trust: Cronbach's alpha was .82;
 - parent communication: Cronbach's alpha was .87;
 - staff communication: Cronbach's alpha was .80.

A composite variable indicates the average value of answers to questions in a certain group, which means that the value of the answers is higher or lower than the average value. The terms lower and higher level of family competence, cooperative relationship or interaction were used in the analysis of the results. A higher level of family competence in the families of parents and staff means a higher value of answers, i.e. a higher level of (positive) family relationships involving expression of warmth, hope, feelings and a higher level of (positive) family leadership involving the parental coalition, hierarchy and autonomy of family members, in contrast to a lower value of answers, i.e. a lower level of family competence, which means a lower (negative) level of family relationships and leadership. A higher level of interactive style in the parent and staff families indicates a stronger CF family orientation, implying more permeable family boundaries, more interactions, more adaptation and less family member interdependence, in contrast to a lower level of interaction, which indicates a stronger CP family orientation with less permeable family boundaries and interactions with less adaptation and more interdependence.

The data was collected directly from the respondents. Personal data protection was ensured in accordance with the applicable legislation. The data was processed using SPSS software for personal computers. The following statistical methods were applied:

- *descriptive statistics* to describe the overall sample of variables: the expected results of descriptive statistics are frequency, measures of central tendency; other basic information about the system of variables used and information about which variables may enter the next planned steps of treatment;
- *Cronbach’s alpha* to test the reliability of the measuring instrument and the performance of a pilot study of the parent-staff cooperative relationship;
- *test of homogeneity* for all variables;
- *the rankit method* was used to normalize and standardize the variables.

Results and discussion

The study investigated the level of family competence and interactive style in the families of parents and staff in relation to the level of their cooperative relationship. We were interested in the mean values of answers obtained from the questionnaires and the distribution of the above variables.

Table 1: Descriptive statistics – parents

	N	Minimum	Maximum	M	SD
relationships	296	-2.04	.76	-.04	.58
leadership	296	-1.52	.82	-.04	.51
interaction	296	-1.95	.82	-.04	.51
trust	296	-2.04	.64	-.05	.64
communication	296	-2.13	.64	-.05	.62
cooperative relationship	296	-2.01	.64	-.05	.61
family competence	296	-1.76	.79	-.04	.52

Source: Novak (2011)

Table 2: Descriptive statistics – staff

	N	Minimum	Maximum	M	SD
relationships	298	-2.02	.85	-.04	.56
leadership	298	-1.47	.92	-.03	.52
interaction	298	-1.68	.95	-.04	.49
trust	298	-1.41	1.52	-.01	.58
communication	298	-1.38	1.26	-.02	.55
cooperative relationship	298	-1.38	1.39	-.01	.52
family competence	298	-1.70	.89	-.04	.51

Source: Novak (2011)

Table 1 shows that the parents' answers have somewhat lower mean values for cooperative relationship (trust and communication) in comparison to higher mean values for family competence (relationships and family leadership) and interactive style (interaction, adaptation, dependence) in their families. In contrast, the answers of staff in Table 2 show higher mean values for cooperative relationship (trust and communication) in comparison to lower values for interactive style (interaction, adaptation, dependence) and lower values for family competence (relationships and leadership) in their families. In comparing the mean values of parents' answers with staff answers there are no differences in family competence between the families of the respective groups. Somewhat lower mean values are seen in the interactive style of the parents' families, but the greatest differences are seen in the lower mean values for the parents' cooperative style in relation to the higher mean values of staff answers.

H1: Interactive style and family competence in the families of parents are significantly correlated with the level of cooperative relationship between parents and staff

Table 3: Correlation of interactive style, cooperative relationship and family competence in parents

		fam. comp.	coop. rel.
interaction	r	.86	.45
	p	.00	.00
fam. comp.	r	1	.43
	p		.00

Source: Novak (2011)

Note:

coop. rel. = cooperative relationship

fam. comp.= family competence

The results in Table 3 show that the interactive style and family competence in the families of parents are significantly correlated with the level of cooperative relationship between parents and staff. The table also reveals that the strongest correlation exists between the family competence and interactive style in parents' families. This means that the higher the level of family competence, which is determined by the variables of relationships and leadership, the higher the level of family interactive style, and vice versa, the lower the level of family competence, the lower the level of interactive style. As a family develops and adapts to change, it accordingly changes its boundaries in interacting with others and imposes certain restrictions which influence the development of attitudes and values. This is reflected in its functioning, family competence and interactive style (Walsh 1993). Experts refer to very flexible families, and some other very inflexible families (Turnbull, Turnbull, 2001) which may be devastated by the birth of a PSN. It is also known that approximately a quarter of parents feel that they live an isolated family life due to PSN. They often report that they have no time for others, which may serve as an excuse to avoid social contacts, and more than a tenth of parents report that they do not wish to engage or talk to others about PSN. Many PSN parents find it hard or do not seek to engage with other parents because they feel misunderstood or shut out from social life. Varied responses and functioning of PSN families were reported by Smith (et al, 2006) as a result of the varied organization of social support networks for PSN and their families, and the availability of active programmes suited to all family members.

Furthermore, the results show that higher levels of family competence and interactive style in the families of PSN parents also mean a higher level of cooperative relationship between parents and staff. A higher cooperative relationship level indicates more trust in the parents'

relationship with the staff, which includes respect, assistance, sincerity and knowledge, and more positive communication of parents with staff, which means enough time available for communication, successful solving of conflicts, listening and appreciation, which are rated by the parents in relation to the staff. Similar features of a positive cooperative relationship are reported by many experts (Smith et al, 2004, Morgan, 2006) who believe that relationships require two-way, mutual development and maintenance, which owing to the vulnerability of PSN includes an exchange of the very same key values of warmth, trust, knowledge, respect and sincerity. However, despite their efforts and the familiarity of the staff with the basics of positive cooperation, many parents doubt their knowledge and professionalism. By becoming informed, educated and socially involved, parents are assuming an increasing role and autonomy in PSN education and care (Brett 2002, Smith et al, 2006). Many parents also doubt the adequacy or effectiveness of professional intervention and many of them experience feelings of guilt, which is normal in the context of how they experience PSN and their own sensitivity (Gabb, 2004, Goodley, Roets, 2008). Most parents are aware of the importance of cooperating with the staff. The situation is different in cases where the PSN live in an institutional full-time care setting. Centres normally provide placement of PSN who have severe and profound intellectual and physical disabilities along with serious health and behavioural problems which prevent their parents from keeping them in the family. The parents' interaction with PSN and the professional staff working with these persons in centres is less frequent in such cases and diminishes or even stops over the years (Novak, 2006).

It was established that the results confirm a statistically significant correlation of family competence and interactive style in the families of parents with the parent-staff cooperative relationship, which fully confirms Hypothesis 1.

H2: Interactive style and family competence in the families of staff are significantly correlated to the level of cooperative relationship between parents and staff

Table 4: Correlation of interactive style, family competence and cooperative relationship in staff

		fam. comp.	coop. rel.
interaction	r	.87	.34
	p	.00	.00
fam. comp.	r	1	.39
	p		.00

Source: Novak (2011)

The values of the Pearson correlation coefficient in Table 4 likewise show that interactive style and family competence in the families of staff are significantly correlated with the level of cooperative relationship between parents and staff. These results indicate a significant correlation between family interactive style and cooperative relationship, and between family competence and cooperative relationship also in the families of staff, while the correlation between family competence and interactive style in these families is even stronger. The results confirm that, like in the families of parents, a higher level of family competence and interactive style in the families of staff mean a higher level of cooperative relationship between staff and parents. The results match the findings of many experts which confirm that the essential criteria and conditions for family system functioning such as parental coalition, maintaining intergenerational differences, accepting the role of one's sex, self-esteem of family members, expression of feelings, developed ways of communicating and interaction with the environment, are closely correlated and interdependent (Beveridge, 2005: 36-43). The family as an interactional system is regulated by the principles of balance which are reflected in positive or negative communication, established family boundaries, subsystems of power and in the family hierarchy. Successful adaptation is promoted by clear boundaries; unclear boundaries put the autonomy and independence of family members at risk. Several authors (Tucker, Coddling, 2002, Taanila et al, 2002, Burr, 2003) thus refer to the following features as the key to good family functioning and harmony between family members: openness, responsiveness and trust; respect for privacy, intimacy and autonomy; open, clear and sincere communication; equal distribution of power in a solid parental coalition; leadership and flexible control through mutual agreement and negotiation in the basic parent-child hierarchy; spontaneous interactions with the presence of humour; a high level of initiative and encouraging and respecting individuality and difference. The functioning of the families of staff may be subject to certain common characteristics and features which are attributed to workers in the helping professions. These include empathy, strength, the role-model

function, projection capacity, reward and punishment, emphasized interpretation, the search for meaning, bias and compassion (Fengler et al, 2007: 17-25). While these features can reinforce family functioning, balancing professional and family life can pose a burden and an adverse circumstance in maintaining good intimate and family relationships, which may consequently also be reflected in their cooperative relationship with the parents.

In the last decade, we have seen many social changes which greatly influence family interaction with the environment. Present-day families consist of complex systems where there is no pattern or predominant type of family. Society is becoming increasingly tolerant, which applies particularly to the historically more developed Western countries of the world. Not only has the nature of the family changed but also society's attitudes in relation to work, school, employment, teachers, doctors and other authorities (Smith et al, 2004). On the one hand there is an increase in accepting diversity, greater opportunities for building one's career, freedom of education, legal regulation and recognition of the rights of various social minorities, but on the other hand we are seeing a rise in poverty, single-parent families and individual lifestyles, which has brought about changes in family system functioning and the social structure. Based on the results of our study which match the findings of many other studies, Hypothesis 2 that family competence and interactive style in the families of the staff are significantly correlated with the cooperative relationship between parents and staff, is fully validated.

If the results in the distribution of answer values in relation to the level of interactive style and family competence of parent and staff families in our study (which define overall family competence or family functioning) are compared with Beavers' distribution (Walsh, 1993: 93), some similarities are indicated. We presume, with reservations in view of the geographical and cultural differences and the different methodologies used in the studies, that based on our study results parent and staff family functioning could be relatively reasonably matched with the Beavers systems model of family functioning or with its distribution by levels of family functioning. Both distributions illustrate or indicate family functioning as the normal distribution with a small segment of extremely well-functioning families, a small segment of extremely dysfunctional families and a large segment of averagely functioning families. Assessing family competence and interactive style based on the Beavers model (Walsh, 1993), which was used (in translation) for the first part of the questionnaire for parents and staff, provided useful guidance in determining the level of family functioning. There is no doubt that the occurrence of stress and change with time affects family functioning and that in some cases significant changes in the level of

family competence and interactive style are caused by a major life event in the family. In the Beavers model, optimal families are the ideal of effective family functioning, but in light of the statistical data they cannot be treated as "normal". This is so firstly because only around 5% of all families and 19% of clinical sample families (families with a hospitalized child) were classified into this range. Secondly, statistical "normality" as a phenomenon within family functioning ranges between the levels of adequate to mid-range family ratings. Finally and perhaps most importantly, very dysfunctional families are a relative minority, i.e. 3% of all families or 11% of the clinical sample. This finding contradicts the argument for the presence of a large number of dysfunctional families which says that the dysfunctional family is the rule in the modern Western world. In fact, the data shows a recurrence of the bell curve with optimal and small dysfunctional segments at the extremes of the overall sample of families and that a multitude of families in the Western world function reasonably well with considerable openness and willingness towards improvement.

Conclusion

The main models and instruments of the Beavers systems model, based on which our study was adapted and supplemented, are built around family competence and interactive style which conceptually relate to the studies and theoretical starting points of other authors. Their studies primarily focus on comparison and competence in the functioning of individual families. They investigate family adaptation and functioning by examining family competence involving the relationships between family members. In contrast to some prior studies and clinical results, according to which families with members with special needs are pervaded by chronic grief which leads into general family dysfunctionality, they established that families which were willing to deal openly with emotions including grief are more functional. What characterizes the most dysfunctional families is a general taboo regarding the exchange of any type of emotions. They also established that families with PSN could often share useful advice with other parents on how to cope with stress, change and adaptation.

The aim of our study was to understand and raise awareness of the importance of the concept of the parent-staff cooperative relationship in Slovenia. One of its major findings is to confirm the correlation of family relationships and interactions both in the families of parents and the families of staff with their mutual cooperation. This points to the special importance of successful or unsuccessful relationships in the lives of family members and their interactions with other people, which are significantly related to more or less successful cooperation. It should be

noted that the questions for parents and staff were socially acceptable and appealing, especially those dealing with the functioning of their families where we were interested in the families' competence and interactive style. Experience in working with parents on such studies in this field shows that about a half of them agree to participate, which was also the case in our study. We do not exclude the possibility that the respondents were largely parents who as a rule have better relationships with staff and, given their higher average age, also accept PSN in a more realistic way. Comparison of the ages of parents and staff showed the participating staff were younger.

It was also established that the level of family competence and the level of interactive style in the families of parents and the families of staff are significantly correlated with the level of their cooperative relationship. Positive relationships between family members and successful family leadership (which define a higher level of family competence) and more open family functioning in relation to the environment (which defines a higher level of interactive style in the family) are thus related both in parents and staff to their mutual cooperation, i.e. trust and positive communication, which define a higher level of cooperative relationship. Conversely, negative relationships between family members with a lack of leadership (which define a lower level of family competence) and more closed family functioning in relation to the environment (which defines a lower level of interactive style in the family) are thus related both in parents and staff to less successful mutual cooperation, i.e. less trust and positive communication, in turn defining a lower level of cooperative relationship.

Differences were evident in the distribution of the values of answers about the cooperative relationship of parents, with more parents cooperating well with the staff on the one hand, and more parents cooperating poorly with the staff on the other. Other distributions of answer values, as regards the cooperative relationship of staff and particularly the family competence and interactive style of parents and staff indicated a normal distribution with extremes of optimally functional families and extremes of dysfunctional families, which is in theory comparable to the majority population.

The education of parents and staff should be based on the fundamental realization that the main purpose of constructive cooperation is to benefit PSN, parents and the rest of the family as well as the staff in terms of better efficiency. Taking into account and respecting each other's roles is in fact the primary key to successful cooperation. The goal is to bring the parents and staff closer and minimize the differences between them

which may occur when living with PSN in the home setting and in the centres, as well as the differences between practice and theory. A support system can function if the PSN, their families, the staff and the local community work together as partners. New ideas and models (culture-related models and models of interpersonal relationships) introduce fresh conceptual challenges and changes, as well as different models of professional practice, available support and relevant services designed not only to help various groups of PSN but also to encourage and take into account the increasing role of their relatives. Based on this approach, equal cooperation of various professions, institutions and all others concerned may be expected to bring the need for maximum personal tolerance towards all forms of diversity closer to various experts and employees and encourage them to raise public awareness and accept different groups of people and their families regardless of race, religious belief, sexual orientation, culture and social or feminist background. This also implies a different attitude to PSN and a different attitude to their parents and other family members in the process of cooperating and developing a partnership between parents and staff. In order to help make the beginning and development of this process successful and find new ways of working together, we should like to point out the following important work strategies in the light of the results of this study. Parents should first of all be provided with the opportunity and experience of exploring the strong areas of the person with special needs and the family as a whole together with the staff. This is of help and benefit in developing an individualized plan for the person with special needs and a programme for working with the family (individual family plan), where all its characteristics as a unit should be considered. Knowing about the family competence and interactive style of a family means learning about the relationships between family members and the interactions within and outside the family and planning the steps and methods for successful cooperation. As family competence and interactive style in the families of staff are likewise linked to the cooperative relationship with parents, it is also right to take these circumstances into account when developing the parent-staff cooperative relationship. Here, an important role is played by the personal qualities and the family/social competence of staff members, whose professional role in relation to the parents is to create conditions and situations for important parental contributions in developing a successful cooperative relationship with the staff. In order to achieve this goal, our suggestion is to establish research teams within individual centres which would include parents and staff and not only review the satisfaction of parents and staff but also search for various improvements and new ideas in the area of mutual cooperation and

networking (by organizing joint training sessions, seminars and experience workshops; informal get-togethers).

In the developed Western world and particularly within certain EU countries the system of work, values and attitudes in the field of working with PSN has developed more quickly than in Slovenia. No doubt things are changing – for many too slowly, but this is a process-based system of work which requires time. We would like to appeal first and foremost to the managers of centres to understand the significance of cooperating and working with parents. It is above all their commitment and involvement which determines the future course of developing and improving professional practice and linking and coordinating centres, which at the same time provides a starting point for widely-recognized and well-founded joint projects.

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