



Co-designing an Australian Early Years Relational Practice Framework

What we know about relational practice so far

In 2022 the Centre for Community Child Health will work with leaders and parents in early years services to co-design an Australian Early Years Relational Practice Framework.

We know that relational practice lies at the heart of effective service delivery. However, practitioners, organisations, government departments, and communities across Australia are grappling with ‘where to start’ with building collaborative partnerships based on authentic relational practice. What is needed is a clearly defined Relational Practice Framework to support those leading early years organisations and enable practitioners to model relational practice with families and colleagues so that everyone experiences a culture of partnership in every interaction.

This paper summarises what we know already about relational practice from the literature. This is the first step in the development of the Relational Practice Framework. This summary will serve as a springboard for our future conversations with practitioners and parents, where we aim to more deeply explore the ‘how’ of relational practice.

What is relational practice?

Human services are relational services, delivered by one person to another. Relational practice is the provision of services through the development and maintenance of a warm and responsive relationship. “Relational Practice is a way of working where establishing and maintaining a helpful interpersonal relationship is the priority” (Benfield & Haigh, 2020).

Why is relational practice important?

Humans are “a relational species, built for attunement and engagement with others of our kind” (Moore, 2017, p.4). We are wired to connect with and to cooperate with one another (Christakis, 2019; Dunbar, 2021; Lieberman, 2013). Conversely, social isolation and loneliness are corrosive of both mental and physical health (Cacioppo & Patrick, 2008; Dunbar, 2021; Hertz, 2020; Lieberman, 2013). It is through relationships with our caregivers that we grow and develop as infants and children, and relationships continue to be



important throughout our lives (Lieberman, 2013). Our health and wellbeing are affected by the number and quality of relationships we hold (Hawkley & Cacioppo, 2013; Lieberman, 2013; Seeman, 2000).

Human services are fundamentally relational, dependent upon the quality of the relationships between service provider and client (Ingram & Smith, 2018; Moore, 2017, 2021). The quality of the relationships between practitioners and parents are central to achieving the objectives of services (Bell & Smerdon, 2011; Braun et al., 2006; Greenhalgh et al., 2014; Moloney, 2016; Scott et al., 2007). The way in which services engage and work with families is critical: professionals need to respond to family priorities, build on family strengths and establish partnerships that involve shared decision-making, thereby giving families greater control over their lives (CCCH, 2010; Kennedy, 2017).

The way in which support services engage vulnerable families is as important as the actual programs they provide (CCCH, 2010; Dunst & Trivette, 2009; Moore, McDonald et al., 2012; Moore, 2017; Saleebey, 2006; Trivette & Dunst, 2014). Parents benefit most when they are actively involved in deciding what knowledge is important to them, and how they want to access that information. Changes in actual parenting practices are more likely when professionals use strength-based, capacity-building, help-giving practices they need, seeking to build parents' capacity to meet the needs of their children more effectively (Harper Browne, 2014; Pattoni, 2012; Moore & Larkin, 2005; Trivette & Dunst, 2014). The more vulnerable the parents are, the more important it is to establish effective relationships (CCCH, 2010). For those who are better resourced and supported, effective engagement is not as critical, but still important. The quality of the relationships that practitioners develop with parents and caregivers affects how effective they are as helpers and change agents.

Relational practice therefore offers the following benefits:

- **Facilitates the engagement of families who view professionals and services with suspicion.** (Prichard, 2019) Relational practice develops trust between professional and parent which is critical for families who ordinarily disengage from services.
- **Enables services and program to make a positive difference** in clients' lives. "People need human connection to make change, and most of all to sustain change" (Cottam, 2019). Relationships are the medium through which services are effectively delivered. (Moore, 2017)
- **Can be an intervention in and of itself.** The provision of relational services can build individuals' sense of control and confidence to solve their issues both at the time of delivery and into the future (Mackenzie 2021; Althaus & McGregor, 2019; CPI, 2018).
- **Influences those we work with to adopt relational practice** in their own interactions. Parents and carers are supported to more strongly connect with and relate to their children. "We model for parents how to relate to their young children by the way we relate to them." (Moore, 2017, p.11) Relational practice is also transmitted to colleagues, both within and across teams.
- **Supports authentic co-production between practitioners and parents.** (Prichard, 2019) In contexts where co-production is the desired outcome, relational practice creates a foundation that enables practitioners and parents to share power and authentically connect and share ideas, and therefore effectively work as a team.



What enables relational practice?

For relational practices to be understood, practised and sustained across a team of practitioners, it is necessary for those involved in leadership to enthusiastically model the same practices internally. Relational practice is not just something we do for families; we model the model and in doing so become more familiar and comfortable with this relational way of working. (Moore, 2006)

Explicit negotiation between practitioner and parent (or between colleagues) about how they will work together and review their relationship (Day, Ellis & Harris, 2015) also supports relational practice. These conversations provide the opportunity for the practitioner to articulate and model the importance of the relationship in the work to be done, making explicit what might otherwise be assumed.

What are the barriers to relational practice?

Service providers experience their own challenges to practising relationally. These include:

- Being mindful of and managing one's automatic judgements of and responses to others
- Maintaining presence and paying full attention to ensure attunement with others
- Ensuring authenticity and genuine interest in others
- Holding back from trying to fix others' problems, and instead support them to identify their own solutions
- Focusing on families' strengths (rather than their problems) and using them as a foundation for change, and
- Having the courage to ask for feedback about the support they are providing, so as to inform improvements. (Moore, 2017)

Families also bring their own barriers to the development of strong relationships. These include: a lack of trust in and fear of services, misperceptions of what services offer, a lack of the social skills and confidence to negotiate with professionals, and being easily intimidated or put off by perceived attitudes of staff (CCCH, 2010).

How to do relational practice

What the service provider brings

There are several interpersonal skills and qualities that the service provider brings to be able to practice relationally. (Ratio, 2021; Davis & Day, 2007; Moore, 2017):

- **Qualities and skills that enable the initial engagement of parents/carers** include: persistence to connect, acceptance of others and being non-judgmental, being respectful, being adaptive and open to learning, genuineness, humility, active listening (including the ability to stay present and manage distracting thoughts), cultivating interest in others, and attuning to others so as to know when and how to respond.
- **Qualities and skills that enable parents/carers to change** include: sharing different perspectives and ways of thinking, 'sharp empathy' or the ability to call people out on behaviours that affect them negatively, prompting people to identify their goals and exploring solutions, validating efforts and progress, navigating the service system and advocating on others' behalf, linking people to other networks, and seeking feedback from clients.



- **Qualities and skills that enable practitioners to work effectively together** include: attuning their responses to complement the practice and expertise of their colleagues when working together with a family, known as ‘relational expertise’ (Edwards, 2011).

What worker-client relationships look like

Relationships take time to develop, and move through a series of stages (Ratio, 2021). There is the beginning, then creation of common ground through personal connection, cementing of the relationship arrived at by working through challenges together, and perhaps finally arriving at a stage of solidity where the client sees the service provider ‘like family’.

Regardless of the stage of maturity of a relationship, effective relationships share a range of characteristics. Moore (2017) and Davis and Day (2010) both describe a set of characteristics (see Table 1). Both sets of characteristics reference developing and maintaining genuine engagement; showing respect; being emotionally open and honest; and ensuring the resolution of disagreements.

Table 1: Characteristics of effective relationships

Characteristics of effective partnerships (Davis & Day, 2007)	Universal features of effective relationships (Moore, 2017)
<ul style="list-style-type: none"> • Working together with active participation/involvement • Developing and maintaining genuine connectedness • Sharing decision making power • Recognising complementary expertise and roles. • Sharing and agreeing aims and process of helping • Negotiation of disagreement • Showing mutual trust and respect • Developing and maintaining openness and honesty • Communicating clearly 	<ul style="list-style-type: none"> • Attunement / engagement • Responsiveness • Respect / authenticity • Clear communication • Managing communication breakdowns (repair) • Emotional openness • Understanding one’s own feelings • Empowerment and strength-building • Assertiveness / limit setting • Building coherent narratives

Processes for relational practice

Currently, a small number of practice models describe processes of how to work relationally with clients, such as the Family Partnership Model’s Helping Process (Davis & Day 2007) and Moore’s (2018) evidence-informed decision making framework.

Our conversations with leaders, practitioners and parents will focus on developing an Australian, early years-specific framework that describe processes that professionals can use with parents and colleagues.



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