



# The effect of social work use on the mental health outcomes of parents and the life satisfaction of children in Britain



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## ABSTRACT

This article examines how parental mental health, and in turn children's well-being is related to receiving social work interventions. Using data from the British Household Panel Survey we examine factors predicting the likelihood of parental social work use; whether transitions into social work use is associated with an improvement of mental health outcomes of those parents who receive it; and whether parental social work use enhances their children's well-being. Taking advantage of panel data modelling techniques, we use random and fixed effects models to account for the unobserved individual characteristics. The findings indicate that poor health, disability, having more children in household, not being married and more than 35 h of caring responsibilities are all associated with an increase in the likelihood of parental social work use. Furthermore we find that parents who use a social worker report worse mental health outcomes for themselves, and poorer well-being for their children, than those who do not. Possible explanations for these findings are discussed as well as implications for policy makers.

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## 1. Introduction

Social work is a central part of the welfare state's response to the most socially vulnerable individuals. Its aim is to protect people in need against adversity and to improve their quality of life. Research on social work in the UK is comparatively strong on reflecting service user experiences and the political and organisational contexts of service delivery, mostly using qualitative methods. Studies which measure outcomes, however, especially within experimental or quasi-experimental designs, are relatively rare in the UK, in contrast to the United States.

The international evidence on effectiveness is largely focussed on the results of quite specific interventions, whereas little is known about routine statutory social work use. There is also a paucity of quantitative research in the UK about how individuals and families who use social workers compare with the rest of the population. The aim of this paper is to identify the characteristics of parents who have made use of a social worker and how this use is associated with their mental health. Furthermore, we explore whether parental social work use enhances the life satisfaction of children in these families. Distinctively, this study capitalises on the longitudinal design of a general population

panel survey to understand the impact of parental social work use on parents and their children within the household. The advantage of this approach is that it allows for direct comparison between those using and not using social work in terms of risk factors and associated outcomes. This paper makes an important contribution to the evidence base on routine social work contact through a dynamic and comparative exploration of the relationship between use of services, challenging family circumstances and mental health or life satisfaction outcomes.

## 2. Background

### 2.1. The role and impact of social work

We first look at the role and impact of social work, which is a profession with a generic qualification in the UK. The English Social Work Task Force reports (HM Government, 2009a, 2009b) confirm that the role of social work is to protect individuals from harm and to promote security and social inclusion which can make a difference to the quality of the individual and their family's life.

Whereas some care services for adults, such as domiciliary care, are means-tested in England and Wales since the National Health Service and Community Care Act 1990, social work support is free at the point of use and funded by local taxation. Individuals and families might need social work support because they are made vulnerable by a wide range of problems, among them: change in family circumstances,

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bereavement, caring responsibility, challenges associated with ageing, drug or alcohol abuse and difficulties as a result of disability. It may also be the case that some adults have not experienced any particular social problems but may have seen a social worker simply as a gateway to community care services.

Whilst the Task Force evidence affirms the importance of social work to society, it also notes that the consequences of social work intervention and the lack of it can be detrimental: “if outcomes are poor, if dependency becomes ingrained or harm goes unchecked, individuals, families, communities and the economy can pay a heavy price” (HM Government, 2009a, p1).

## 2.2. Risk factors for social work intervention

As noted above, parents with children may come into contact with social workers for a host of reasons, including individual, interpersonal, structural and environmental needs and risks. To consider the wide range of challenging circumstances that might bring parents into contact with social work, we draw on Bronfenbrenner's (1979) ecological model, which describes the multiple and nested influences on human action. These influences include macro-level structural conditions such as parents' social class and education; meso-level influences such as family size and structure, household tenure and neighbourhood characteristics; and micro-level, individual factors, such as age, ethnicity, disability, marital and self-reported health status. All of these are considered within the analysis, both in relation to who receives social work service and in testing the association of social work use with mental health and life satisfaction outcomes. However the risk factors we use to estimate our models are limited by the data available.

## 2.3. Parental mental health and children's life satisfaction

The expanding literature on happiness has focussed on a number of factors, including life satisfaction, well-being and mental health. These terms are often used interchangeably, which can lead to confusion and conflation (Seligman, 2002). To clarify for present purposes, Diener (1984) explains that the judgement that ‘life is good’ is a cognitive appraisal that constitutes life satisfaction, with life satisfaction being one component of subjective well-being. In turn, mental health, defined by Menninger (1930, p1) as “the adjustment of human beings to the world and to each other with a maximum of effectiveness and happiness” is an important condition for life satisfaction, and therefore for promoting well-being (Nelson, Lord, & Ochocka, 2001). Our starting point is that it is reasonable to expect that the diverse challenging life circumstances or vulnerabilities that may be associated with social work use are also likely to be associated with increased mental health risks. Sociological research, for example, alerts us to the relationship, at the macro level, between socio-economic resources and mental health outcomes (Reiker & Bird, 2000). It highlights that those with lower levels of educational attainment are more likely to report more mental health problems (e.g. Franks, Gold, & Fiscella, 2003) and, at the meso level, that financial strain has a significant detrimental effect on mental health (e.g. Bierman, Fazio, & Milkie, 2006). Associated with this, a number of studies have shown that employment status influences mental health difficulties, particularly unemployment can lead to poorer mental health outcomes (Dooley, Prause, & Ham-Rowbottom, 2000).

While it would be wholly unreasonable to expect that social work interventions could change the structural conditions that generate difficulty and distress, it is not unreasonable to expect that social work involvement, intended to prevent harm and improve quality of life and empower people to bring about change in their lives, might lead (either directly or indirectly through referral to other agencies) to some improvement of mental health and life satisfaction. It is also reasonable to expect that both parents' mental health *and* parents' social work use may have an impact on their children's life satisfaction.

The association between parental mental health problems and poor outcomes for children has long been recognised (Rutter & Quinton, 1984). Larson and Almeida (1999) identified a contagion effect of negative emotions between members of the same family, finding that negative emotion transmits between spouses and, in the short term, their children. More recently Powdthavee and Vignoles (2008) found that there is a longer term effect on children's life satisfaction contingent on parents' mental health problems, with low life satisfaction for parents significantly predicting lower levels of life satisfaction for children one year later. Duncan and Reder (2000) highlight how parental mental health difficulties may impair or disrupt parenting ability and capacity for warmth, attentiveness, consistency and predictability. It is clearly very difficult to understand the causal mechanisms driving these effects. Westman and Vinokur (1998), for example, suggest they may be attributed both to shared internal characteristics, such as personality traits and preferences, and shared external ones, such as social environment. The effects may also arise from direct transfer of stress and strain through empathy, or indirectly from interactions between family members.

In addition to the challenges of understanding the relationship between parents' mental health and children's subjective life satisfaction, there are some well recognised challenges with capturing these outcomes with any validity or reliability, not least with the assumption that people are able to assess their own experiences and rate them accurately on a single scale (Campbell, 1981). Some researchers have argued that since life satisfaction is a subjective phenomenon, self-report is the best way to measure it (see Diener, Suh, Lucas, & Smith, 1999 for an in-depth discussion). However, self-report is also susceptible to multiple biases, including dependence on mood, the preceding questions and innumerable unobserved situational issues. Repeated measures seek to reduce the influence of these biases. For purposes of looking at the impact of social work use on mental health or subjective life satisfaction outcomes, there are also challenges of periodicity: impacts may take a long time to show themselves, and may not necessarily follow a linear trajectory – things can, for example, get worse before they get better.

The complexities of this field are acknowledged. Nonetheless, to summarise, there is a distinct lack of understanding of the antecedents of social work use or the impact of having a social worker on outcomes for service users. Furthermore, while previous research has identified a number of determinants of mental health and life satisfaction, relatively little attention has been paid to the influence of social work as one of the core social interventions that constitute the public and professional response to social need. For the first time in this field in the UK, in this paper we employ the nationally representative British Household Panel Survey (BHPS) to investigate if parental social work use is associated with improvement in parents' mental health and in the life satisfaction of children. We do not hypothesise any specific mechanism for social work's effect on mental health. But on the basis of the research evidence cited above, we make the general assumption that parental mental health is a major predictor of children's well-being. We make a further assumption that effective social work which involves parents ought to help improve the mental health of parents and children. Specifically we ask the following research questions:

1. Which structural, neighbourhood, familial and individual characteristics predict social work use?
2. Do parents using social work report improved mental health outcomes for themselves?
3. Do children with a parent who uses social work have improved life satisfaction?

## 3. Data

The BHPS began in 1991, consisting of 5500 representative households and 10,300 individuals drawn from different areas of Great Britain. Each panel member is interviewed annually; the interviews

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