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Inclusion dans les cités de l'éducation. Paradigmes et partenariats possibles pour contrer les risques d'exclusion et de mal-être des familles

Anna Pileri¹, Olivier Prévôt², Clara Silva³

Ce dossier thématique présente une analyse sensible des variables d'inclusion et des risques auxquels les familles sont aujourd'hui exposées (Gremion, Gremion, Doumolin, 2019), en particulier lorsque les partenariats territoriaux sont faibles. Le but est donc de mettre en évidence, à travers des recherches et des études internationales, l'état actuel des processus d'inclusion des familles dans les différents contextes et situations de vie. Il est essentiel d'identifier le potentiel que constituent les initiatives portées par les acteurs locaux, sous forme d'alliances et de participation. Il y a là des leviers potentiels pour l'inclusion des parents en situation de difficulté (Francis, Doucet-Dahlgren, 2021).

À la lumière de ce qui précède, de nombreuses études et recherches internationales (Pourtois, Desmet, 2013; Contini, 2012; Silva, 2004; Silva, 2014; Silva, Bottigli, Freschi, 2016; Gigli, 2016; Milani, 2018; Prevot, 2021; Caldin et Pileri, 2021 etc.) ont mis en évidence non seulement ce qui est en jeu dans le domaine de l'éducation familiale et les variables qui s'y rapportent, mais aussi des aspects pertinents et urgents concernant la conception de dispositifs qui peuvent réellement favoriser les processus d'inclusion et d'alliance dans les multiples contextes de vie impliquant les familles. Cette dernière affirmation nécessite une approche écologique (Bronfenbrenner, 2002) qui implique de mobiliser les différents

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niveaux du système (du micro au macro au méso) et ainsi trouver des stratégies d'intervention qui agissent sur les différents niveaux qui le composent et qui sont étroitement interconnectés.

A cet égard, il est particulièrement pertinent de citer le projet de "Réseau International des Cités de l'Éducation⁴ (RICE)", conçu par Jean Pierre Pourtois et Huguette Desmet (depuis 2005 jusqu'à aujourd'hui), dans lequel plusieurs pays collaborent⁵. Ce réseau vise à la fois la construction de partenariats, de collaborations, d'alliances éducatives et d'éducation inclusive partagée (2013). Il s'agit d'un projet international ambitieux qui est né au sein de l'Association Internationale de Formation et de Recherche en Éducation Familiale⁶ (AIFREF) en réponse à des besoins émergents et qui considère la coéducation comme la voie principale vers l'inclusion. Il s'agit de lutter contre les déterminismes social et scolaire et ce, en développant l'acquisition des compétences, en enrichissant les pratiques éducatives à l'école et en famille, par un travail conjoint de co-éducation en faveur de l'enfant (Pourtois, Desmet 2013; Pileri 2017, 2021).

La Cité est définie comme une unité de vie au sein de laquelle l'éducation est l'affaire de tous; elle concerne donc tout autant les responsables politiques que l'ensemble de la population et des institutions qui sont présentes dans la communauté. On y pratique la co-éducation visant la protection et l'émancipation de tous ces enfants mais aussi des adultes en vue d'un avenir collectif favorable. L'accent est fortement mis sur le soutien à la parentalité et sur l'accompagnement des professionnels de l'action psycho-socio-éducative (enseignants, psychologues, éducateurs, puéricultrices, intervenants sociaux, médecins, infirmières, artistes etc.).

Par ailleurs, il est de plus en plus évident qu'aucune solution appliquée unilatéralement n'est en mesure de répondre efficacement aux situations familiales les plus exposées à l'exclusion culturelle, économique et sociale, aspects qui nécessitent des actions incontournables de réseau et de partenariat entre les différentes institutions. En effet, les recherches sur la participation des familles à la vie éducative, scolaire et sociale de leurs enfants (Epstein *et al.* 2009; Vandebroek 2010) ont conduit à plusieurs considérations significatives sur la corrélation entre

⁴ Pour plus d'information: www.lerice.org/index.php

⁵ Belgique, France, Italie, Canada, Martinique, Espagne, Grèce, La Réunion, etc.

⁶ C'est dans ce cadre que le Congrès international AIFREF2022 a été réalisé, qui avait pour *leitmotiv* le thème de l'inclusion décliné dans différents contextes, et dans lesquels s'inscrivent les contributions présentées dans ce dossier.

l'implication des familles et la réussite scolaire et sociale de leurs enfants. Les résultats révèlent également le rôle positif des frères et sœurs et des grands-parents, et pas seulement des parents.

A ce propos, l'article de Daniela Angela Mangione, Paulette Luff et Mallika Kanyal (Université Anglia Ruskin, Chelmsford and Cambridge, Royaume-Uni), met en évidence comment les grands-parents peuvent jouer un rôle important dans la vie de leurs petits-enfants, avec de nombreuses opportunités d'apprentissage et de soutien mutuel. Malgré un large éventail de recherches interdisciplinaires sur le thème des grands-parents, il existe peu de recherches sur ce sujet menées en collaboration avec les grands-parents eux-mêmes. En s'appuyant sur les notions de pédagogie relationnelle, de recherche participative et d'apprentissage transformatif, cet article propose un projet artistique qui implique les grands-parents en tant que co-chercheurs.

La participation est donc considérée comme une valeur essentielle de l'apprentissage et de l'émancipation, parce qu'elle représente un moyen d'exprimer la démocratie et de lutter contre l'exclusion sociale, en permettant à chacun de contribuer à l'élaboration d'un projet commun puisque «apprendre, c'est participer, participer, c'est apprendre» (Brougère et Ulmann 2009, p. 173).

En poursuivant cette analyse, nous ne pouvons pas oublier que le mouvement inclusif est un marqueur important des sociétés démocratiques. Il mobilise étroitement le développement de liens entre institutions, professionnels et familles, et représente un axe fort de l'un des champs de la recherche en éducation et en formation: celui de l'éducation familiale (Francis, Pileri, 2021). Celle-ci peut se définir comme l'action des parents envers leur(s) enfant(s) et les interventions sociales auprès des familles (Gayet, 2006; Pourtois, Catarsi, 2011), sans oublier le rôle des politiques et des réseaux territoriaux (Silva, Freschi 2016).

Toutefois, comme le souligne Alessia Cinotti (Université de Milan Bicocca, Italie) dans son texte, une perspective qui tend à promouvoir l'inclusion et les droits de l'homme nécessite, certainement, une révision du rôle des familles, mais cela ne suffira pas à susciter une nouvelle approche de la "famille" et du "handicap" si l'inclusion n'est pas également adoptée au niveau culturel, ce qui, aujourd'hui encore, représente le principal défi à relever pour construire un cadre d'inclusion qui remette fortement en question l'approche bio-médicale et sociale du handicap.

Il est important de souligner que le concept d'inclusion, d'un point de vue lexical, reflète une évolution dans la hiérarchie des valeurs et

une prise de conscience générale des attentes sociales (Kalubi, Detraux, Larivée, 2006) qui sont conceptualisées en termes de réussite dans les différents contextes de la vie. Mais la réussite implique, l'analyse de l'exclusion, des dés-alliances, avec une attention particulière aux situations de marginalité psychosociale, de handicap et de pauvreté économique et culturelle (Caldin, Pileri, 2021), afin de saisir à un stade précoce les indicateurs de risque et les actions préventives les plus efficaces pour les contrer.

A ce sujet, Nathalie Chapon (Université Bourgogne Franche-Comté, France) interroge l'inclusion des enfants placés dans un dispositif d'intervention sociale; il s'agit d'une notion peu abordée dans la recherche en protection de l'enfance et plus particulièrement en accueil familial. Dans sa contribution, elle propose d'éclairer cette notion en se concentrant sur les enjeux et les ressources de l'accueil familial. Ce travail examine les façons dont une forme unique de parentage d'accueil peut être vécue dans une société plus inclusive. Comme nous le verrons, cette approche offre la possibilité d'élargir le champ de la recherche en éducation familiale à travers la notion d'inclusion.

Dans le même esprit, Gianluca Amatori (Université européenne de Rome, Italie) souligne dans son article le rôle décisif que joue la parentalité sur le bien-être présent et futur, en particulier au cours des trois premières années de la vie d'un enfant. La prématurité ne constitue pas, en soi, la contingence directe et sûre de l'acquisition de formes de handicap ou de difficulté, mais représente une condition de fragilité qui concerne, pour un temps plus ou moins long, l'enfant né et aussi sa famille. Le couple parental, en effet, peut être fortement affecté par la situation vécue par l'anticipation inattendue de l'événement de la naissance, avec des implications qui peuvent concerner aussi bien les perceptions de soi que le sentiment d'auto-efficacité parentale, en mesure de conditionner tous les protagonistes.

Les auteurs impliqués dans ce dossier identifient non seulement les aspects positifs qui favorisent l'inclusion, mais aussi un certain nombre d'obstacles qui entravent la réalisation de liens de collaboration et l'amélioration de la qualité de vie des différentes parties prenantes. Lenka Šulová (Université Charles de Prague, République tchèque), par exemple, souligne que la garde conjointe peut prendre différentes formes, telles qu'une véritable coordination de parents mentalement matures et capables de coopérer dans l'intérêt supérieur de l'enfant. Cependant, il est nécessaire de se demander quand et comment cette forme d'alliance organisationnelle peut devenir adaptée à l'enfant.

Ainsi, les relations qu'entretiennent les familles avec leur environnement ainsi que les partenariats qui peuvent potentiellement en découler constituent un axe de recherche important. Cette notion de partenariat est conçue comme «la définition conjointe, par les partenaires, des objectifs et des moyens à mettre en œuvre pour les atteindre. Le partenariat se distingue de la “coopération”, qui vise la recherche d'une entente sur la mise en œuvre des moyens, de la “concertation” qui s'entend comme un échange d'idées ou de la “collaboration”, qui elle, se concentre sur la réalisation commune d'une tâche» (Durning, 1995, p. 198).

Les aspects cités requièrent des figures professionnelles capables de garantir la qualité inclusive des services pour les familles en recourant à des formes de partenariat possibles. Sur ce thème, Moira Sannipoli (Université de Pérouse, Italie) propose une réflexion sur les dimensions inclusives possibles des services pour la petite enfance. Il s'agit de pratiques significatives de soins et d'éducation qui jouent un rôle crucial au cours des premières années de vie en soutenant la génitorialité.

L'implication des parents dans la vie de leur enfant comprend, aussi, l'aide aux devoirs et le suivi des progrès. Comme le souligne Antigoni-Alba Papakonstantinou (Université d'Athènes, Grèce) dans son article, les résultats des élèves sont souvent liés à l'investissement des parents dans l'éducation, et obtenir de bonnes notes à l'école devient l'un des objectifs non seulement des élèves, mais aussi de leurs parents. L'auteur présente ici les résultats d'une recherche visant à comprendre l'importance que les parents d'élèves de l'enseignement secondaire accordent aux notes scolaires, en se basant sur les perceptions des enseignants. Ces aspects impliquent une concertation et une coopération entre l'école et la famille afin de poursuivre véritablement des objectifs communs.

Anna Pileri (Université de Bologne, Italie), à ce propos, insiste sur l'importance de la fonction coopérative de l'enseignant pour le soutien didactique des élèves avec handicap, qui joue un rôle clé dans la promotion et la garantie de l'accessibilité à un enseignement de qualité véritablement pour toutes et tous. Ceci, en agissant comme un pont significatif dans la co-construction d'alliances verticales, c'est-à-dire avec les enseignants, la direction, l'équipe administrative, etc. et horizontales, c'est-à-dire avec les familles et les ressources territoriales.

Bouchard, Talbot, Pelchat et Sorel (1996) quant à eux distinguent la concertation, qui «réfère à un échange d'idées en vue de s'entendre sur une démarche ou une attitude commune» de la coopération, qui «se définit par le partage des tâches et des responsabilités» (p. 190). Larivée (2008) propose une typologie de collaboration, regroupées en

quatre niveaux selon le degré de relation, d'engagement, de consensus et de partage du pouvoir entre les acteurs. Il s'agit de l'information et la consultation (niveau 1), la coordination et la concertation (niveau 2), la coopération et le partenariat (niveau 3) ainsi que la cogestion et la fusion (niveau 4). Les relations entre les services éducatives, scolaires, sanitaires, la famille et la communauté influencent aussi la signification de la participation parentale puisque cette dernière se retrouve au centre des collaborations de différents acteurs qui veulent agir collectivement sur la réussite scolaire des enfants (Charrette, Kalubi, 2016). Pour Neyrand (2013), cela interroge «une vision de la responsabilité éducative qui, en isolant les acteurs familiaux de leur contexte, procéderait à une psychologisation des rapports sociaux, une subjectivation de l'autorité, qui reviendrait à faire porter aux individus parents toute la responsabilité d'une éducation de leurs enfants» (p. 51).

Ainsi, ce «parentalisme» a favorisé le développement de dispositifs de soutien à la parentalité afin d'«aider», «accompagner», «soutenir» les parents dans leur rôle. «On parle ainsi de plus en plus souvent des “compétences” parentales, voire du “métier” de parent, un peu comme s'il était possible désormais d'identifier le niveau d'aptitude de chaque parent dans sa mission socialisatrice et, en conséquence, de diagnostiquer l'incompétence parentale, la défaillance, voire l'irresponsabilité» (Martin, 2003, p. 13).

Pour limiter ce risque, nous proposons de définir le soutien à la parentalité de façon ouverte, en ne le limitant pas à la relation parents-enfants. En effet, nous considérons que toutes les actions et les acteurs qui aident les parents dans leurs rôles relèvent de ce soutien. Or, si l'on considère que l'enfant, pour se développer, doit pouvoir trouver dans son environnement des réponses à ses besoins, alors enseignants, éducateurs, animateurs, acteurs sportifs, culturels etc. doivent y concourir.

Au propos du soutien à la parentalité, Laura Mihaela Bogza, Tamarha Pierce, Guillaume Bouffard, Laurence Dubé et Sarah-Maude Jean (Université de Laval, Canada), soulignent dans leur article combien la transition vers la parentalité comporte des risques bien documentés pour le bien-être psychologique des nouveaux parents. La grossesse et la prise en charge d'un jeune enfant peuvent être source d'inquiétudes diverses et conduire à l'hypervigilance, à l'évitement et à l'anxiété chez les nouveaux parents. L'anxiété d'un parent peut avoir des conséquences sur la famille et en particulier sur l'autre parent. Cette étude exploratoire suggère que les répercussions de l'anxiété sur l'autre parent, sur le couple et sur le fonctionnement familial doivent être prises en compte dans les

interventions conjugales ou familiales.

Le soutien à la parentalité ne se limite donc pas au fait d'aider les parents dans leur fonction éducative, mais consiste également à les accompagner dans la maîtrise de leur environnement socio-éducatif. Les compétences parentales s'étendent ainsi à la capacité des parents à entrer en relation avec les autres acteurs éducatifs et développer des collaborations avec eux (Prevot, 2021).

Par ailleurs, compte tenu de la récente urgence pandémique, il est aussi pertinent de réfléchir à l'impact que ce phénomène a eu et continue d'avoir sur les familles dans les contextes évoqués. Sur ce point, Silvia Demozzi et Nicoletta Chierгато (Université de Bologne, Italie) apportent une contribution qui montre comment l'urgence pandémique a mis au premier plan la question de la vulnérabilité humaine et a révélé l'incertitude associée à l'existence, ainsi que l'impossibilité de contrôler toutes les variables qui interagissent au sein d'un système complexe. Elle apparaît comme le symptôme d'une crise plus profonde, supérieure à la crise sanitaire : la crise des paradigmes épistémologiques et socio-économiques de la société moderne, qui doivent être radicalement remis en question et changés. Une crise qui implique les familles et les professionnels qui s'occupent d'elles dans différents contextes et peuvent faire obstacle aux processus d'inclusion et de partenariat.

Pour autant, développer des partenariats entre les familles et les acteurs n'engage pas nécessairement les parties dans une éducation conjointe ou partagée. Il s'agit cependant d'une condition nécessaire pour développer des alliances éducatives. Cette approche permet d'aller au-delà du domaine strict de l'éducation et d'investir d'autres champs essentiels aux familles (santé, emploi, formation, cadre de vie, aménités urbaines etc.).

En ce qui concerne les contextes de santé, l'article de Federica Ranzani (Université de Bologne, Italie) illustre la dimension pédagogique considérée par l'auteur comme "invisible et souvent négligée" dans les interactions pédiatre-parents. En analysant un corpus de 23 visites enregistrées sur vidéo, elle se concentre sur l'une des pratiques discursives les plus courantes lors d'une visite pédiatrique, à savoir la demande de conseils, et montre comment les pédiatres et les parents participent simultanément et activement à la construction intersubjective, à la ratification et à la diffusion de modèles culturels et moraux de la parentalité. L'interaction pédiatre-parent constitue un lieu d'éducation informelle, d'alliance et un espace d'inclusion vers des modèles normatifs culturellement partagés de pratiques de soins.

On retrouve l'aspect inclusif des alliances éducatives dans les travaux

de Gilles, Potvin et Tièche Christinat (2012) qui les considèrent comme un ensemble d'actions convergentes résultant de consultations entre différents partenaires, qui s'accordent explicitement pour résoudre un problème formellement identifié. Elles sont donc déclenchées par une difficulté et, en ce sens, nécessitent des interventions pluriprofessionnelles qui mettent en œuvre des méthodes participatives avec la personne qui demande ou accepte leur aide, dans le but d'améliorer sa situation de complexité, ses relations avec l'environnement, voire de la transformer.

Le cadre de complexité actuel, exacerbé également par la récente pandémie, a aggravé certaines situations déjà complexes pour les familles. L'article de Francesca Dello Preite (Université de Florence, Italie) se concentre, en particulier, sur les mères et les responsabilités et charges accrues qui leur incombent pendant les périodes de confinement prolongée. Elle souligne également comment le confinement a exacerbé la violence déjà présente à l'encontre des femmes et de leurs enfants, augmentant une vulnérabilité sociale qui était déjà élevée avant l'urgence sanitaire. L'article de Céline Dujardin (Université du Luxembourg) traite également des situations de vulnérabilité et d'exclusion sociale, qui contient l'idée d'une participation pleine mais inconditionnelle à tous les aspects de la vie. Dans cette définition, la participation se réfère davantage à la personne concernée et moins à la complexité du processus d'inclusion sociale (Davey, Gordon, 2017). Cet article se concentre sur la question des femmes vivant seules ou avec leurs enfants dans un foyer d'urgence pour femmes et leurs parcours d'inclusion sociale.

La perspective inclusive vise donc à réduire les obstacles et les barrières culturelles, économiques et sociales qui empêchent la pleine participation et la prise en charge directe des responsabilités, afin de favoriser l'autonomie personnelle et la réussite de chaque individu. Cela nécessite également la mise en place de contextes véritablement inclusifs, en vue d'améliorer la qualité de vie et la culture de la participation.

En guise de conclusion, espérant avoir fourni quelques boussoles pour stimuler et guider la lecture du dossier, nous tenons à souligner encore une fois que les textes ici présentés, conçus dans une perspective internationale, offrent des pistes de réflexion sur différentes approches épistémiques que nous considérons comme particulièrement pertinentes pour comprendre les aspects qui peuvent favoriser ou, au contraire, entraver les processus d'inclusion et d'alliances souhaités.

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Towards a New Pedagogy of Grandparenting: Proposing a Participatory Project

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Abstract

Grandparents often influence their grandchildren's lives, with opportunities for mutual learning. Despite interdisciplinary research *on* grandparenting, little research is undertaken with grandparents. Inspired by relational pedagogy, participatory research and transformative learning, we propose an arts-based project *with* grandparents as co-researchers. Grandparents may engage in two forms of Working Group: in a drama learning space and/or in visual and language-based activities. In these Working Groups, grandparents will reflect upon their roles. A Research Group of grandparents will work with researchers to analyse data from the workshops and disseminate findings. We anticipate co-creation of new understandings of contemporary grandparenting.

Keywords: grandparenting, participatory research, arts, transformative learning, relational pedagogy.

Abstract

I nonni spesso influenzano la vita dei nipoti, con occasioni di apprendimento reciproco. La ricerca interdisciplinare *sui* nonni è proliferata, mentre solo una piccola parte viene intrapresa *con* i nonni. Ispirate dalla pedagogia relazionale, dalla ricerca partecipativa e dall'apprendimento trasformativo, proponiamo un progetto coinvolgendo i nonni come co-ricercatori, che parteciperanno, riflettendo sul proprio ruolo, in due forme di Gruppo di Lavoro: in uno spazio di apprendimento attraverso il teatro *e/o* in attività visive e linguistiche. Un Gruppo di Ricerca di nonni lavorerà con i ricercatori sull'analisi dei dati

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e la divulgazione dei risultati. Il progetto prevede la co-creazione di nuove interpretazioni sull'essere nonni nel mondo contemporaneo.

Parole chiave: nonni, ricerca partecipativa, arti, apprendimento trasformativo, pedagogia relazionale.

Introduction

In recent decades, there has been a growth in interest, world-wide, in researching grandparenthood and the role of grandparents in diverse family contexts. Increased life expectancy improves the chance for grandchildren to have living grandparents, and even great grandparents. This provides opportunities and raises challenges for intergenerational learning, family relations and the health and well-being of grandparents themselves and of family members.

The importance of grandparents in contemporary family life is pivotal, especially for emotional, practical and financial support, including their role as childcare providers. Factors such as cuts in public services and the increased involvement of mothers in the labour market make grandparents a key (yet sometimes taken for granted) resource for the care of children (Kanji, 2018). Meanwhile, family structures and commitments are changing and intergenerational relationships and assistance within families cannot be relied upon.

The interdisciplinary literature includes typologies of grandparenting (Cherlin, Furstenberg, 1985; Neugarten, Weinstein, 1964; Szaban, Trzop, 2021) and highlights several mutual benefits of grandparenting, for both grandparents and grandchildren, as well as drawing attention to problems. There is, however, a dearth of studies undertaken by grandparents themselves into the role that grandparents play within the family environment and their recognition within society.

In response to demand for new studies about grandparenting that include grandparents as researchers (Weil, Mendoza 2019), this paper presents the aims and the design of a proposed participatory research project involving grandparents as co-researchers in exploring the meanings of grandparenting. Definitions, project aims and the approach to literature on grandparenting, are outlined. This is followed by a description and justification of the intended participatory research principles and techniques, and an explanation of the use of drama as a pedagogical tool for meaning making, in the light of adult transformative learning theory.

1. *Definitions to guide the study*

Grandparents in this study are mainly those who are related to the parent of a grandchild, as the parent's parent. They might be co-resident with the parent and grandchild, live close by, or reside at a distance. Grandparents will self-identify for this study, giving scope for inclusion if their own child is a step-parent of the grandchild or if they are step-grandparent to a partner's grandchild, and also including "fictive" grandchildren, whereby an adult has a grandparent-like relationship with a child who is not related (Hank *et al.*, 2017). We recognise that some grandparents take on primary or custodial care responsibility for grandchildren (Hayslip *et al.*, 2017) and, whilst this is not the focus of the current research, the study is also open to these grandparents.

Pedagogy is perhaps an unusual word to choose when exploring the roles of grandparents, especially in the UK context where pedagogy is strongly associated with learning and teaching in formal educational contexts; for example, it is defined as the practice (or the art, the science, or the craft) of education including provision of learning environments for play and exploration and some element of instruction (Siraj-Blatchford *et al.*, 2002). Papatheodorou (2009) reminds us of the etymological origins of the concept of pedagogy as "child" and "lead" (or, more accurately, "guide"), and evokes the metaphor of two or more people walking hand-in-hand on a journey together.

Relationality is at the core of this concept of pedagogy, with a focus on shared learning experiences, characterised by reciprocity, dialogues, wisdom and trust.

Ethics of care are also central to an articulation of contemporary pedagogy (Luff, Kanyal, 2015) thus recognising the potential of intergenerational relationships for enrichment of the lives of children and adults alike, and as a contribution to a socially sustainable future (Oropilla, Ødegaard, 2021; Taggart, 2022).

2. *Aims of the project*

The aims of the collaborative research are threefold: firstly, for grandparents themselves to develop definitions of grandparenting; secondly, to study grandparents' lived experiences of being with grandchildren; and, thirdly, to contribute to development of a pedagogy of 21st century grandparenting. These are provisional aims, drafted by the research

team. The aims are open for discussion with the grandparent co-researchers, who will be recruited for the study, and may be refined and developed. In the sections that follow, the draft aims are clarified as the approaches to the research are explained and justified.

3. *The complex interdisciplinary topic of grandparenting*

Research about grandparents is drawn from a variety of academic disciplines. These range from evolutionary biology and anthropology, which give clues about the usefulness of adults surviving beyond their main reproductive years (Hawkes, 1997) and offer insights about the value of allo-parenting - the shared care of babies, and children in different human cultural groups (Hrdy, 2011); to historical accounts of grandparenting in various times and places (Gourdan, 1999), including visual images of grandparents (Gottlieb, 2021); and biographical and fictional accounts of grandparenting in literature (Beland, Mills, 2001). Further, the several social scientific accounts of grandparenting from human geographers, population scientists, gerontologists and public health experts, social policy specialists, sociologists and psychologists, investigate and analyse aspects of this specific feature of human family life during middle and later age from slightly different perspectives and with varying interests and agendas (e.g., see Danielsbacka *et al.*, 2022; Duflos, Giraudeau, 2022; Szinovacz, 1998; Hayslip, Fruhauf, 2019; Vermote *et al.*, 2021).

In our own field, of early childhood education and care, grandparents are rarely mentioned, despite their importance in the lives of children and families. There are some studies capturing inter-generational social learning (Phillips, 2011) and specific projects to support grandparents and young grandchildren, such as the Eden Project (2021) “Deep Roots, New Shoots” initiative, in the UK. Within the specific context of inclusion, there is evidence of the significance of grandparents’ involvement and support in families where grandchildren are diagnosed with special educational needs and disabilities of different kinds (Hastings, 2006; Lee, Gardner, 2010; Novak-Pavlic *et al.*, 2021).

For the proposed study, a scoping review of articles from education and social sciences will be conducted using ProQuest and EBSCO databases, with the keywords grandparent, grandparents, grandparenting, grandmother and/or grandfather. The results will be filtered for relevance to grandparents’ roles and relationships with grandchildren, and

family education with grandchildren. The selected papers will be summarised as a reader-friendly annotated bibliography to share with grandparent co-researchers. During final data analysis and report, writing this bibliography will form a point of reference to bring project findings into dialogue with existing research.

4. Principles informing the project

Participatory Research recognises respectful, non-dominant and mutual capacity building amongst all participants (Kastner, Motschilnig, 2021). The primary aim of this participatory project is to produce knowledge in collaboration between researchers and research participants. Grandparents will share control of the research not only within the inquiry but in a joint process of knowledge-production that leads to new insights for researchers and participants. This collaborative approach is guided by four fundamental principles of participatory research:

1) Firstly, Bergold and Thomas (2012) propose “democracy” as a precondition for participation. The democratic participation of grandparents and the social commitment of the researchers are only possible where there is a context that allows it. Democracy as a precondition may have consequences on the extent of grandparents’ participation, the selection of research questions and aims, and the nature and dissemination of research findings. The initial context of research is Italy, a democratic republic, with traditions of participatory pedagogy and research. A well-known example of this is the Reggio Emilia approach to early childhood education developed in cooperation between children, teachers, pedagogues, parents and the wider community, and supported by networks of academics, artists and other stakeholders (Lazzari, 2012; Malaguzzi, 1993).

2) Second, Bergold and Thomas (2012) emphasise the need for a “safe space” in participatory research. During the process of data collection, participants may disclose their personal views and their own opinions and experiences. Participatory researchers must seek these views, including dissenting views, as they may be essential for processes of knowledge production, and enable discovery of new aspects of a topic. Our research aims to facilitate openness by creating a trusting space where grandparents can be at ease and confident about sharing their views. Grandparents will be assured that they will not suffer any disadvantages if they express critical perspectives. The goal will not be

to restrict participation to conflict-free conversations but rather encourage a joint discussion, with an aim to either resolve conflicts or accept the different positions that are held.

3) The third fundamental principle is about who participates and how. Participatory research is generally conducted directly with the immediately affected persons who, in this case, are grandparents. A primary aim of participatory research is the reconstruction of knowledge with people's involvement. In most cases, co-researchers are from marginalised groups whose views are seldom sought. Research with grandparents, however, is on the rise but mostly in health studies or social work research. The characteristics of their roles have mostly been defined by others, with limited participation from grandparents. Our research, therefore, seeks to work with grandparents who can themselves define their roles, describe their experiences, and contribute to the creation of a pedagogy of grandparenting for the XXI century.

Weil and Mendoza (2019) highlight the need for transparency about sample size and selection of participants in qualitative research with grandparents. Our research will adopt purposive sampling, recruiting via local organisations and social media (library, places of worship, local newspapers, and community Facebook pages) with openness to work with grandmothers and grandfathers from diverse backgrounds and social groups. The initial phase of the project is privately funded and will take place in a town in the south of Italy.

4) Last, but not least, is the fourth principle of different degrees of participation. We acknowledge that not all grandparents may wish to participate fully in all aspects of the project and therefore propose differing opportunities for participation.

Grandparents will be made aware of the structure of the project and the available activities at each stage of the research. They will be given the option to participate voluntarily in either the Working Group(s) (WG) or Research Group (RG), or both (Kanyal, 2014). Grandparents' level of participation will be decided by the participants themselves. All kinds of participation, ranging from quiet observation to full involvement, will be respected. Grandparents may either continue their participation in the project via the RG or exit after participation in one, or both, of the WGs. The RG will analyse the data and share findings with other members of the WGs for discussion and agreement. The RG will co-create content for the project report, identify dissemination opportunities within the community and inform future directions for the research.

The varying possible degrees of participation, via the three distinct WG and RG workshops, are summarised in Tab. 1.

Working Group (WG) Workshop 1	A group of grandparent co-researchers will be recruited to participate in workshops to investigate grandparenting using a Drama Learning Space (DLS) research technique. This technique, drawn from processes of theatrical improvisation, is designed to bring together grandparents of different ages, from a range of backgrounds, to investigate and define their roles, relationships, and requirements. Workshop 1 will use the DLS with grandparents to explore experiences of being a grandparent and draw upon their memories to define the role(s) and definitions of grandparenthood.
Working Group (WG) Workshop 2	Workshop 2 has two parts. The first part of the workshop invites grandparents to participate in mutual decision making on a range of data collection methods. They will co-produce approaches and techniques for capturing and reflecting upon lived experiences with grandchildren. Examples include, but are not restricted to: visual methods, e.g., photo stories, videos, concept maps, timelines or drawings; written accounts, e.g., diaries, narrative or poetry; and/or capturing their conversations and group discussions. Grandparents will experiment with ideas and decide upon the methods of data collection that they feel most comfortable to utilise. The second part of the workshop is for data sharing, in which all evidence will carry the same value. Grandparents will bring and share data within the group and reflect upon their experiences.
Research Group (RG) Workshop 3	The RG will consist of grandparents who wish to continue their participation after the WG. Workshop 3 involves grandparents in analysing diverse lived experiences, utilising thematic content analysis and narrative analyses of data, and using these insights to contribute to a pedagogy of grandparenting. The RG will also identify content for research reports and future dissemination opportunities.

Tab. 1 – *Research Design*

Participatory workshops, in the form of both Working Groups and Research Group, should allow the grandparents to build findings based upon their own experiences rather than derived from any external assumptions (Dahya, Jenson, 2015). The authors of this paper will facilitate the workshops, based upon their experience and expertise. The distinction between the facilitators and grandparents is blurred, for example, by Paulette's boundary-crossing role as a lead member of the project team and grandmother to two young granddaughters.

5. The drama learning space model

Arts-based, creative methods are increasingly used within participatory research to capture the complexities of lived experience, allow for diverse means of expression of ideas, and reduce hierarchies amongst participants and between participants and researchers (Foster, 2007; Kara 2015; Mannay 2015; Lopez et al., 2018). In our project the Drama Learning Space (DLS) model is underpinned by the concept of "process drama" (O'Neill, 1995), meaning that the performance itself is not the goal but rather the learning journeys that participants individually go through in a group learning context. It also refers to an educational drama theory called "Who I am" (Oliva, 1999), according to which, people in a drama workshop explore ways of knowing about, being and acting and communicating with their "whole selves". The DLS is based upon key drama elements (theatrical headlines), such as the role of the character, the tensions that might arise within specific times, places and situations. It also focuses on the use of symbols, movement, and the body as a tool for communication.

Questions that the DLS session will focus on are, for example: who is the character? What is she/he doing? What is happening? Where? When? With whom? What is the grandparent actor trying to communicate?

The DLS allows participants to explore their roles as grandparents, focusing on the "here and now" (in terms of time, place, situation, environment and mood). It uses symbols, sounds and verbal/non-verbal languages through the body and the voice, and for identity enactments. It is thus a flexible learning space for acting, rehearsal and dialogue among grandparents, trying to explore altogether the role that grandparents play in grandchildren's lives, in their family, and more widely in society.

Participants engaged in a drama learning space are involved in

groupwork, connecting emotionally, playing physically, listening intently to themselves and to the others, and responding/enacting creatively as protagonists of their own performances. This means that they will be engaged as grandparents in confronting themselves with possible “disorienting dilemmas” (Mezirow, 2009) that the complexity of grandparenting may bring about. While seeking epistemological and ontological meanings through being on stage, reflection, communication, relationships, and dialogue with others are key means for interpreting the performances and the grandparenting role. This occurs through the elaboration of one’s own experience and sharing with the group after the engagement of the whole self in drama exercises.

The dialectic interdependence and interrelationship among the emotional, affective, cognitive, social, spiritual and physical spheres of the person is a key aspect of the DLS, in initiating transformative learning processes, via “disorienting dilemmas” and questioning of ones’ own frames of reference, ways of thinking, of feeling about things and of acting (Cranton, 2016; Dirkx, 2006; Mangione, 2014; Mezirow, 2009).

The DLS offers a powerful pedagogical means for exploring grandparenting worlds and for developing a pedagogy of grandparenting.

Conclusions

In summary, we propose an arts-based participatory project in which grandparents collaborate as co-researchers to define and describe their roles. A “Working Group” of grandparent researchers will use drama, and other methods of their choice, to explore their lived experiences of grandparenting and reflect upon times spent with their grandchild(ren). A “Research Group”, drawn from members of the Working Group of grandparents, will work as co-researchers to analyse the resulting qualitative data and to utilise co-constructed findings to report on grandparents’ ideas and experiences of their grandparent roles, and to propose a pedagogy of contemporary grandparenting.

In their research into adult basic education, Kastner and Motschilnig (2021) bring together educational practice, participatory research and transformative learning theory as three complementary elements for the establishment of democratic and hopeful education and research. Similarly, this proposed project will combine the following rich ingredients: relational pedagogy, participatory approaches to research with and for grandparents, and the transformative potential of the drama learning

space; further, it will use them as means to co-create new understandings of grandparenting in the XXI century.

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Families and Disability. Building an Inclusive Framework: A Cultural Challenge

*Alessia Cinotti*¹

Abstract

An inclusive perspective certainly requires revisiting the intersection between families, disability, and environment. However, this alone will not bring about a more inclusive approach to families unless inclusivity is also embraced in the broader culture. Cultural barriers continue to pose the greatest challenge to building a framework of inclusion that supports parents.

Keywords: families, disability, cultural challenges, inclusion, human rights.

Abstract

La prospettiva inclusiva richiede certamente di rivisitare l'intersezione tra famiglie, disabilità e contesti, che però non potrà incidere su un nuovo approccio alla famiglia, senza un'equivalente valorizzazione del piano culturale che, ancora oggi, rappresenta la sfida più importante per costruire un *framework* inclusivo per il supporto alla genitorialità.

Parole chiave: famiglie, disabilità, sfide culturali, inclusione, diritti umani.

Introduction

The *intersection* between families, disability, and environment has traditionally received scant attention within academic research, national policies, and international conventions. More recent debates have yielded a broad consensus regarding the key role of the family in the dynamic interaction between persons with disability and their environment (WHO, 2001) and the consequent urgent need to provide families with educational support (Caldin, 2022). Parents require support if they are to play a generative and reflexive role and actively participate in deci-

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sion-making processes (UN, 2006). This implies the need to develop a more co-operative and supportive partnership between families, teachers, early education and care practitioners, healthcare professionals and academic researchers. All these actors may need support and encouragement as they learn to work as equal partners (Pavone, 2015).

Nevertheless, families continue to be perceived as a “weak link” (that is to say, as “helpless”, “in need of assistance and protection”, “sick”, “unfortunate”). Indeed, once certain social representations have been produced and deployed, they are never definitively set aside. Persistent social representations can continue to condition cultures, practices, and policies at both the micro and macro levels (Booth, Ainscow, 2002; Kalubi, Bouchard, 1998; Lepri, 2011; Ramel, 2014).

Yet, the traditional representations of the family are not in keeping with a human rights approach. They do not promote the emancipation of families or foster self-determination in relation to their life prospects (Cottini, 2021, Martínez-Tur *et al.*, 2018). An inclusive perspective certainly requires revisiting the role of families, yet this will not bring about a new approach to the “family” and “disability” unless inclusivity is also embraced at the broader cultural level. The latter step remains the principal challenge we face in building a framework of inclusion.

1. *Family and disability: A question of human rights*

Since the drafting of the Convention on the Rights of Persons with Disabilities (CRPD) in 2006, disability can no longer be approached as a healthcare issue demanding an exclusively healthcare-based response. The CRPD has established respect for human rights as the founding principle underpinning the rights of persons with disabilities. As stated in the Convention itself, “despite various instruments and undertakings, persons with disabilities continue to face barriers in their participation as equal members of society and violations of their human rights in all parts of the world” (Preamble). Such barriers and violations can also be experienced by the parents of persons with disabilities, who often encounter isolation, discrimination and/or find that their *set of possibilities* is more limited than that of families whose children do not have disabilities (Sen, 2002). Yet, inclusion and participation are essential to human dignity and to the enjoyment and exercise of human rights for both persons with disabilities and their families. The core issue is that everybody, including parents, with no exceptions, must be given equal opportunities and be truly included in

society. This is not a matter of claiming “special rights” for families, but of asserting the need to protect and promote their basic rights, which are sometimes viewed as less urgent than the rights of family members with disabilities, or alternatively are overlooked or taken for granted.

Culturally and politically speaking, disability should no longer be viewed as the “problem” of an individual and/or family, that is to say, as a “personal/family tragedy”. Rather, it is a *biopsychosocial* issue (WHO, 2001) that first invokes collective responsibility and then individual responsibility. Indeed, in its International Classification of Functioning, Disability and Health (ICF), the WHO emphasizes the importance of social contexts, where individuals and their environment interact. Arguably, contexts can also be of *hindrance* in the everyday lives of the families of people with disabilities, who encounter *barriers* that can limit their own participation and/or functioning, to borrow a key term from the ICF.

The context – as the ICF (2001) clarifies – can hinder the performance of a person (or a group of people) by either presenting barriers (e.g., architectural barriers) or by not offering facilitators (e.g., the failure to provide appropriate aids). Hence the need to raise awareness (and this is a cultural challenge) and re-organize contexts to make them accessible to all (families with children with and without disabilities). *Differences* should be read as challenging us to promote change by seeking to overcome (or limit) the barriers posed by contexts. Such barriers are often unintentional and may take the form of structural, organizational, relational or cultural obstacles.

In relation to cultural obstacles, Lepri (2020) argued that situations of disability (which also include parents) need to be freed from two social representations that have dominated throughout history and remain strong today: the *bio-medical* social representation, which reduces the person with disabilities to “someone who is ill/a patient to be treated”, and the *welfarist* social representation that equates having disabilities to being an “eternal child”. Thus, even today, we continue to imagine these people as continuing to require the levels of attention and protection that are typical of childhood throughout their entire lives, forcing them into a condition of subordination and dependence. This poses an insurmountable obstacle to the possibility of growth, autonomy, self-determination, and the construction of an adult identity (*Ibidem*). We still find it exceedingly difficult to imagine and design educational projects for persons with disabilities – especially intellectual and/or complex disabilities – that foster their social participation, autonomy, exploration of the world, and taking on of social roles.

As mentioned in the *Introduction*, the dominant social representations of persons with disabilities have – indirectly – influenced the social representations of teachers, educators, healthcare practitioners, etc. concerning the families of these individuals. More specifically, they appear to have fostered a social representation of such families that is distorted and incomplete, and far removed from a “realistic” image of “flesh-and-blood parents”.

2. *Cultural challenges to inclusion: Questions, and future prospects*

The inclusion of families of children with disabilities demands an acceleration of the current cultural shift towards approaching parenthood from a perspective of *human rights, citizenship, and self-determination*. Only in this way we could transcend the notion of a “personal/ family tragedy”, which – still today, as mentioned earlier – pervades the broader community and, sometimes, even schools and educational services. Thus, new methods of support must draw more deeply on *pedagogical knowledge* and revolve around changing and enhancing the context by activating a support network that encompasses families, services, practitioners, and the community (Caldin, Giaconi, 2021).

Existing cultural approaches to supporting parents must be revisited; we must move beyond the current, mainly transmissive methods, which envisage a trajectory that is mapped out and directed by experts and is standard for all families. Indeed, the support offered to the parents of children with disabilities continues to be informed by the biomedical model. It tends to be “delivered from on high” by experts, from a predominantly clinical/specialized perspective that sees the parents’ role as mainly passive.

The alternative would be a participatory model of shared intervention and educational action with a focus on generating new opportunities in everyday lives of children with disabilities. However, the current pattern is paradoxical: the main interlocutors of practitioners should be the parents (and/together with the person with disabilities). The interaction between these figures (parents, practitioners, persons with disabilities) should represent the *key coordinate* for educational work with parents (Bouchard, Kalubi, 2003; Kalubi, Angrand, 2020).

The goal should be to move progressively away from a perspective that sees practitioners as “experts” and to develop a cultural perspective that views the expert as co-facilitating possible trajectories with families.

Responsibility for such jointly developed trajectories should be shared and participatory. Viewing support in this way means interpreting parents as *causal agents*, with the aim of making families increasingly autonomous (including from the point of view of having the possibility to choose) and “at the helm” of their plans for their own lives and for their family lives. In this sense, it is important to foster the ability – of the parents, in this case – to intervene actively and transformatively in their everyday life contexts, so that they can perceive themselves as “effective” in managing events (and not as delegating their role to others).

Let us therefore outline different cultural approaches to supporting families in the area of disability. This exercise will demonstrate that the meaning attributed to the term *support* is by no means univocal (in the culture) and that this is reflected in the different kinds of possible intervention (in practice). Dondi (2018, 2022), for example, proposed four leading “models” that practitioners may draw on:

1) the *professional-centred model*: practitioners are the experts when it comes to identifying the needs of children and their families. There is an underlying expectation that the family should trust and rely upon the practitioner, who has all the answers;

2) the *partnership with the family* model: practitioners see the family as “executive”, or capable of effective intervention, yet defining the needs of children and families and what constitutes suitable intervention continues to be the “prerogative” of the professionals;

3) the *working model with a focus on the family*: practitioners see the family as “consumers” who, with the right help, can choose between the different options identified and presented by professionals;

4) the *family-centred model*: professionals see the family as an equal partner; interventions are tailored, flexible, and designed to cater for the needs of individual children and their families, and to strengthen and support family functioning; the family is the ultimate decision-maker.

These four approaches represent *culturally different* ways in which practitioners can relate to parents. Albeit with different nuances, the first two models are both characterized by a logic of separation; the parent is seen as “passive” and “reliant”, and/or as a “good” performer who, however, follows a “route” that has already been defined and presented by others (namely, the practitioner in the role of expert).

In the second two approaches, the support offered is more family-centred – and in the last approach particularly, attention is paid to the needs of all family members and, not just to the needs of the child or

young person with disabilities. Thus, support progressively becomes a *complex, global and situated* trajectory, within which the family is called to play a responsive role.

This is not a merely a “technical” matter and/or related to practitioners’ “professional competences”, but also – and above all – a cultural mindset. It requires de-constructing the concept of “support” that historically took root in the collective imagination of practitioners and the wider community, with a view to building a new concept that is more in keeping with the construct of self-determination. This challenge does not only involve practitioners. It also concerns the stereotypes, expectations, and cultural models of parents, as well as the meanings that they themselves attribute to support (What do they expect? How do they imagine it?).

In other words, a “family-centred” approach also requires parents to behave differently towards the services they encounter (from the nursery to the day centre, and so on). Specifically, this will involve not behaving like passive recipients who are “waiting” for a “solution/pathway” to be mapped out for them, but rather as co-actors and co-protagonists along a trajectory that is always in the making (Coyne, 2015). Support services will need to foster parents’ ability to cope with “problems” and “complex situations” by *intentionally* and *reflexively* mobilizing and/or seeking out personal/family/contextual resources.

All this will require them to engage with the real everyday lives of families, where learning is not based on a merely theoretical knowledge, but on the acquisition of both parental and reflexive competence. Indeed, the fact that support pathways for families are experiential makes them reflexive by nature. This is in keeping with the complexity of education in our contemporary era and with the educational challenges that contemporary parents encounter in their everyday lives.

Today, reinforcing parental competence is a key aspect of enhancing support for families who are dealing with disability in their lives. Thus, competence-based support may offer a new cultural framework, in which the family is seen as driving inclusive processes at the *intersection* of families, disability, and environment.

Conclusions. The cultural challenges involved in attaining inclusion

This discussion about supporting the families of children with disabilities reflects the complexity that currently characterizes support services for all families (with or without children with disabilities).

Hence, we need to set up a network of services (including schools of all levels) that draws on the conceptual framework of the inclusive approach. These services would analyse the educational and social needs of families, promote inclusion by creating opportunities for group activities and encounters, and encourage the participation of families in their everyday life contexts. Ideally, they would cater for the diverse needs of all families, in recognition of the fact that all contemporary families face similar, distinctive educational challenges (Milani, 2018; Riera, Silva, 2016). Inclusive services would embrace the epistemological paradigm of difference (which can comprehend an infinity of characteristics).

This would entail seeing “difference” as a resource for designing and implementing educational projects that stimulate learning/transformational processes and participation. As it is defined here, support for families is also in line with the family education perspective; it speaks to Enzo Catarsi’s – still highly relevant – call for a fostering and non-reparative perspective «that values the family’s existing resources and helps parents to give their best and to independently construct a parenting style that relies on reflexive reasoning» (2006, p. 17; my translation).

Hence, a key goal is to enhance parents’ reflexive competence, and to enable mothers and fathers to learn from their everyday lives, via a recursive cycle comprising *experience*, *reflection*, and *knowledge* (Catarsi, 2002). This will require more visiting and parental support projects in one of the settings where it is most difficult to intervene: the home. Such projects must not be exclusively focused on healthcare during the post-partum period or breastfeeding, although this is very important area, but rather must also target families’ educational and social needs.

From a nurturing perspective, it is important to initiate educational work with families at an early stage and to apply a multimodal approach to overseeing children’s educational and social development, especially during their crucial first thousand days of life. This will represent a key step towards forging a relationship between services for families and everyday life settings. Working on educational and social dimensions directly in the home, especially while the child is still very young, will require overturning traditional intervention strategies. For example, home visit programmes might include events held in the evening or on weekends, to offer a flexible response to the needs of families at times when both parents can realistically be present (while avoiding sensitive times such as baby feeding times, bedtime, etc.). Parents’ pedagogical knowledge may be built up via home visiting projects with an educational figure such as a socio-pedagogical practitioner. A key aspect will be

helping parents to develop the planning dimension of their parenting, a cornerstone of education that involves anticipating the future and what it is possible to achieve by means of *intentional* educational action.

At the same time, the infant-toddler centre will also play a fundamental role. This is – potentially – one of the most inclusive settings that families can encounter at the beginning of their parenting journey. It is a setting that offers education to children (with and without disabilities) and also to their parents, via the provision of everyday, diffused forms of support, including – where necessary – by directing families towards specialized services for specific needs (Cinotti, 2016). The other great strength of the infant-toddler centre is its mandate to intervene at a very early stage in the child's life. Infant-toddler centre staff encounter parents and children (with and without disabilities) while the latter are still very young and offer early childhood education programmes (UNESCO, 1994) that are aimed at enhancing parenting skills as well as providing crucial educational opportunities to the children themselves.

This early encounter between the infant-toddler centre and families evokes the concept of «educational prevention» (Catarsi, 2000, *passim*; my translation), defined as reaching out to (and bringing together) parents in their everyday life contexts and identifying – as early as possible – the areas in which they require minor support. In this case, support can mean helping parents to draw on their existing and/or latent (or not known yet) resources, whether at the individual, family, or collective level. Thus, the infant-toddler centre offers a socio-cultural and relational framework for implementing processes of growth and transformation with the families that “pass through” and “live in” this educational setting.

A key question that applies to the provision of support to parents – which has been raised by Cottini (2021, 2017), albeit not directly in relation to parenting – is that of not confusing inclusion with hospitality. More specifically:

if we limit ourselves to opening the doors, but we are not willing to also make changes to the setting to allow everyone to actively participate, we are effectively hosting people in an environment, but with the conviction that it is not truly theirs, given that they do not have all the characteristics required to fully take part in it (Cottini, 2021, p. 15; my translation).

If we assume that standard settings (such as the infant-toddler centre) must offer true inclusion (and not mere hospitality), we need to recognize that inclusive processes can only be successful if they permeate set-

tings in all their breadth and complexity, transforming them into facilitating environments that guarantee equal opportunities and equal access and participation rights (Caldin, Cinotti, 2020).

Once again it is clear that the crucial factor is the culture that surrounds the provision of support to families and, in this regard, special education offers us a key lesson. The extensive expertise (Caldin, 2019) that comes from forty years of school integration and inclusion will not benefit contemporary inclusive processes if we forget that what “works” for a person with disabilities often becomes a resource for everybody. (A classic example of this is wheelchair ramp that also benefits a pregnant woman, an elderly person, a young man whose leg is in a cast, a young woman with a heavy suitcase to carry, etc.). If we transfer this perspective to the domain of support for (all) families, we realize that practices routinely implemented with/for the families of children with disabilities can/should be routinely implemented with all families.

Our experience with disability allows us to “zoom in” on educational issues/challenges that also affect families whose children do not have disabilities (Cinotti, 2016). Thus, «the techniques, care, choices, and tools that have already been tested, including in separated settings» (Canevaro, 1999, p. 29; my translation) – as, for example, in ad hoc settings for families with disabilities – may be introduced into all settings (e.g., infant-toddler centres, schools, socio-educational services, etc.).

After all, one of the tasks of special education is to implement special intervention, that is to say, uncommon intervention, which however is waiting to become common, to be repeated, and universally shared (Montuschi, 1997). This transition – from the special to the ordinary – is a fascinating *cultural challenge*. A challenge that is framed to us by the inclusive approach as a path to follow, not by ourselves, but together with families.

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L'inclusion des enfants confiés en famille d'accueil

*Nathalie Chapon*¹

Résumé

La question de l'inclusion des enfants confiés au sein d'un dispositif d'intervention sociale est une question peu abordée dans l'ensemble des travaux de recherche en protection de l'enfance et plus particulièrement au sein des familles d'accueil. Dans le cadre de cet article, nous proposons d'éclairer cette notion au prisme des travaux réalisés autour de la parentalité d'accueil et des suppléances familiales (Chapon, 2014, 2016, 2018). Nous abordons les nuances de la notion d'inclusion, au regard des différentes suppléances familiales, et l'émergence d'une solidarité familiale d'accueil à l'égard des parents d'origine et du jeune accueilli. Ces travaux interrogent les manières de vivre une forme singulière de parentalité en famille d'accueil dans une société plus inclusive.

Mots clé: inclusion, enfant confié, solidarité d'accueil, famille, parentalité.

Abstract

La domanda dell'inclusione dei bambini in affido all'interno di un sistema di intervento sociale è un tema che ha ricevuto poca attenzione nel corpus della ricerca sulla protezione dell'infanzia e, più specificamente, sull'affido. In questo articolo ci proponiamo di approfondire questa nozione attraverso il prisma del lavoro realizzato sulla genitorialità adottiva e sulla sostituzione familiare (Chapon, 2014, 2016, 2018). Approfondiamo le sfumature della nozione di inclusione, in relazione alle diverse sostituzioni familiari, e l'emergere di una famiglia affidataria solidale e in tenendo in considerazione dei genitori d'origine e del giovane assistito. Questi lavori mettono in discussione i modi di vivere una forma singolare di genitorialità nell'affido in una società più inclusiva.

Parole chiave: inclusione, bambino in affidamento, solidarietà affidataria, famiglia, genitorialità.

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Introduction

La question de l'inclusion des enfants confiés au sein d'un dispositif d'intervention sociale est une question peu abordée dans l'ensemble des travaux de recherche en protection de l'enfance et plus particulièrement au sein des familles d'accueil. Dans le cadre de cet article, nous proposons d'éclairer cette notion au prisme des travaux réalisés autour de la parentalité d'accueil et des suppléances familiales (Chapon, 2014, 2016, 2018). Que signifie l'inclusion des enfants confiés au sein d'un dispositif d'intervention sociale tel que le placement familial?

Dans un premier temps, nous abordons les nuances de la notion d'inclusion en protection de l'enfance en montrant sa variabilité selon les différentes suppléances familiales ou dynamiques de placement présents en famille d'accueil. Dans un second temps, nous interrogeons cette possible inclusion à partir du constat de l'émergence d'une solidarité familiale d'accueil à l'égard des parents d'origine et du jeune accueilli.

1. L'inclusion en protection de l'enfance

Si la notion d'inclusion est de plus en plus utilisée dans les médias, dans le milieu scolaire et associatif, elle est peu usitée en protection de l'enfance. Cette notion induit l'annonce d'une évolution des valeurs et des pratiques, voire d'un changement de paradigme social (Bouquet, 2015, 15). Elle se décline le plus souvent dans différents contextes aux plans économique, social, culturel, citoyen et professionnel. Que signifie l'inclusion des enfants confiés au sein d'un dispositif d'interventions sociales tel que le placement familial?

Tout d'abord que signifie le terme «inclusion»? Le mot «inclusion» signifie «état de quelque chose qui est inclus dans un tout, un ensemble» (Rey, 2012). Bouquet en 2015 dans un article analysant l'approche-sémantique de l'inclusion, explique que ce terme vient du latin *inclusio* qui signifie emprisonnement. Elle montre qu'après une longue absence d'usage, il est repris au XIX^e siècle au sens d'insérer, c'est-à-dire de «faire entrer un élément dans un ensemble». Ainsi le terme «inclusion» comporte deux aspects, l'inclusion ségrégative et l'inclusion intégrative. L'inclusion ségrégative est une dynamique qui cloisonne, alors que l'inclusion intégrative est une dynamique d'ouverture. Elle montre qu'aujourd'hui l'emploi de ce mot se fait dans un sens très positif, évoquant une finalité. Il est lié aux processus d'insertion sociale et d'intégration

économique, tout en étant à la recherche de participation sociale, culturelle et civique des groupes sociaux. On parle de société inclusive, d'école inclusive mais pas encore d'intervention socio-éducative inclusive... Ainsi pour le Conseil économique et social (CESE), la société inclusive est une chance pour les individus car au-delà de les intégrer, elle insère les individus au sein des groupes sociaux et transforme ainsi la société en en faisant un principe d'égalité et de droit. Comment alors parler d'inclusion en accueil familial?

2. Une inclusion variable de l'enfant confié en protection de l'enfance

Pour éclairer l'approche de l'inclusion, nous proposons tout d'abord une lecture du contexte spécifique de l'accueil familial à partir de l'éclairage de la notion de parentalité d'accueil (Chapon, 2014, Chapon, Neyrand, Siffrein-Blanc, 2018). La famille d'accueil est composée d'une famille et d'un assistant familial, qui est un professionnel de l'enfance, formé et diplômé qui va accueillir avec sa famille à son domicile un enfant, pendant un temps donné, qui peut être plus ou moins long en fonction des situations des enfants et des problématiques parentales. Cette situation de vie particulière, celle d'être élevé pendant plusieurs années par une autre famille que la sienne questionne ce qui se vit au quotidien, les relations et les liens affectifs développés entre l'enfant, ses parents, ses proches et la famille d'accueil. La question de la parenté est ici posée, et prend tout son sens quand on élève un enfant comme le sien alors qu'il est confié (Chapon, 2014). La notion d'inclusion se pose également, car elle permet d'appréhender l'insertion des enfants confiés au sein de la famille d'accueil, leur implication affective et plus globalement au sein de l'institution de protection.

Il convient tout d'abord de faire un détour sur la notion de parenté. L'usage du terme parenté signifie que l'enfant confié s'inscrit généalogiquement, juridiquement dans une nouvelle famille, ce qui ouvre à un élargissement des liens de filiation, d'alliance et de germanité. Or notre système actuel de parenté ne permet pas la reconnaissance des liens électifs (Siffrein-Blanc, 2009). La parenté s'inscrit soit dans la filiation biologique, soit dans la filiation adoptive en aucun cas dans une filiation élective comme on peut le retrouver dans le partage du quotidien avec le beau-parent dans les familles recomposées (Théry, Leroyer, 2014), les familles homoparentales (Cadoret, 2000) ou le couple d'accueil en famille d'accueil (Chapon, 2014, Sellenet, 2017). Nous estimons que la relation

que le couple d'accueil établit avec l'enfant confié s'inscrit dans la pratique d'une parentalité singulière (Chapon, Neyrand, Siffrein-Blanc, 2018).

L'explicitation de ce cadre est nécessaire pour éviter les glissements sémantiques de la notion de parenté à celle de parentalité dans l'analyse des interventions socio-éducatives et des instances de suppléance familiale que sont les foyers pour enfant ou les familles d'accueil (Durning 1985). Durning (1999) est le premier à analyser les dispositifs de prise en charge comme des instances de suppléance familiale. En effet, il précise qu'en protection de l'enfance, la famille d'accueil supplée la famille d'origine à un moment donné, elle ne la remplace pas, mais vient en complément des parents de l'enfant, fragilisés à un moment dans leur parcours parental. Nos travaux croisent ainsi plusieurs approches disciplinaires, celles de la suppléance (Durning 1999) et celle de la parentalité en psychologie selon Houzel (1999), en sociologie selon Théry (1998), en anthropologie selon Fine (2013), pour arriver à une conceptualisation de la notion de Parentalité d'accueil. L'article s'appuie sur plusieurs recherches: une recherche réalisée auprès de 40 assistantes familiales de l'Aide Sociale à l'Enfance (Chapon, 2014), et une recherche qui donne la parole à 25 enfants confiés, aux parents, aux assistants familiaux et à tous les enfants qui gravitent autour de l'enfant confié (Chapon, Neyrand, Siffrein-Blanc, 2018).

Une méthodologie de recherche qualitative sous la forme d'entretiens semi-directifs a été appliquée sur chaque terrain afin de donner la parole aux acteurs pour comprendre ce qui fait famille en accueil familial.

Les premiers résultats observent 4 dynamiques familiales d'accueil ou suppléances familiales qui se positionnent sur un continuum entre la substitution et la prédominance parentale. La suppléance substitutive, se caractérise par une substitution par la famille d'accueil lors de placement de longue durée; la suppléance partagée se présente comme une double affiliation, reflétant une parentalité partagée qui se construit en fonction du présent en tenant compte du passé et peut conduire à une coparentalité. La suppléance soutenante s'oriente vers un soutien à la parentalité d'origine et une intervention ponctuelle et enfin la suppléance incertaine dévoile une situation de placement en attente et un enfant isolé affectivement.

La suppléance substitutive: la substitution désigne le fait de prendre la place de l'autre parent; la famille d'accueil prend ici la place de la famille d'origine et au-delà considère l'enfant comme son propre enfant. Face à une absence de relation parentale, à une déperdition des liens, la famille d'accueil se substitue progressivement à la famille d'origine, en prenant

toute la place laissée vacante par les parents. On s'oriente alors, soit vers un placement de longue durée, soit vers une adoption.

La suppléance partagée: elle désigne des situations où les deux familles d'accueil et d'origine reconnaissent l'importance de chacun. L'enfant circule entre les deux familles, il développe des liens affectifs chez la famille d'accueil et aménage de nouveaux rapports avec sa famille d'origine. Cela implique un partage du temps, des lieux de vie, des liens et le développement d'une double appartenance familiale.

La suppléance soutenante: la famille d'accueil est ici un complément parental temporaire, elle soutient la famille d'origine qui vit et revendique sa place de parent. La suppléance soutenante se caractérise par un soutien ponctuel à la parentalité fragilisée.

La suppléance incertaine: les deux familles sont ici peu impliquées, l'enfant est sans réel appui affectif, le placement est tardif et de courte durée.

La poursuite des travaux à partir de cette grille d'analyse a permis d'affiner la notion de suppléance substitutive et les glissements possibles entre placement et adoption.



Comme nous l'avons vu la substitution peut apparaître lors des placements de longue durée, en glissant d'une mesure d'accueil à une mesure d'adoption. Cette mesure d'adoption peut être effective c'est-à-dire réalisable ou potentielle. Cette distinction entre probabilité et effectivité est essentielle, car on retrouve deux types de situation.

- Suppléance substitutive. On assiste alors au passage d'une mesure d'accueil à une mesure d'adoption, le plus souvent plénière.

- Suppléance quasi-substitutive. On reste dans une mesure d'accueil, il n'y a pas d'adoption de l'enfant confié qui reste dans sa famille d'accueil. Soit il n'y a pas reconnaissance institutionnelle et juridique de la rupture de lien d'origine, soit le délaissement parental est avéré mais le consentement à l'adoption reste en attente, car il y a un attachement

réel entre l'enfant confié et sa famille d'accueil mais sans une volonté de filiation de cette dernière.

On le voit les frontières entre les suppléances familiales sont fragiles, les limites perméables en fonction du temps et de l'histoire du placement. L'orientation donnée est relative et ponctuelle, elle ne préjuge pas d'un changement et d'une évolution possibles en fonction de facteurs spécifiques (interruption des visites parentales, ou au contraire mise en place d'un droit d'hébergement avec un retour probable de l'enfant dans sa famille d'origine, des interventions des travailleurs sociaux ...). La vie en famille d'accueil demande de l'adaptabilité, de la prise de recul, le cadre est en perpétuelle évolution. Quelles sont les ressources possibles pour l'inclusion des enfants?

3. Les ressources en famille d'accueil

3.1. La solidarité d'accueil comme expression des liens

Compte tenu de la montée de l'individualisme, on peut se demander si les formes contemporaines d'autonomisation de la vie privée favorisent une déperdition des solidarités et des transmissions familiales entre les générations (De Singly, 1993). Comment évoluent les relations intergénérationnelles et les fonctions d'aide, de soutien et de solidarité au sein des familles contemporaines? En protection de l'enfance, les familles prises en charge sont davantage exposées à une perte de repères familiaux et à une déperdition de leurs fonctions parentales (Boutanquoi, Lacharité, 2020), mais seraient-elles également davantage soumises à la perte d'un réseau de soutien familial et à une montée de l'individualisme parental?

Les formes de soutien familial évoluent en fonction de l'histoire et prennent différentes formes dans notre société contemporaine. Selon Déchaux (1994, 2007) il existe trois types d'aides familiales: l'entraide domestique, le soutien relationnel et l'aide financière.

- L'entraide domestique se résume aux activités ménagères, aux courses, à l'entretien du logement;

- Le soutien relationnel: il s'agit ici des relations, des connaissances et de la transmission des informations qui interviennent dans différents domaines de l'emploi, du logement;

- L'aide financière: il s'agit de l'argent ou des biens patrimoniaux. Dans ce cadre, les transferts financiers prennent la forme de transmis-

sion patrimoniale (héritage, donations) ou de dons dits «informels». Ces dons permettent aux enfants de pouvoir consommer autrement, de s'équiper, de se loger ou de terminer des études.

Les formes de soutien au sein de la parentèle permettent d'aider les enfants à s'insérer dans la vie et de faire face aux difficultés. Cette analyse est intéressante dans le cadre de l'accueil familial, car nombre de familles d'accueil développent ces trois rôles: de soutien domestique, de soutien relationnel et financier.

En effet, lors des différents entretiens réalisés dans le cadre de nos recherches, nous avons constaté que de nombreux assistants familiaux tout au long de la prise en charge du jeune et au-delà, soutiennent les jeunes pris en charge au moment de leur installation dans la vie d'adulte, qu'ils bénéficient d'un contrat jeune majeur ou non. De nombreux jeunes s'installent à proximité de la famille d'accueil, au moment de choisir un logement tout comme les enfants du couple d'accueil. Dans leurs travaux, Roussel et Bourguignon (1976) estiment que près des deux tiers des enfants mariés interrogés habitent à moins de 20 km de leurs parents. Ce choix des jeunes de s'installer à proximité permet davantage d'être soutenus par les parents et d'être présents à leurs côtés. On retrouve le même processus chez les jeunes confiés en famille d'accueil: un certain nombre d'entre eux s'installent à proximité de la famille d'accueil et il n'est pas rare que, dans les premiers temps de son installation, le jeune revienne les week-ends et une partie des vacances dans la famille d'accueil. On retrouve l'expression des trois formes d'aide – le soutien domestique au quotidien, le soutien relationnel face aux difficultés, mais aussi parfois le soutien financier en payant une partie de l'installation du jeune notamment ses meubles, ses fournitures...

3.2. *Kelly, un exemple d'inclusion*

Kelly a été placée à l'âge de 9 mois dans sa famille d'accueil à Marseille, elle a aujourd'hui 20 ans, elle vient d'obtenir son bac et est admise dans une école de commerce à Lille. Tout au long de son placement, elle a continué à voir ses frères et sœurs placés dans d'autres familles d'accueil, son père de temps en temps et sa mère très ponctuellement. Elle a développé des liens très forts avec sa famille d'accueil qu'elle considère comme ses parents. Le souhait de basculer vers une adoption simple a été pensé depuis des années sans pour autant se matérialiser. La famille d'origine est dans l'incapacité d'aider Kelly dans son évolution sociale et

professionnelle, du fait de ses difficultés et de sa détresse sociale, la mère est décédée il y a 2 ans, le père est marginal, sans ressource et ne voit plus ses enfants depuis de nombreuses années; Kelly n'a aucun contact avec des oncles ou tantes, et ses frères et sœurs sont eux-mêmes en pleine évolution et rattachés chacun à une famille d'accueil, donc au sein d'un autre réseau de soutien. C'est sa famille d'accueil qui continue à prendre soin d'elle malgré ses 20 ans et l'accès à l'autonomie. Elle vit à Lille une partie de son temps pour suivre ses études et revient régulièrement à Marseille dans sa famille d'accueil pour les retrouver. L'ensemble de ses affaires et sa chambre ont été conservés et elle a régulièrement au téléphone son assistante familiale qu'elle considère comme sa maman. Si le service de l'Aide sociale à l'enfance paie les études de Kelly, qu'elle bénéficie d'une chambre universitaire, d'un contrat jeune majeur, sa famille d'accueil prend en charge tout le reste: le téléphone, certains déplacements... et lui apporte un soutien psychologique et moral pour sa réussite.

On se rend compte que l'installation des enfants dans la vie d'adulte nécessite certaines qualités parentales comme la disponibilité, l'écoute, l'adaptation et une grande présence face aux difficultés que peuvent rencontrer les jeunes en fonction de leur caractère et leurs choix de vie.

On peut mesurer toute l'importance de la présence d'un réseau de sociabilité et d'entraide familiale pour les enfants confiés notamment à l'âge de la majorité au moment où les choix de vie scolaire et professionnelle sont les plus déterminants. On constate une grande inégalité dans la prise en charge des enfants, entre ceux qui ont été placés en famille d'accueil et ceux en établissement, ceux qui ont bénéficié d'un suivi dans leur placement et ceux qui ont connu un parcours de prise en charge émaillé de ruptures et de changements de dispositifs.

4. Entraide d'accueil et inégalité d'accès pour les enfants

L'accès à la majorité ne signifie pas forcément être autonome ou indépendant pour les enfants, d'autant plus pour ceux qui ont traversé une enfance difficile. Nombreux sont les jeunes qui poursuivent leurs études au-delà des 18 ans, moment d'obtention du BAC.

Pour les personnes prises en charge par la protection de l'enfance, l'accès à la majorité est une étape importante car elle est considérée comme un arrêt de leur prise en charge, celle-ci est suspendue à l'obtention possible d'un contrat jeune majeur, qui se présente sous la forme d'une aide contractuelle obtenue à la condition de prouver qu'ils ont un projet,

notamment de poursuite d'études. Cette aide sélective est régulièrement discutée sur son maintien et laissée à la discrétion des départements.

Fréchon et Marquet (2018) ont réalisé une étude auprès d'un échantillon de 1 622 jeunes placés, âgés de 17 à 20 ans. Cette étude montre toute l'urgence de maintenir le contrat jeune majeur avec une nouvelle version. Elle pointe le caractère discriminatoire du dispositif, car il laisse de côté les personnes qui n'entrent pas dans une dynamique de projet. Ainsi, la plupart considèrent le temps de la sortie de l'accueil comme une période particulièrement difficile à vivre et ils ont le sentiment d'être «lâchés» par l'institution qui devait les protéger. Car l'entourage familial constitue l'aide essentielle sur laquelle les jeunes protégés devraient pouvoir s'appuyer à la sortie du dispositif.

Or, de nombreuses études montrent que cet entourage familial essentiel à ce croisement de vie est le plus souvent affaibli voire inexistant du côté de la famille d'origine de l'enfant (Chapon, Neyrand, Siffrein-Blanc, 2018; Fréchon, Marquet 2018).

«Les liens entretenus avec les parents sont relativement rares du fait de leur absence: seuls 36% des jeunes de 17 ans ont encore leurs deux parents – pour les autres, soit les parents sont décédés, soit ils sont inconnus, soit il n'existe plus du tout de lien avec eux...» (Fréchon, Marquet, 2018, 5).

C'est donc bien ailleurs que les jeunes vont construire et puiser leurs ressources familiales au sein d'une parentèle d'accueil que sont les assistants familiaux, les éducateurs, les autres enfants confiés ou enfants de la famille d'accueil, leur petit.e ami.e sur lesquels ils peuvent s'appuyer.

Leur capacité à s'insérer au sein d'une nouvelle famille pourra leur apporter l'ancrage nécessaire pour amorcer l'entrée dans la vie adulte avec des ressources familiales d'accueil face à un entourage familial d'origine affaibli voire inexistant.

5. L'expression d'une solidarité d'accueil

Dans une société où la solidarité étatique et familiale fait défaut notamment chez les familles prises en charge par l'aide sociale à l'enfance, on constate toute la pertinence de l'analyse de Durkheim (1893) sur la solidarité comme principe organisateur de la société. En protection de l'enfance et notamment chez certaines familles d'accueil, on observe l'émergence de réponses et de soutiens apportés aux formes actuelles de la crise des liens sociaux par le développement d'une solidarité d'accueil

en réponse à la crise des institutions, à la défaillance voire parfois à l'absence des dispositifs de soutien et de protection des familles prises en charge et des enfants confiés (Chapon, 2021).

Nombre de familles d'accueil viennent suppléer les manques des politiques sociales et familiales, en apportant à certains parents et aux enfants confiés une aide et un soutien indispensables pour leur maintien dans la société et l'existence d'une certaine cohésion sociale.

Deux axes de solidarité d'accueil peuvent être repérés:

- L'un à l'égard des parents d'origine sous la forme d'un soutien parental informel,
- L'autre à l'égard des jeunes confiés notamment au moment de leur majorité et à la sortie du dispositif de prise en charge.

Le premier axe de solidarité d'accueil s'exprime sous la forme d'actions soutenant, de conseils, d'écoute voire de prise en charge ponctuelle de l'enfant à leur domicile pour soulager les parents fragilisés et fatigués pendant les moments d'exercice de leurs droits de visite et/ou d'hébergement, les week-ends, les vacances scolaires ou au moment du retour dit «définitif» au domicile parental. Ces initiatives sont d'un réel secours pour les parents pour les aider à souffler et à maintenir l'exercice de leurs fonctions parentales à leur domicile. Ce sont très souvent des parents fragilisés, des familles monoparentales, principalement des mères qui se trouvent disqualifiées dans leurs fonctions maternelles, exclues du marché du travail, et qui multiplient les facteurs d'exclusion sociale sans avoir un réel réseau social et familial d'entraide. Ce sont des mères de famille en grande souffrance, qui ont inévitablement besoin d'être accompagnées face à la multiplicité de leurs difficultés. Or, alors même que ces parents fragilisés, ces mères, devraient être les plus aidées par l'entourage et la société, on observe que la famille d'accueil est le plus souvent la seule référence de soutien social informel présente autour d'elles.

Au-delà de soutenir les parents dans l'exercice et la pratique de leur parentalité d'origine, la présence des familles d'accueil est tout aussi capitale au moment de l'accès à la majorité des enfants confiés, deuxième axe de solidarité d'accueil.

En effet, on constate que de nombreux départements se sont soit désengagés des dispositifs d'accompagnement des jeunes confiés, en arrêtant tout simplement la mise en place du contrat jeune majeur, soit ils réglementent si fortement sa mise en œuvre qu'au final peu de jeunes y accèdent. Certaines familles d'accueil prennent alors «spontanément» le relais face à une institution défaillante.

Si certains départements reconnaissent aujourd'hui l'importance d'initiatives soutenant des familles d'accueil à l'égard des parents et des enfants confiés, il n'en demeure pas moins vrai que cela reste exceptionnel, et que la règle institutionnelle établie demeure attachée à une division des rôles et des missions très réglementée, où l'assistant familial n'a pas pour fonction d'accompagner les parents dans l'exercice et la pratique de leur parentalité, rôle dévolu à l'équipe, ni de continuer à prendre officiellement en charge l'enfant affectivement, matériellement au-delà de sa prise en charge institutionnelle.

Ce positionnement institutionnel en tant qu'employeur va à l'encontre même de l'intérêt général de la société, l'institution a besoin de l'ensemble de ses membres et de ses initiatives solidaires, pour répondre à la crise du lien social.

La famille d'accueil par le développement d'une solidarité d'accueil apporte des réponses aux défaillances des liens familiaux d'origine, au désengagement de l'État et des collectivités territoriales, elles garantissent aux parents et aux enfants davantage de partage, en rétablissant une certaine cohésion familiale, une sécurisation des parcours de vie de l'enfant, en apportant aux enfants la preuve par leur immersion familiale dans une autre forme de famille, par leur intégration sociale, qu'une nouvelle solidarité familiale existe, certes différente des références classiques, mais dans ce cas précis plus structurante et enveloppante. C'est une réponse originale à la crise du lien social et de la solidarité, une nouvelle forme de solidarité et de lien d'accueil. En réponse à la crise de la solidarité, Zoll (2001) espérait l'émergence d'une solidarité pluraliste portée par un processus de mutation socioculturelle et de nouvelles institutions à partir d'expérimentations sociales qu'il conviendrait de diffuser et de rendre durables, la solidarité familiale d'accueil pourrait en être une forme pour une protection de l'enfance inclusive.

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Premature Birth and Quality of Life between Present and Future. Family Constellations and Relational Dimensions in Special Education

Gianluca Amatori¹

Abstract

Preterm birth is an event that affects about 30,000 babies a year, in Italy alone. The great advances made in neonatology (especially in recent decades) have drastically reduced the risk of mortality. The contribution intends to analyze the phenomenon of prematurity according to the parental and family dimension. Premature parents, in fact, are immersed in a situation for which they were not prepared, and which could interrupt or threaten the harmonious relationship with the newborn. In particular, the analysis will focus on the maternal and paternal pathways, in accordance with international literature. The goal is to promote interdisciplinary synergistic actions, which involve Special Education, both in direct support of families, and in the preparation of generative welfare actions as well as in the preparation of welcoming and family-centered environments within the Neonatal Intensive Care.

Keywords: preterm birth, glass parents, motherhood, fatherhood, NICU.

Abstract

Il parto pretermine è un evento che colpisce circa 30.000 bambini l'anno, solo in Italia. I grandi progressi compiuti in neonatologia (soprattutto negli ultimi decenni) hanno ridotto drasticamente il rischio di mortalità. Il contributo intende analizzare il fenomeno della prematurità secondo la dimensione genitoriale e familiare. I genitori, infatti, sono immersi in una situazione alla quale non erano preparati, e che potrebbe interrompere o minacciare il rapporto armonioso con il neonato. In particolare, l'analisi si concentrerà sui percorsi materno e paterno, in accordo con la letteratura internazionale. L'obiettivo è quello di promuovere azioni sinergiche interdisciplinari, che coinvolgano la Pedagogia Speciale, sia nel sostegno diretto alle famiglie, sia nella predisposizione di azioni di welfare generativo, nonché nella predisposizione di ambienti accoglienti e centrati sulla famiglia all'interno delle Terapie Intensive Neonatali.

Parole chiave: prematurità, genitori di vetro, maternità, paternità, Terapia Intensiva Neonatale.

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1. *Parenting and premature birth*

Although it is still difficult to explain, in terms ordinarily used in developmental psychology, how a child's genes can interact with the surrounding environment to guide its development, we can support, with some certainty, the decisive role represented by parenting on present and future well-being, especially in the first three years of a child's life. The intentionality and planning of parents represent two of the most powerful educational dimensions, which are experienced through the performance of three important duties: a reflexive one, a relay (or community) one, and an orchestration one. These duties are permeated, in a transversal way, by a protective one, which concerns the satisfaction of the child's needs, that is the ability to give love and protect him from fears (Lacharité, 2015a; 2015b; Milani, 2018).

Parents are not born, but become parents, through an evolutionary process involving major identity changes that affect the individual and the couple.

It may happen that the physiological time span of gestation, for various reasons linked to genetic, epigenetic, or environmental factors, does not reach the physiological end of 39-40 weeks, but is interrupted by the preterm birth of the baby (WHO, 2015). The prematurity of the newborn can be a critical event for development since the baby has an organism that is still suitable for uterine life and not yet ready for external life (Aite, 2017; Stefana, Lavelli, 2016). However, in addition to the baby, there is also a couple of premature parents: a father and mother who find themselves taking on their parental role before they are ready, at a delicate stage when the psychological and pedagogical processes of pregnancy have not yet been completed.

It is therefore evident that preterm birth does not constitute the direct and safe contingency for the acquisition of forms of disability or difficulty, but represents a condition of fragility that concerns, for a more or less long time, the baby born and also his/her family. The parental couple, in fact, can be strongly affected by the situation experienced by the unexpected anticipation of the birth event, with implications that may affect both perceptions about the self and one's sense of parental self-efficacy, and the relationship with the baby. We are faced with "glass parents" (Amatori, 2021), not only for the explicit reference to the machines that guard the newborn and that give continuity to the uterine environment within the Neonatal Intensive Care Unit, in addition to intervening in the first contacts, and above all for the emotional condition of the parental couple, so fragile and delicate.

In fact, glass risks being a real filter capable of conditioning the Quality of Life of all the protagonists, in the form of prejudices, fears, worries, which can last for some time, even when the pain and the worry have now been transformed into memory.

2. *Maternal constellations*

The transition to parenthood is a crucial event for the entire family unit. However, we can say with some certainty that it is particularly so for the mother. During pregnancy, in fact, the woman's body becomes a welcoming home, «a sacred space for physiological care and emotional protection» (Amatori, 2019, p. 26). While the body is engaged in the baby's "physical" gestation, a new identity is gradually built in the mother's mind, which inevitably involves two ideal images: one linked to the idea of the type of mother one wants to become, the other to the mental image of the child who will come into the world. In agreement with Stern and collaborators, we can affirm that «in a certain sense, there are three pregnancies that proceed at the same time: the physical fetus that grows in the womb, your psychic structure that is oriented towards motherhood and the imaginary child taking shape in your mind» (Stern *et al.*, 1999, p. 31).

It is Stern (1995) who defines the *maternal constellation* as the mental state of the woman who becomes a mother, which allows her to prepare herself adequately for the new role she will play. This precious passage causes the child to begin to occupy a space in the mind of the mother who already physically welcomes him through the changes in her own body. The precious time of this phase is necessary to order and manage desires, fears, and fantasies that revolve around the maternal function in the culture of our society. It is a discontinuous and unsystematic time, which is experienced in alternating phases during the long months of pregnancy.

Research in the psychological field (Stern, 1995; 1999; Brazelton, 1973) highlights a precise excursus that unites the cycle of construction of the maternal identity: from a representational void in the first weeks of gestation, we arrive at the birth of the child in the maternal psychic world starting from the third month, thanks also to the reassurances on the normal progress of pregnancy that are combined with the perception of the first movements of the fetus within itself. Between the fourth and sixth month, the mother's fantasies become more and more specific to

reach, then, the maximum elaboration between the seventh and eighth month: it is in this moment of pregnancy that the representations begin to form about the child's behavioural traits and temperament. The fantasies come to a halt with the eighth/ninth month and with the approach of childbirth: an important psychic process that facilitates the encounter with the real baby and detaches from the imaginary one, which originates in the very desire for motherhood.

The premature birth of a child interrupts the regular path described so far. The birth, in fact, takes place in a very delicate phase, in which the imaginary child is still very vivid in the mother's mind. This condition has repercussions in maternal life through a real elaboration of bereavement, in which the loss is connected to the imaginary child but also to the image of oneself as a good mother. In fact, "glass mothers" often experience a feeling of incompleteness, given by the impossibility of being able to adequately carry out a pregnancy, even if the conditions of the event are to be considered totally beyond their control.

The traumatic reality of prematurity combined with a damaged and damaging vision of the parental self - as well as of one's own child - implodes the parental function. High levels of anxiety and sadness, as well as a sense of learned helplessness, can hinder the processes of reparation and resilience.

These complex and delicate aspects can compromise the initiation of the mother-child relationship.

In particular, the experience that the mother has to face following the birth of a premature baby can be divided into three main moments.

The first is temporally placed in the moments immediately following childbirth, when the conditions of fragility and transience of the child lead the mother to an oscillating emotional experience between hope and optimism (also linked to the need to continue to hope) and feelings of guilt, fear, and anxiety. The "primary maternal preoccupation", described by Winnicott (1981) as the state of mind that allows the mother to identify with her child and to respond to her basic needs, is undermined by the sudden separation that takes place at birth when the baby needs intensive care.

The second moment, often related to the first, leads the mother to have to deal with the sense of failure for not being able to carry the pregnancy to term, a feeling that can also be generalized to the idea of not being a "good mother".

In the third phase, the increased chance of survival of the newborn and the effective possibility for the mother to play a more active role

in the care of the child, allows the re-construction of the relationship interrupted abruptly with the birth and facilitates a “rekindling” of affectivity.

To ensure the start of this last, precious phase of resilience, it is appropriate to underline the importance of hospital policies and practices, as well as the training of operators, to which, however, we will return later. Unlike what happened in the past, in fact, in which the fear of infections, as well as the delicacy of technological machinery (combined with very little attention to the preparation of health personnel on a psychopedagogical level), implied a marked separation between the newborn premature baby and his/her parents (especially the mother), care practices today take into account parental and family dynamics, embracing a holistic vision that sees, in the neonatal setting, the entire family unit as a subject of attention (Negri, 2012; Aite, 2011; 2017).

The meetings with glass mothers conducted by Candelori and collaborators (2013) have, once again, confirmed the prevailing trends in the experience of parenting after premature birth. Among these, the sense of guilt and the fear of loss which, often, intensifies when the mother is discharged and returns home without the child.

In the words of some mothers interviewed it is possible to find almost a sense of strangeness towards the child born, combined with a feeling of unreality. The dependence of the newborn on the machines and the care of the medical-health staff slows down the building of an intimate and exclusive relationship with their child, to the point that many mothers do not seem to feel completely “responsible” for their child yet, almost like if this did not belong to them and every time, they had to ask permission to be near them.

Glass mothers have often been deprived of the first “sensorial” encounter with the baby, which represents the line of continuity with that physical containment that had the baby’s first growth, made up of hugs, eye contact and the privileged and exclusive relationship between mother and child symbolised by the breast attachment, «in which all the preverbal expression of love is concentrated, which has a vital meaning for every child» (Musi, 2007, p. 192). The birth did not represent an encounter, but a separation, significantly affecting identity and parental planning. To paraphrase Winnicott (1987), the mother’s care for the baby started inside her body but did not arrive in her arms.

In conclusion, therefore, the possible negative influence on the attachment dimension between mother and child is not necessarily the event of the infant’s hospitalization in the Neonatal Intensive Care Unit

(NICU), but rather the architecture of a value and individual system that oscillates between ambivalent feelings of hope and anticipated mourning, between waiting for resignation and role anxieties. It is, therefore, appropriate to act on family cohesion, on the quality of the hospital environment and, therefore, on the implementation of pedagogical support – as well as psychological – within the wards, in order to reduce the feelings of learned helplessness and involve actively the mother in the care of the child and in the re-construction of his role identity.

3. *Where is the father?*

In situations of preterm birth, in which newborns are hospitalized in NICU, the role of the father assumes a specific relevance, because new mothers are often bedridden due to the physical conditions in which they find themselves after the childbirth. As Colombo (2011) suggests, fathers are almost always the first to be able to interact with their child, albeit through the incubator and to perform a series of specific tasks, for example: talking to neonatologists, reporting to their partners information they were able to perceive (often in a filtered way), accompanying the new mothers, once recovered, to get to know their respective children (Stefana, 2016). Therefore, there is an evident reversal of roles: while, in ordinary situations, birth brings the baby closer to the loving gaze of the mother, who can finally hold him/her in her arms, and only then to the paternal gaze, in preterm births the father suddenly finds himself filling a physical and emotional distance that separates the newborn from his mother, both in need of attention and care. According to Fava Vizziello (2010), these men, often in total loneliness, experience “stress without rest”, to alleviate – as far as possible – the situation of their partners, burdened, moreover, by work commitments from which they cannot escape.

Emotional reactions related to stress, anxiety and depression are therefore not completely uncommon in fathers, as well as in mothers. However, it is a question of «a state of emotional distress that [...] is not immediately evident because the symptomatic-logical manifestations of the fathers are different and more difficult to observe than those of the mothers» (Stefana, 2016, p. 485). Furthermore, there is still little scientific evidence regarding this question, probably because men tend to be less willing to participate in research (because they are more reluctant to disclose their emotional problems).

Further studies have shown that many fathers within the NICU do not feel free to let themselves go on an emotional level. Some fathers have expressed constant worry and an inability to relax, others also describe an effort to appear calm and show nothing on the outside, in line with the masculine ideals of independence and self-reliance (Candelori *et al.*, 2015).

Furthermore, a recent American study (Garfield *et al.*, 2017) founds that, at discharge, the cortisol levels recorded in the fathers showed that they were more stressed than the mothers, even if this emotional state was not reported in the questionnaire they had filled out on perceived stress. The fathers interviewed stated that their main role was to meet the needs and requirements of the mothers and that they did not expect mutual support from them.

The role of health professionals within NICU turns out to be rather delicate and important. It is they, in fact, who, through a semeiotic gaze (Stefana, Gamba, 2014), can grasp signs of emotional malaise and intervene to safeguard father-child and father-mother relationships.

NICU can turn out to be a privileged space for observation, since the operators have an institutional space-time setting that is particularly suitable for this purpose.

It is becoming increasingly clear, therefore, that NICU represents a context of attention to the whole family and not just to the baby. In fact, putting the family at the center of the entire care project means respecting the rights and dignity of the newborn and his/her parents but also building the basis for a healthy and harmonious growth of a new family and its individual members.

Conclusions

In conclusion, we believe it is fundamental to reiterate the perspective of Special Education within the founding dimensions of “being in the world”, especially in situations of fragility and vulnerability. «The “difference” is, in fact, an ontological attribute and an essential phenomenological datum pertaining both to the natural sphere and to the anthropological and cultural dimension» (d’Alonzo, 2019, p. 298).

Especially for what concerns preterm birth and NICU, the sharing experience can represent the central element of taking care of the fragile person (in this case, the newborn and his/her family) through processes of awareness very far from the idea of determinism and predetermination (Bocci, 2019).

The encounter between the medical, psychological, and pedagogical dimensions can make the difference (here the importance of prevention) in supporting vulnerable parents in premature births. This translates into a support towards the contingent needs of the protagonists (mothers, fathers, hospitalized child, any siblings), and the dimension of family planning, in that delicate process that connotes parenting in the transition phase from sharing as a couple to planning for the family.

Special Education has the task of supporting the planning capacity of parents towards their children in difficulty, firstly, and of the protagonists themselves, then, who, by exposing themselves to confrontation and the continuous need for reorganisation, without succumbing or giving up, will overcome disorientation through continuous and regenerated learning.

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The Development of Children Endangered by Their Own Biological Parents within the Context of Joint Custody Arrangement after Divorce

Lenka Šulová¹

Abstract

Specifics of the post-divorce adjustment of so-called “joint custody” and its benefits and disadvantages that is subject to a several years-long discussions in the whole Czech society. Joint custody can take on many forms, such as true co-ordinance of mentally mature parents who are able to cooperate in the child’s interest. However, when and how can this form of organisation become suitable for the child? In some cases, perhaps even more so at certain ages, can this form be unsuitable or even threatening to the child? This article will present several specific cases that originate from qualitative research practise-based on the author’s long-term psychological practice in this area.

Keywords: joint custody, post-divorce arrangement, pre-school age child, joint custody risks, examples from practice.

Abstract

I dati specifici relativi alla gestione del cosiddetto “affidamento congiunto” dopo il divorzio, e i suoi vantaggi e svantaggi, sono oggetto di un dibattito che dura da diversi anni in tutta la società Ceca. L’affidamento congiunto può assumere diverse forme. Può rappresentare un vero e proprio coordinamento di genitori che sono in grado di cooperare nell’interesse del bambino. Tuttavia, quando e come questa forma di organizzazione può diventare adatta al bambino? In alcuni casi, forse ancor più a certe età, questa forma può essere inadatta o addirittura minacciosa per il bambino? Questo articolo presenterà alcuni casi specifici che nascono da ricerche qualitative fondate sulla pratica psicologica a lungo termine realizzate dell’autrice.

Parole chiave: affidamento congiunto, accordo post-divorzio, bambino in età prescolare, rischi dell’affidamento congiunto, esempi dalla prassi.

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*Introduction*²

The new phenomenon named “joint custody”, which is beginning to massively appear also in Czech society, demands deeper thought by the expert public that works in the interest of the child and their healthy development. Joint custody is the tendency of parents to enforce a quasi-democratic division of parenting of the children who grew up during their marriage. Joint custody can take on many forms. It can be the true co-ordination of mentally mature adult parents who are able to cooperate in the child’s interest in a way that the child cannot tell that they are in some disagreement. Some parents are even able to take care of a very small child who is left in their own stable domestic environment and the parents take care of them according to their abilities and the child’s needs. However, this text is not about this kind of functional joint custody. Instead, the focus is on joint custody where the parents themselves are not able to come to an agreement in the interest of their child, searching for specialised help of lawyers, social workers, psychologists, teachers, experts, all of whom are supposed to help them reach an optimal system of post-divorce care over their own child.

I suppose that it is necessary to not only think about whether their parental role fulfilled in this fluid arrangement is satisfactory in consideration to the people involved in the divorce proceedings, but also about what this very artificial and unnatural “division” of the child’s time and namely the unnatural quality of their daily life brings to the affected child and what are the possible developmental risks.

1. General thoughts about joint custody as the most common post-divorce arrangement today

It is necessary to highlight in this introduction that joint custody can be perceived in various ways. First viewpoint is how it satisfies the parents in their parental roles, expectations, rights, feeling of life quality and life continuity. Then, how does it immediately affect the child’s life and what risks it can potentially bring into their future roles as a partner and parent during adulthood. Lastly, what stance does society as a whole take towards this arrangement (legislative system, social system, education system).

² This text mainly focuses on the child of pre-school age.

In the Czech Republic, especially clinical and developmental psychologists (including this paper's author) warn of the need to pay attention to joint custody as a potential development risk for children that live in it. However, their warnings are not based yet on research, but fractional examples from their practice. The possible negative influence on the child's psychological development is not obviously shown and it is very important to research internal apparitions that take place in the family system in the sensitive post-divorce situation. Hopefully for the purpose of this text we can limit to the basic presumption that post-divorce arrangement in which the child regularly switches between two homes, value systems, environments as well as two communication systems or social contexts will not provide the ideal developmental and educational environment.

Deeper analysis and methodically correct research are very rare in this area. If they do exist, only very few of them are dedicated to the child and their needs. This is understandable as it is difficult to formulate research hypotheses that would involve a topic that is hard to grasp such as the family system and additionally the joint custody phenomenon that is relatively new and specific for each family.

Research from abroad is useful to support our conclusions, but according to my judgement they cannot be applied generally as the social context of the given country (history, values, discipline principles, legislative system, economic status) that without question influence the whole process is connected to the given culture.

Right now, most of the research focused on joint custody are conducted by sociologists who mainly quantify the situation. A specific example of this is Fučík who is concerned with the stances taken towards shared custody within the frame of EVS (European Values Study). The author states that the results show there is a substantive distinction between the attitudes of men and women and the acceptance of shared custody is higher in the younger age group (Fučík, 2020).

Expert discussions of psychologists bring up more interesting stimuli that affect the real life of the people involved (therefore also children to whom this text is dedicated). During specialised forums, the following questions are addressed: is there persuasive evidence that shared parenting provides real benefit to children of Divorce? Should shared parenting be a legal presumption, and if so, what factors should make for exceptions? Should high parental conflict or one parent's opposition to shared parenting be grounds for an exception? Should parental alienation dynamics preclude shared parenting? What should happen when one parent wants to relocate? (Braver, Lamb, 2018).

The Justice Academy forum initiated a similar discussion in 2019 in the Czech Republic during which selected questions were posed and then discussed by six local experts (including also this paper's author). For example: What is the age limit from which children can be taken into joint custody care? What are the criteria for the indication of joint custody? Are there any facts why this post-divorce care arrangement should be excluded? How important is the opinion of children when deciding about joint custody? The conference was initiated by custodian judges who often confront this post-divorce arrangement and especially with the consequential quality of life of the affected children (Justice Academy, 2019). There might be more reasons in the ČR why joint custody is accepted by parents as a suitable post-divorce parental arrangement.

It can be a reaction on the previous historical development in the country. This system might seem like a democratic arrangement and so we can assume that it is a kind of social reaction to the previous favouritism of women as children's caretakers in the post-divorce arrangement.

Another significant influence could have originated from abroad, namely after the year 1989 when Czech society accepted many foreign influences and therefore also from the USA. In American society, where joint custody is present for much longer, a different legislative system is at place and American parents must have fought for joint custody not only for socio-emotional, but also economic reasons.

I often come across parents wrongly understanding expert psychological publications that emphasise that the child needs both parents. Obviously, the psychologists do not emphasise enough that the child really needs both parents, but in co-habitation, therefore the originally well-intended activation of both parents in their parental influence on the child is incorrectly interpreted into divided individual care for the child by both parents. In some cases, the parents even think that the child will not be harmed if they attend two different schools, go to two paediatricians, have two homes with two sets of the same toys.

Based on many examples seen during my practice-based researches, I know that the parents also sometimes "use" the child as a tool of putting pressure on the other partner, with whom they are in conflict even after the divorce and this parenting arrangement creates many opportunities to continue their disputes. They transfer their pain from a failed partnership into malicious social games where the child becomes a sort of messenger. During my experiences in the field, I even came across child custody becoming a kind of currency in the discussion over possessions as in the following example: "I will keep the child in your care if you give up rights to half of the house".

2. Methodological problems when researching joint custody

We are often asked what research looks like in this area of joint custody and if it is possible to find support in academic psychological research. The baseline studies and the results that also emerged from this study, make it clear that in our society this mode of childcare after divorce has not existed long enough to conduct quantitative psychological research. It is necessary to realize that many connections appear only many years later, at the time when children become parents. It is necessary to realise that many connections only appear many years later in the period when these children become parents.

Therefore, according to the practice-based research methodology (Spring, 2007), we base our statements on our experience during consulting or therapeutic psychological practice that focuses on the whole family system or on the child within the frame of the family. Our views also stem from regular contacts with social workers, special teachers and custodial judges for example during master seminars, lifetime employment sessions and also discussion forums.

It may be said that all of these named professions are in regular contact and work with children in joint custody. Many of them provide significant support to the children, especially teachers. It is also symptomatic that most research that is focussed on this problematic is realised by sociologists who are more focused on the description and quantification of this post-divorce arrangement as psychologists, and also pedagogist, are fully aware of the difficulty of understanding the topic and its complex long-term links. Pavlát, who focussed on this topic for the last few years, wrote an article that I find very successful. The author is aware of the fact that “conflicts regarding entrusting childcare brings out such an emotional engagement (namely the Father’s association and groups advocating for the interests and rights of women) that a whole line of researchers lose critical overview over the method of their work and the limited validity of their conclusions” (Pavlát, 2010).

3. What does family mean specifically for the child?

Already in the first few months of life, the family passes onto the child atmosphere, social values, norms and rules, ways of communication as well as ways of thinking and handling situations.

The influence of family shows in both verbal and non-verbal social communication; the family creates a foundation for that the child will

understand its surrounding and would be able to communicate well with others. The family also creates the foundation for game activities, learning and later work habits. The family passes onto the child spiritual values in the form of fairy tales, situations and traditions, forming their ethical and aesthetic feeling and allows them to make their own artistic creations.

I could be mistakenly assumed that the child needs for their healthy development to live in the daily company of both parents, as the parents create a complementary pair that represents both genders. Specific dynamics taking place in the family creates a completely unique environment for forming the child's stance towards the world, close social circles and then also towards themselves. Family creates value orientation and creates the basis for forming the concept and vision of one's own life and of their own "I" identity. The parents and children do not play their roles, but they live them.

The family fulfils the significant needs of the child as well as adult. The child offers the adult unconditional acceptance, uncritical love, the feeling of meaning need of a stable environment, support and help, the need for peace and relaxing, sharing experiences, shared history, shared rituals, the need for closeness, trust, social perspectives and plans as well as the need to be connected to something stable, eternal, non-reciprocal – and most of these needs are important for all age categories. The child needs to be in contact with both parents for their normal psychological development by sharing life, domestic environment and leisure time or work activities.

4. Joint custody of pre-school child and its possible risks

Let's try to mention at least a few selected areas of psychic development of the preschool child in relation to the need of the presence of both parents and the possible risks of joint custody.

The key risk of this arrangement is the disruption of stability of the family environment of the preschool child, which is one of the main providers of their activities, development of autoregulation process, development of confidence, identity and independence. It is shown in many examples that as a result, the child's self-assuredness is disrupted, having a negative effect also on the development of their cognitive structures (*memory, concentration, speech skills, learning, consequent intelligence*). (These are testimonies of the above-mentioned professions shared during case conferences and also recorded in court's files).

In relation with the motivationally free characteristic of the preschooler, it is also important to remind ourselves of their restless need to be active. This activity is expressed verbally, often in the form of a wave of questions; it is also expressed on a locomotor level – constant jumping, sitting, playing. An undeniable part of this significant need for activity and initiative is however the equally strong need for stability, environment, solidity, and safety.

The child of the pre-school age therefore needs more than ever to be in a stable environment, which gives them energy and desire to explore, be curious, to independently let go of this stability and environment. The child however needs to have “under control” this latching from stability, they must be the actor of their life. It is interesting that the child that views their environment as insecure stops to experiment, explore, and will instead fixate on the unstable relationship and their parents’ behaviour, become more closed-off and passive.

Therefore, the parents, who decide to destroy the stable domestic environment through joint custody, actively threaten not only the child’s socioemotional development, but also their cognitive maturity as the child stops to explore their surrounding environment, slowing down their cognitive development (Šulová, Zaouche Gaudron, 2016). Often there appears the efforts of one or both parents to continue their disputes through the child. The child becomes a tool of tormenting the other parent. This behaviour has long-term psychological consequences that the parents need to be informed about in great quality. I am sure that no parent would want to consciously harm their child and cause complications in their next life (mainly in their sexual, partner and parental relationships) (Šulová, Fait, Weiss, 2011).

Among other significant needs of the preschool child is the need of an emotional relationship, social contact, societal acceptance, emancipation, identity, and self-realisation. The preschool period is very important for the formation of basic emotional expressions. The emotional sensitivity of children at this age is very intense, but also short-term and ever-changing. The children begin to control their emotional expressions, they can even be critical towards themselves, judging their behaviour, they know how to pity themselves and be angry at themselves for something. They create a feeling of self that is connected to the feeling of own identity and confidence. In this age the healthy child tends to be mostly in a happy mood, gradually they lose the fear of the unknown, social emotions begin getting more important (love, hatred, sympathy, antipathy). The child can recognise their emotions towards different people and even describe them.

The relationship between mother and father, to whom the child pays much attention to, is very important in this period. It is not only the parental interactions that play a significant role in families, but also the intense whole-life bond between siblings. It is also important whether it is the case of a younger or older sibling and also what gender they are. Permanent sibling relationships should be carefully protected in the post-divorce care because children react emotionally differently to divorce and also judge differently the specific parents and their behaviour, which may cause imbalance in their sibling relationships.

It also happens that children “gain” siblings and the new family arrangement assumes that similarly aged boys will get along, play together, and want to share the same room, but this isn’t the case and similar assumptions might be also incorrect.

It was also mentioned that a significant relationship within the family for the pre-schooler is also the bond with grandparents. Grandparents provide a sort of alternative parental interactions with certain specifics. They have more time, more often they are positively set for interaction with the child, they are much more tolerant at their age towards the child’s naughtiness. They provide a kind of objective, more complex perspective. They do not hesitate to discuss certain questions with the child even for a long time and they provide the child with many alternative behaviours, allow them to consider different perspectives that may happen between the grandparents and parents. They allow them to understand the continuity of life, they allow the child to be in contact with limitations (handicaps), illness and sometimes also with death.

It is possible to say that the relationship between grandchildren and their grandparents is mutually very enriching and the parents should support it. In post-divorce situations, it does happen that the children’s contact with their grandparents are limited or complicated by the parents, which surely negatively affects their relationship and then also the psychic development of the preschool child. On the other hand, the grandparents can sometimes play an important role in understanding the grandchild’s situation and offer specific instructions how to come to terms with the situation. It is often also important that they can actively listen, play neutral or objective position or that the opinions remain the same. It seems clear, that the basics of forming interpersonal relations are passed onto the child by the family, but an equally important role is played by child company at the 3-6 age. Once again, the joint custody shouldn’t disrupt this company in the interest of the parents and often difficult logistics or parental ambitions. The child’s regular contact with

friends (not only those in the preschool institution) shouldn't be obstructed by the joint custody.

In the socialisation process changes on three key levels happen in the preschool child. Social reactivity improves and develops. This development takes place naturally from birth, but the preschool period supplies the child first relationships on several levels: with peers (older, younger, opposite sex, same sex, more skilled...), with parents, grandparents, siblings and adult strangers. It is important exactly for the range of relationships and their novelty that the child is put in an environment with stable relations. Moving in this period is viewed very negatively by the child. How does the child view regular moves from a so-called home to another so-called home? Already these small children ask themselves the question: where am I really at home? Even in this form of post-divorce care we prepare the new generation for a future where they will belong anywhere (but also nowhere) at home, which will be able to fulfil the demands of global companies, and be ready to move anywhere?

There also takes place the development of social controls or in other words the acceptance of social norms of expected behaviour. It is a gradual process, and we speak about the internalisation of social norms first in connection with reaching roughly the 3rd year of age, even though there are significant interindividual differences mainly in connection to the family environment and applied educational methods. In this area it is clearly important that the parents have time to educate their child and focus on the child's needs. In joint custody the child must identify with the values and norms of two systems that do not have to be mutually balanced. Sometimes they are in complete contrast, and it is emphasized to the child that here it won't work the same as there. This leads the child to increased empathy regarding what is expected from them in attempt to please everyone. Consequently, this social skill can develop the child's skill to become a skilful manipulator, which paradoxically is handled negatively by the parents even without them thinking twice about what caused it.

Another significant level is the adoption of social roles that take place inside the family. The child observes inside the family behaviour that belongs to certain roles that they then can replicate, train, modify even outside the family, mostly in the group of peers or various preschool institutions. In the pre-school age the child is already able to name several of their roles and this consciousness is a significant step towards process of forming their own identity ("I'm a son, grandson, pupil, friend, boy, skier..."). At this age the child is very interested in their "roots" (ques-

tions like who is their grandfather, what was he like during his youth, what kind of student their father was, how was I as a baby) and in the continuity of life (will I also be a grandfather with such white hair, will I have a baby, will I also marry...).

It is therefore very important that the child completely understands the new family situation that is connected to divorce and that they can pose questions to the parents when they do not understand something. The child often understands that similar questions are unwanted and painful, they then begin to taboo them and further worry about them internally.

The morally ethical development of the pre-schooler is connected to the development of emotions and progress in social relations. The child at this age forms first ideas of the ideal behaviour, personality. If the pre-schooler knows “what is allowed”, “what is forbidden”, “what is polite” or “what a good girl doesn’t do”, then these suggestive formulas are internalised in such a way that they do not need the direct checking from an adult, as the child is already a guide to themselves. This happens of course only in cases that they have a trustworthy adult in their family. If the child is in the start or middle of divorce battles, disputes, and even sometimes physical fights, they will stop considering their parents to be trustworthy adults. They then do not have anyone to discuss their “moral” behaviour with.

It is therefore rather punishable how the adults disappoint this illustrated or rather idealistic world vision of the children. I have in mind the sharp pre-divorce arguments or their conflictive behaviour during the consequent post-divorce care, verbal attacks, forbidding the child to speak about the absent parent, aggressive harassment, or abuse of children through manipulation. The child does not protect themselves against the even completely absurd behaviour of their beloved adults. They even often think that they themselves caused the inexplicable and bad behaviour of their beloved people – the mother and father – and are worried with guilt. In my practice I even come across parents who sometimes consciously let them feel this way or even provoke these feelings.

The role of adults for forming the child’s moral sensitivity, to create ethical principles at this age, is irreplaceable. It is important to carefully explain, lead and form them in connection to everyday activities, like knowing the difference between borrowing and stealing, maliciousness and joking, aggression and toughness. It is a period that is very critical in creating the basis of moral ethical development and it is necessary that the adults pay full attention to the preschool child as well as enough time

together. It is also an important period for the development of autoregulation when the child is learning to discover themselves, their limits, independence in activities and thought. That is why it is so important that in the case of joint custody, the parents can work together, speak about the child and in their interest, pass on information about past and future events. It is in the child's interest that the parents continue to speak to each other.

5. Examples from my own research-practice

Upon entry to the parent's house, the child must take off all clothes and leave on the threshold so that no objects touched by the other parents enters the house.

The child attends two bilingual pre-school institutions or kindergartens (Czech/English and Czech/German) because the parents did not want to agree which language is more important in the Czech Republic. The child stopped speaking any language at 4 years old.

The child has two sets of plush toys. They are very worried which beloved plush toy is the real one and which one is the copy: "What is the "real" plushie doing when I'm not with it?"

The mother does not let the father into the apartment with the words "I am scared of you." The child is then confused: why is their beloved mother scared of their beloved father?

The mother rents for the hand-over of the child a safety agency which scares the pre-school child.

The five-year-old must carry on their own all their luggage from a one-week stay at one parent to the other parent's home on the 2nd floor of an apartment building, because the mother doesn't want to meet the father in person and the child cannot take the elevator alone.

The child attends different interest activities during the week with father than during the week with the mother.

Conclusion with food for thought

Judges who allow joint custody through their decision often do not have even basic knowledge concerning children's psychological development and they therefore make their decision completely based on intuition or their own life experience. The consequences of such decisions

are not visible and immediately controllable, therefore there is no such thing as the risk of “complaint” against a bad decision.

Joint custody does not stop being an explosive topic not only between psychologists, paediatrics and special pedagogues, but also custodial judges who daily decide in divorce proceedings about the child and determine detailly the quality of the child’s life.

Psychic development of the child is so long-term and without life continuity so hard to control that, experts working for their adult clients can practically support any “desired” decisions. Experts often have different psychological specialisations than the child’s development.

The parents are not driven by “intuitive parenting” to prioritise the child’s interests, but their own, their fear of losing the child, sometimes the effort to blackmail or hurt the other partner.

The parents are probably the only ones who can look over the future of their child and the possible consequences of divorce. They know the child’s character dispositions, weak and strong points better than any expert and therefore it is necessary to appeal to them especially to be mature enough to come up themselves with a post-divorce arrangement that prioritises their child’s needs over their own.

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Early Childhood Services as Inclusive Contexts. Opportunities to Support Families

Moira Sannipoli¹

Abstract

The contribution proposes a reflection about the possible inclusive dimensions of early childhood services. Despite the lack of a clear regulatory framework in Italy, there are significant care and education practices that play a crucial role in the early years of life. Support for parenthood in acceptance of diagnosis and the activation of a teamwork with the social and territorial health services are crucial at this stage. In addition is significant to build up ordinary educational contexts that can customize the proposals in a perspective of “special normality”. The professionalism that lives in these services must be able to count on an initial and ongoing training that supports thought and reflection against possible lapses in linear thoughts, often based on normalizing cultural frames. The comments shown come from a research project conducted in the Umbria Region through a self-reflective tool called “Self Reflection Tool” developed by the European Agency for Special Educational Needs and Inclusive Education (2017), with a specific focus on family dimensions.

Keywords: inclusion, early childhood services, parenting support, possibilities, hope.

Abstract

Il contributo propone una riflessione sulle possibili dimensioni inclusive dei servizi per la prima infanzia. Nonostante la mancanza di un chiaro quadro normativo in Italia, esistono significative pratiche di cura ed educazione che svolgono un ruolo cruciale nei primi anni di vita. In questa fase sono importanti il sostegno alla genitorialità nell'accettazione della diagnosi e l'attivazione di un lavoro di équipe con i servizi sociali e sanitari territoriali. Inoltre è rilevante l'allestimento di contesti educativi ordinari, che possano personalizzare le proposte in una prospettiva di “speciale normalità”. Le professionalità che vivono in questi servizi devono poter contare su una formazione iniziale e permanente che sostenga il pensiero e la riflessione contro possibili cadute i pensieri lineari, spesso basati su cornici culturali normalizzanti. Le osservazioni riportate provengono da una ricerca condotta nella Regione Umbria attraverso uno strumento di autoriflessione denominato “Self Reflection Tool” sviluppato dall'Agenzia Europea per i Bisogni Educativi Speciali e

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l'Educazione Inclusiva (2017), con un focus specifico sulle dimensioni familiari.

Parole chiave: inclusione, servizi per la prima infanzia, sostegno alla genitorialità, possibilità, speranza.

1. *Supporting parenting in early childhood*

Childcare services represent an important developmental opportunity for all children in the motor, socio-relational, communicative-linguistic, affective-emotional and cognitive spheres (Barnett, 2011; Pianta et al., 2012). The educational experiences lived in the first six years of life participate significantly in the growth and construction of a life project that dynamically intertwines personal and social dimensions (Fortunati, 2020, p. 18).

In the multiplicity of purposes that these educational contexts pursue, there is also an explicit reference to support for parenting, both in terms of conciliation and support for the primary educational function.

In "Proposal for key principles of a Quality Framework for Early Childhood Education and Care" (Lazzari, 2016), parents are defined as the most important allies in educational intervention in the early years, but also the expression of a growing social, socio-economic, cultural and religious diversity that must be recognised and welcomed, nurturing a climate of trust and mutual respect. The approach referred to starts from the need to recognise the centrality of an ecology of development (Bronfenbrenner, 2002), but at the same time also to design interventions that enable progressive self-efficacy work, which can increase if adequately supported and increased. This is not an intervention on families (Rayna, Bouve, 2013), but a participatory construction to realise a thinking and doing together, a feeling of belonging and mutual accompaniment. In this space of proximity, parents experience meaningful relationships that are based on openness to mutual knowledge possessed, on the sharing of educational practices, on the exchange of family lexicons between adults, on learning to construct "middle ground" between different educational dilemmas (Milani, 2018).

This care among adults takes on an even stronger value when those entering the service are parents who have recently received a diagnosis for their child and who, until now, have been confronted with professional skills and worlds that are more health-related and far removed from educational frameworks. The role that educational staff can play is doubly important: on the one hand, doing everything possible so that

the child can live a serene daily life full of opportunities, and on the other hand, allowing the couple to find a space of acceptance, confrontation and hope. Trying to nurture horizons of possibility is an objective that early childhood services cannot give up and that they must learn to attend to with intentionality and constancy.

An important contribution to these issues was made by the European Agency for Special Educational Needs and Inclusive Education with its Inclusive Early Childhood Education (IECE) project, which aims to identify, analyse and promote the essential elements of inclusive early childhood education. As part of this project, a self-reflection tool called the “Self Reflection Tool” was developed that educators can use to reflect on the inclusiveness of their facility, focusing on the social context and the learning and physical environment. The self-reflection tool focuses on the proximal processes that children experience in services and pays special attention to the context factors that influence each child’s participation.

The tool was initially designed as a moment of external observation and later gained a self-reflection purpose for the teams (Soukakou, 2012).

Reflection on these issues has also grown recently in Italy.

Legislative Decree No. 65 of April 13, 2017 established the integrated education and education system, which reordered the framework nationwide. Article 1 reports how equal opportunities for education, care, relationships, and play, are guaranteed to girls and boys, from birth to six years, in order to develop potential for relationships, autonomy, creativity, and learning, in an appropriate affective, playful, and cognitive context, overcoming territorial, economic, ethnic, and cultural inequalities and barriers. It is argued that the integrated system of education and schooling from birth to six years therefore contributes to reducing cultural, social and relational disadvantages, promoting the inclusion of all girls and boys, respecting all diversities, through personalized interventions. The inclusive dimension has also been called up in the recent Pedagogical Guidelines for the “zerosei” integrated system and in the National Guidelines for Early Childhood Education Services, dismissed in December 2021.

The former document states how

the inclusion of children with disabilities or special educational needs in everyone’s school requires specific attention. First and foremost, the commitment required of these children in confronting the new context and supporting them in coping with it must be recognized, but the important enabling and

rehabilitative function of the learning and social experience carried out within the peer group and in a safe, welcoming and stimulating environment must also be valued (Ministry of Education, 2020, p. 18).

The second states the following

in nurseries, the most common organizational forms are sections, i.e., groups of children, defined numerically and often in relation to age criteria. Each section is assigned a minimum unit of educators in relation to the numerical ratio established by regional regulations, possibly enhanced to ensure inclusiveness if a girl or boy with disabilities is present (Ministry of Education, 2021, p. 45).

Beginning with the complexity of inclusive dimensions and the brevity of the writing, the paper mainly focuses on some qualitative aspects related to the family environment, with special attention to the presence of children with certification and in the process of recognition.

2. Special families: evolving experiences

The birth of a child represents a critical event within any couple's relationship that gradually discovers the meaning of parenthood. The usual modes of organisation and functioning, experienced up to that moment, are inadequate and a new adaptation must be considered. The time and outcome of this process depend on a multiplicity of factors: some socio-economic dimensions (income, education, good social integration), cognitive (good perception and acceptance of the child), relational (cohesion and solidity of the couple, adaptability, problem solving skills, social support network). The literature reports that, today more than ever, especially in Western contexts, children are the result of an intentional choice, desired when one has the perception of being ready to accept this challenge (Gauchet, 2010; Iori, Riva, Augelli, 2020). Whereas before a child was a gift of nature, a fairly unconscious fruit of life, now it is the result of an expressed will, of a defined project. All this also applies to those parents who at some point receive a diagnostic communication that immediately appears as an unexpected destination.

There are in fact disabling conditions that are easily recognised through specific screening and parents are informed of them before birth or in the very first months of life.

In addition, in fact, to possible examinations that may have been activated during gestation, there are neonatal screening programmes that aim to diagnose congenital diseases at an early stage for which specific therapeutic interventions are available, which, if undertaken before the manifestation of symptoms, can significantly improve the prognosis and quality of life of the youngest children. Added to this are all the pathways that are activated on the basis of referrals from parents by their own decision or by suggestion and indication from other educational figures.

The emotional experiences, which this news entails, are often compared in literature to a real mourning: the child dreamt of, imagined, expected, does not exist, was never born.

In reality, even in this case, the reactions may be different and even complementary: they may depend on the psychological characteristics of each of the spouses and other family members, the relational dynamics between them and any other children, the economic possibilities, the characteristics of the social fabric, the presence of a network of efficient and effective operators and services. There may be disorientation and disappointment, longer and more difficult adjustment and reorganisation times, greater burdensome developmental tasks due to the numerous clinical assessments, difficulties in the path of acceptance, fears and bargaining on the part of the couple, also relating to the choice of having other children.

The communication of the diagnosis is a fundamental step that remains impressed as a memory not only for the emotional impact it provokes, but also because it profoundly marks the construction of imaginaries with respect to one's own and one's child's life project (Caldin, Serra, 2012, p. 29).

The task performed by the medical team is complex, comparable to «being able to immerse oneself in a story of illness, creating an “intimate” relationship exactly as happens in the interpretation of a poem or a novel» (Zannini, 2008, p. 62). It is not a question of asking for an empathic attitude, humanly complex to live, but of attempting to interweave relational skills that hold together active listening, a careful use of words and non-verbal communication; a way of being in the relationship close to what Bachtin calls *exotopia* (1997).

In empathy, in fact, the practitioner isolates and decontextualises certain features of the other's experience in order to understand it according to his own experience, thus keeping his own context valid. He somehow simulates “put-

ting himself in the other's shoes", but in reality, at the last moment, he "puts the other in his own shoes". In exotopia, on the other hand, the search begins when, having tried to put oneself in the other's shoes, one realises that they do not fit. But in order to realise this, one must "expose oneself", [...] activate a reflexive attitude with respect to one's own professional epistemology and one's own implicit knowledge, which powerfully determines care practices (Depalmas, Alodola, 2013, p. 24).

In these situations, however, one has to reckon with the irruption of the world of health and rehabilitation, with technical and specific languages, with the possibility of oscillating between the resignation of being a "sick family" and the hope of being a "healthy family" anyway.

Very often mechanisms are activated, especially in the maternal figure who cancels her identity as a woman, companion, friend, worker in order to fix her project only on that child: it is an attempt to even the score between guilt and merit, between condemnation or absolution, to forgive herself and become acceptable (Basset, 2007).

The rehabilitation paths, which are activated immediately after diagnosis, should be as participatory as possible so that there can also be a growth in parental skills, in learning to formulate requests for help that are less confusing and more respectful of that child's identity.

In reality, this is a goal still only partially achieved for a few reasons: it is not easy to overcome the pyramidal mentality typical of hospital institutions, the bureaucratic mentality that tends to categorize, the difficulties for operators due to their daily relationship with suffering, and training that is often lacking on the human level because it is still very much focused on the acquisition of techniques (Kanizsa, Dosso, 2006, p. 7).

3. Possible supports in early childhood services

Enrolling a child with disabilities in a 0-3 service is then much more than an educational choice: it means trying to come out of hiding, to expose oneself and one's child to the common world, to the risk of stumbling into the gazes and judgments of others; to imagine that it will be possible to live also from ordinariness and everyday life beyond the therapy courses.

Early childhood services within these dynamics assume a daily take-over of the family: the initial interview is certainly one of the most important moments of the relationship. Within this dialogue, mediators may

also emerge who play a fundamental role in the transitions between home and school (Bulgarelli, 2018). The quality of support is also played out at the moment of welcome in the morning and at the moment of dismissal on leaving. In these spaces there is the possibility of receiving, containing and sharing emotional experiences and narratives first from the parental unit and then from the educational staff: these are precious moments capable of jointly modelling practices and building resilience skills.

In other cases, the first difficulties may manifest themselves during the first experiences in educational services and pre-schools. In the heterochrony of each development, there may be different times and spaces of manifestation that may sometimes need environmental adjustments, which call into question care practices rather than rehabilitative and therapeutic interventions on the children themselves. In these situations, the early childhood services must activate a real educational direction that contemplates a series of actions that must be managed with attention, competence and kindness (Amadori, Maggiolini, 2021).

First and foremost, before communicating any difficulties, the educational staff must have activated various individualisation and personalisation strategies to allow the child genuine activity and participation. In addition to detailed and careful observation, in different contexts and situations and well documented over time, it is necessary to verify that multiple actions of involvement, motivation, expression have been introduced. An inclusive professional experiments with different strategies, self-reflectively questions his or her own actions, contexts, timing and language, assesses whether significant support is needed from the adults of reference, who may also need support in their parental task alone.

If this type of preliminary work is taken care of carefully, the resulting educational responsibility implies a different type of communication with the family.

In these circumstances, in addition to a constant exercise of listening, it is right that the educational staff should keep to their task and not risk a slide into languages and categories of thought that belong to other knowledge, including medical knowledge. It is therefore not up to educators and teachers to hypothesise possible diagnostic categories, lightly and incompetently, but to try to describe as best they can, as also suggested by the International Classification of Functioning, Disability and Health (ICF), the identity and functioning of that child, paying attention to the developmental possibilities and difficulties, obstacles and environmental and personal facilitations from a biopsychosocial perspective (OMS, 2001).

This communication, even if well argued and accompanied by a meaningful relational dimension, may provoke different reactions in the receiving parental couple: the resulting suffering is not always able to be channelled into correct behaviour. Reactions of rejection, denial, avoidance may occur. A competent educational direction takes up this moment of disillusionment, welcomes it, does not judge it, is present with care and attention, with hope and trust: it tries together with the couple to imagine possible life stories that come to terms with the children's abilities. In the time of waiting for a diagnosis, however, other slips are possible: one may in fact think that the lack of a definition can justify careless, unspecialised action and the risk is to suspend, more or less consciously, educational intervention. One may in fact, under false good intentions, wait for the medical world, after the identification of the deficit, to give the coordinates for intervention. In the process of assessment and certification, the first relations with the social and health services involved in diagnosis and care are activated. It is possible that childcare services are considered by other professionals only as a space for care and socialisation. In these circumstances, educators are called upon to bear witness to their educational value by bringing rich and varied forms of documentation as professional evidence. These writings make it possible to draw up profiles of the children, as rich and detailed narratives both of the characteristics of the youngest children and of the interventions implemented, with more or less success (Sannipoli, 2022).

In the forums of confrontation, educators must also bring the right questions, without falling into the request for paths and instruments of action, but for a greater knowledge of the deficit dimensions, of the criteria and devices that have guided the diagnosis, of the possible areas of contamination between rehabilitation and educational intervention.

The services for early childhood within these dynamics assume a daily taking charge of the family, an attempt to stand by and restore value and validity. The quality of support is played out precisely in certain privileged moments of daily relations. Two routines, not always valued as they deserve to be, thus become central: the moment of welcome in the morning and that of leave-taking on leaving. In these spaces there is the possibility of receiving, containing and sharing emotional experiences and narratives on the part first of the parental unit and then of the educational staff: these are occasions for transition and communication which, if adequately accompanied, can become precious moments capable of jointly modelling practices. It may happen, and this must be taken into account, that parents do not immediately attach value to these

occasions and are inclined to experience them with haste: it is the task of the educational staff to make this attention grow, to allow them to experience their potential. The logic of remaining on the “threshold”, physically but also metaphorically, is in fact a critical element that can over time degenerate into misunderstandings, especially if one does not have the words to say what one thinks and feels.

Childcare services also offer opportunities for socialisation and exchange, especially in the organisation of peer moments. In addition to the social management, which is in any case a time of sharing, it is possible to find other spaces of being together to share experiences and experiences, supported by educators and pedagogical coordinators, with the aim not only of exchanging care practices, but also the fatigue and pleasure of being a parent. In these sought-after places, the framework that most enhances the words and silences of each and every one is the narrative one, which allows the stories to be presented in their meaning and also allows a dialogue between the many ways of expressing parental care and imagining childhood, disability and one’s own life project.

4. Conclusions: feeding hope, a goal in early childhood

Early childhood services are called upon to become spaces of hope. The word hope is often confused and does not receive the right attention.

Parents who encounter the despair of a diagnostic communication have a right to hope, not understood therefore as mere consolation, indefinite and generic trusting expectation, but as the capacity to perceive themselves as competent with regard to what is possible (Scardicchio, 2021). Within this dimension there is both the functioning of one’s own child, beyond the deficit, but also with respect to one’s own caring duties, to being a good father and mother. The “not yet” on which hope is nourished is not repetition of the present, but expectation of an authentic and therefore unprecedented future, made of changes that are both sustainable and revolutionary (Poli, 2017).

How can an educational service cultivate hope, imagination and aspiration? Educators and teachers have several opportunities that must not be wasted. First of all, the need to systematically and competently exercise reflective practice, especially observation and writing. Learning to document the footsteps of these children, sometimes small, imperceptible, unexpected, is essential: keeping memory of these traces and socialising these discoveries with the parents first and then with the social

and health services and any other educational agencies, means beginning to recognise a life project and naming it. Particularly with the parents, the value of daily exchanges must be strongly recovered: reception and reunion are moments for the construction of a direction of shared practices that evolve imaginaries and allow the socialisation of mediations experienced with more or less success. Another important opportunity is to learn to dialogue collegially with other professionals, bringing all the specificity of the pedagogical culture. Not everything depends on the children and their conditions: there may be contextual factors that, in different ways, hinder the well-being and quality of being in the world, or others that instead favour its expression. The everyday life of the services offers a lens that should not be underestimated, especially as a living environment, in its complexity of ecologies, relationships, and common living spaces (Ianes, 2006).

It may happen that this construction of spaces of hope encounters difficulties, resistance on the part of both parents and educational personnel. In the former case, it is not always the case that the pedagogical horizon is immediately picked up as significant for a variety of reasons: the communication of the diagnosis may be difficult to metabolise, the world of educational services may still have the image of being only welfare, the dream of a sort of “cure” or “normalisation” distances one from the small achievements always seen as of little value. Educators can also fall into despair: it may not be easy to recognise the possibilities of the youngest, to get in tune, to manage and feel adequate with respect to behaviour that is difficult to frame, to resist the temptation of reparation. In some circumstances, it may also happen that the educational personnel have to present emerging difficulties which, if not adequately communicated and supported by open descriptive accounts, weaken or deconstruct the ties with the families.

It is in these situations, however, that educational competence is authentically measured, in those tiring contexts where the ability to build relationships, negotiate, contain, tune and reclaim requires a direction capable of unlearning what one knows and learning from those one encounters.

Being a helping relationship, renouncing to know everything and putting up against contradictions, disorientations, perturbations, means nurturing hope: willing to lose in presumption and control, ready to gain in error, unpredictability, imagination (Caldin, 2017).

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Il profilo dell'insegnante specializzato. Quali variabili nei saperi e nelle prassi di inclusione ed equità?

Anna Pileri¹

Abstract

L'inclusione scolastica, sin dai suoi esordi, apre alla questione complessa, non scevra di controversie, dell'insegnante per il sostegno didattico, definito specializzato se in possesso di formazione specifica. Si tratta di una professione che, ancora oggi, risulta insidiata da rappresentazioni, opinioni, percezioni, posture dicotomiche fra insegnanti curricolari e specializzati, da resistenze culturali e da nodi di criticità nella co-costruzione di alleanze con le famiglie e il territorio e fra docenti. Aspetti che incidono, inevitabilmente, sui saperi e sulle pratiche di inclusione e di equità, sulla gestione integrata del gruppo classe e, non secondariamente, sul coinvolgimento delle famiglie nel progetto di vita dei loro figli. Questi elementi peculiari saranno discussi alla luce dell'analisi di alcuni risultati relativi a un progetto di ricerca² che coinvolge insegnanti specializzati durante la formazione universitaria e dopo la presa di servizio a scuola.

Parole chiave: insegnante specializzato, inclusione, equità, rappresentazioni, saperi e pratiche.

Abstract

School inclusion in Italy, since its beginnings, opens up the complex issue, not without controversy, of teacher for educational support, defined as specialised if in possession of specific training. It is a profession that, even today, is compromised by representations, opinions, perceptions, and dichotomous postures among curricular and specialised teachers, by cultural resistance and by critical nodes in the co-construction of alliances with families and the territory and among teachers. Aspects that inevitably affect the knowledge and practices of inclusion and equity, the integrated management of the

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² La ricerca-formazione è condotta dall'autrice dell'articolo con la supervisione scientifica di Roberto Dainese, Professore ordinario di Didattica e pedagogia speciale e Direttore del Corso di specializzazione per le attività di sostegno didattico agli alunni e alle alunne con disabilità presso il Dipartimento di Scienze dell'Educazione "Giovanni Maria Bertin" dell'Università di Bologna (*laddove non diversamente specificato, d'ora in avanti le note a piè di pagina si intendono a cura dell'Autrice, N.d.R.*).

class group and, not secondarily, the involvement of families in their children's life project. These peculiar elements will be discussed by analysing some of the results of a research-training project involving specialised teachers during their university training and after taking up their posts at school.

Keywords: specialised teacher, inclusion, equity, representations, knowledge and practices.

1. I principi ispiratori della ricerca: inclusione ed equità

Un solido sistema scolastico è considerato l'asse portante di un Paese e l'insegnante è uno degli elementi perno attorno al quale ruota l'intero sistema e la qualità che lo caratterizza (Oyewumi, Ibitoye, Sanni, 2012, cfr. in particolare la p. 95) e che dovrebbe garantire, in sinergia con gli altri attori del contesto, i principi di inclusione e di equità in termini di democrazia e di giustizia scolastica. Il successo di qualsiasi sistema scolastico dipende dalle competenze degli insegnanti, quali figure indispensabili che costituiscono una forza importante nello sviluppo di una società equa e inclusiva. La qualità delle competenze, a sua volta, dipende da alcuni fattori che connotano la professionalità dell'insegnante, in primis la formazione, insieme a ulteriori variabili che occorre considerare e che richiedono azioni di ricerca mirate, a cui intendiamo contribuire anche nell'intento di rilevare indicatori di rischio.

La nostra attenzione è rivolta all'insegnante specializzato per il sostegno didattico agli alunni e alle alunne con disabilità, al suo ruolo chiave nel promuovere e garantire l'accessibilità a una didattica di qualità realmente per tutti e, non da ultimo, nel fungere da ponte rilevante nella co-costruzione di alleanze verticali, ovvero con il team docenti-dirigenti-amministrativi ecc., e orizzontali, cioè con la famiglia e le risorse territoriali (Caldin, Pileri, 2021). Tali affermazioni non solo trovano il consenso di molteplici figure impegnate, a vario titolo, nei processi menzionati, ma inducono alla necessità di comprendere quali variabili possono favorire o limitare l'efficacia di un ruolo professionale così cruciale per la riuscita scolastica e il progetto di vita degli alunni e delle alunne con disabilità. I termini inclusione ed equità, collettori teorici ispiratori di questa ricerca, appaiono per la prima volta nella Dichiarazione di Salamanca del 1994, in cui si sostiene che «l'inclusione e la partecipazione sono essenziali per la dignità umana e per il godimento e l'esercizio dei diritti umani. Nel campo della formazione, questo si riflette nello sviluppo di strategie che cercano di realizzare una vera e propria equalizzazione di opportunità»

(UNESCO, 1994, p. 11). Dagli anni Novanta ad oggi, dunque, le agende internazionali (UN, 2015; UNESCO, 1990, 2000, 2008, 2016) sono impegnate in progettualità ambiziose e finalizzate a contrastare forme di insuccesso scolastico legate ad analfabetismo, abbandono ecc. (Benvenuto, 2022), con l'obiettivo di un'educazione per tutti: «assicurare un'educazione di qualità, equa e inclusiva e promuovere opportunità di apprendimento permanente per tutti» (UN, 2015, p. 17)³, che si basa «sul riconoscimento dell'istruzione come diritto umano fondamentale e come bene pubblico, di cui lo Stato è il principale responsabile» (Locatelli, 2021, p. 178).

L'inclusione e l'equità scolastica, nonostante i progressi fatti sul piano nazionale e internazionale, restano ancora obiettivi sfidanti e complessi da raggiungere nei saperi e nelle prassi, poiché l'esclusione può assumere molteplici forme che risultano più sottili, spesso implicite, ma non meno insidiose. Si tratta di micro-esclusioni (Ferri, 2018), come la frequenza prevalente dell'alunno/a con disabilità in un'aula fuori dalla classe, la non partecipazione ad alcune attività, situazioni che palesano un'appartenenza scolastica decisamente incompleta (D'Alessio, 2012) e, dunque, non equa, né tantomeno inclusiva.

Risulta dunque imprescindibile considerare la stretta relazione e i conseguenti effetti che ogni azione rivolta al singolo ha o potrebbe avere sull'intero contesto (Caldin, 2020). Anche il modello concettuale bio-psico-sociale introdotto dalla *International Classification of Functioning, Disability and Health*⁴ (ICF) (WHO, 2001) incoraggia a “muoversi” attraverso una prospettiva che, analizzando vari fattori, faccia emergere dall'opacità elementi che possono ostacolare questa prospettiva, delineando nuove sfide da affrontare, anche in merito agli insegnanti specializzati quali promotori dell'inclusione formativa e sociale (Mulé, 2016). Tale prospettiva richiede un impegno costante per riconoscere e contrastare le variabili che possono minacciare l'assunzione e lo sviluppo di saperi e pratiche didattiche che dovrebbero continuare a ispirare la professionalità degli insegnanti, poiché, in linea con il pensiero di Ferri, «a prescindere da quanta strada possiamo aver fatto finora in termini di progressi, dobbiamo continuamente rinnovare il nostro impegno nell'inclusione, contrastando le esclusioni che possono rispuntare come erbacce in un giardino» (2018, p. 17).

³ La traduzione italiana è a cura dell'Autrice, N.d.R.

⁴ *Classificazione Internazionale del Funzionamento, della Disabilità e della Salute.*

2. *L'evoluzione pedagogico-normativa: gli insegnanti di sostegno nella scuola per tutti*

Per comprendere il profilo attuale dell'insegnante specializzato, e i conseguenti intrecci sul piano dell'inclusione scolastica degli alunni e delle alunne con disabilità e dei loro genitori, occorre compiere un balzo storico nel passato, ripercorrendo alcune tappe normative che hanno portato all'ingresso dell'insegnante per il sostegno nelle classi ordinarie, il cui esordio coincide con il processo di democratizzazione del sistema di integrazione scolastica avviato in Italia grazie alla Legge n. 517 del 1977. Una normativa innovativa, che ha consentito a tutti gli alunni e le alunne con disabilità il diritto di accesso al primo ciclo di istruzione e posto le basi per definire il ruolo e le competenze dell'insegnante per il sostegno, ponendo fine all'esperienza ghezzante delle classi differenziali e suscitando, ancora oggi, una vivace attenzione internazionale verso una legge che, a quarant'anni dalla sua nascita, continua a essere di grande attualità, nonché di riferimento per molti Paesi che si sono a essa ispirati. Si tratta di un iter politico, normativo e culturale non scevro di complessità, che ha richiesto tempi di attuazione non scontati anche a fronte di un contesto non ancora pronto a cogliere tale innovazione (Pavone, 2017), seppur sostenuto da un quadro culturale fortemente ispirato ai principi della Pedagogia speciale che, a tutt'oggi, continua a interrogarsi e a non dare mai nulla per assunto, impegnandosi a sollecitare e a garantire i processi di inclusione scolastica e sociale conquistati per gli alunni e le alunne con disabilità. Questo impegno si forgia di una spinta pedagogica che cerca di assumere, ancora oggi, nella formazione degli insegnanti, il principio irrinunciabile dell'educabilità (Itard, 1802) per abbattere le forme di esclusione e dis-equità, allontanare i rischi di emarginazione, considerando tutte le persone e le loro possibilità, anche le più compromesse sul piano delle funzionalità, «(...) intervenendo dapprima sui contesti e poi sull'individuo e trasformando la risposta specialistica in ordinaria e creando presupposti non solo di inclusione del singolo, ma di realizzazione di uno stato sociale che includa tutti membri della comunità» (Dainese, 2016, p. 25) attraverso una scuola realmente pensata per tutti e per tutte (Canevaro, D'Alonzo, Ianes, Caldin, 2011). Attualmente, la Legge n. 517 coesiste con ulteriori normative e decreti ministeriali nati in risposta a istanze successive, alla luce dei cambiamenti socio-culturali e scientifici nazionali e internazionali. Essi sono stati particolarmente ispirati dalla Convenzione di Salamanca e, in seguito, dal paradigma concettuale bio-psico-sociale, che ha profonda-

mente innovato aspetti relativi al piano educativo individualizzato e alla relativa prospettiva di inclusione, spostando l'asse progettuale sul contesto, senza perdere di vista la centralità dei bisogni legati alla diagnosi, ma evidenziando la necessità di azioni pensate e realizzate in un'ottica di sistema e non solo a beneficio degli alunni e delle alunne con disabilità, ma dell'intera classe.

Fin dal suo ingresso nelle classi ordinarie, l'insegnante per il sostegno ha iniziato a confrontarsi con aspetti di complessità non ancora risolti, primo fra tutti la definizione dei compiti e la gestione di ambiguità legate alla gestione del gruppo classe. La Circolare Ministeriale n. 199/1979 specificava che i compiti dell'insegnante specializzato non devono essere «interpretati in modo riduttivo e cioè in sottordine all'insegnante di classe», ma al contrario «l'insegnante di sostegno deve quindi essere pienamente coinvolto nella programmazione educativa e partecipare a pari titolo alla elaborazione ed alla verifica delle attività» (1979, p. 1). Sono questi i compiti ancora oggi attuali a cui non rinunciamo!

Successivi decreti e innovazioni pedagogico-didattiche sono stati apportati alla formazione dei docenti – come il Decreto Ministeriale n. 249/2020⁵ –, compresa la formazione per gli insegnanti impegnati nelle attività per il sostegno didattico agli alunni e alle alunne con disabilità. Questo cambiamento risponde, da un lato, all'esigenza di una formazione specifica per questo ruolo professionale e, dall'altro, a una richiesta urgente da parte delle scuole a livello nazionale, nelle quali si registra che più di un insegnante per il sostegno su tre non ha la specializzazione (ISTAT, 2022).

La formazione è attualmente erogata dalle Università italiane attraverso corsi di specializzazione di durata annuale, sui quali l'approccio condiviso a livello nazionale – dalla Società Italiana di Pedagogia Speciale e dal Ministero dell'Istruzione e della Ricerca –, converge sulla rilevanza di una specializzazione universitaria, affinché l'insegnante di sostegno possa diventare una figura professionale a tutti gli effetti. Ianes (2004), a

⁵ Il Decreto Ministeriale n. 249 del 10 settembre 2020 ha istituito e dato avvio ai Corsi di specializzazione per il sostegno in Italia, sede nella quale il profilo del docente viene formato in una prospettiva inclusiva, seguendo l'approccio ICF (WHO, 2001) e in linea con il Decreto del 30 settembre 2011, che indica le conoscenze e le competenze attese dopo il Corso e che attengono a molteplici dimensioni psico-pedagogiche e didattiche tese a un approccio interdisciplinare, che comprende conoscenze teoriche e operative nella gestione educativo-didattica degli alunni e delle alunne con disabilità, ivi comprese competenze nelle tecnologie dell'informazione e della comunicazione.

questo proposito, ci esorta a ricordare che un insegnante specializzato è, prima di tutto, un insegnante. Un'affermazione non banale che

[...] deve essere ricordata e mai dimenticata – poiché, come sottolinea l'autore (*N.d.A.*) – troppo spesso vediamo ancora l'insegnante di sostegno relegato a ruoli di assistente, di pietismo materno, o di strumento di espulsione dell'alunno con disabilità dalle normali attività scolastiche, con una certa complicità degli insegnanti curricolari, che lo considerano un insegnante delegato all'alunno con disabilità, cioè un insegnante di seconda categoria. L'insegnante di sostegno, invece, è un insegnante di prima fascia, che condivide con tutti i colleghi compiti e responsabilità professionali per l'intera classe (*Ivi*, p. 589).

Si tratta quindi di un profilo ancora in divenire, che richiede impegni di ricerca costanti, finalizzati a leggere i bisogni formativi e professionali che cambiano nel tempo, anche alla luce di nuovi scenari (pensiamo alla recente emergenza pandemica) e che richiedono risposte efficaci in grado di comprendere gli aspetti che possono limitarne la piena realizzazione.

3. Lenti teoriche di riferimento alla ricerca: la scuola come micro-contesto sociale

I processi di inclusione ed equità a scuola non riguardano esclusivamente la progettazione didattica rispondente ai differenti funzionamenti degli alunni e delle alunne (Baldacci, 2006; Cottini, 2018; Pavone, 2014), ma richiamano, inesorabilmente, ulteriori aspetti che incidono sui saperi e sulle pratiche dei docenti e che risultano essere correlati alle loro percezioni e rappresentazioni (Canevaro, D'Alonzo, Ianes, Caldin, 2011) che, a loro volta, incidono sugli atteggiamenti relativi alla disabilità (Ianes, Demo, Zambotti, 2010). D'altro canto, la scuola è a tutti gli effetti un micro-contesto sociale (Ligorio, Pontecorvo, 2010) nel quale «si generano incontri/scontri tra sistemi di credenze e modelli culturali della diversità» (Vadalà, 2018, pp. 72-73) i cui modelli culturali si influenzano reciprocamente. Occorre comprenderne i significati per attivare e accompagnare riflessività che siano generative di consapevolezza e foriere di cambiamenti.

Alcune ricerche hanno particolarmente contribuito a far emergere come le rappresentazioni culturali degli insegnanti siano fortemente condizionate dal senso comune ed evidenziano come la disabilità sia diffusamente percepita come stereotipata (Fiorucci, 2018; Ramel, 2014) o

come condizione che può generare paura (Disanto, 2015). Altri studi sottolineano la presenza di atteggiamenti di ritrosia e senso di inadeguatezza nell'incontro con la disabilità complessa (Ryan, 2009), mentre risultano atteggiamenti più assertivi e propositivi rispetto a deficit lievi (Cassady, 2011).

Oltre agli aspetti fino a ora analizzati, non possiamo trascurare che anche l'esperienza di contatto e il relativo vissuto con le persone con disabilità costituiscono una variabile importante nel determinare un atteggiamento maggiormente positivo e di apertura, in particolare nei riguardi della disabilità complessa o della pluridisabilità. Le rappresentazioni e le esperienze degli insegnanti, i loro atteggiamenti e le loro opinioni, quindi, sembrano influenzare le modalità di approccio nei confronti degli alunni e delle alunne con disabilità (Avramidis, Norwich, 2002), ma anche il lavoro in team e la relazione con i genitori.

Altra variabile, non trascurabile, riguarda l'uso di alcuni termini relativi alla disabilità, riconducibili a visioni classificatorie legate soprattutto al linguaggio clinico (Morvan, 1988) e che risultano ancora diffusi in ambito scolastico. La comprensione di tali aspetti risulta dunque imprescindibile se intendiamo rimuovere ostacoli culturali e relazionali che tendono a relegare la disabilità all'interno di categorie stereotipate e marginalizzanti (Canevaro, 1999), che sappiamo essere l'humus più fertile per la formazione dei pregiudizi (Mazzara, 1997). Variabili che possono, quindi, minacciare la prospettiva di inclusione ed equità a cui vogliamo tendere e che l'insegnante specializzato dovrebbe assumere durante la formazione e garantire una volta in servizio.

Nel paragrafo seguente, discuteremo ed esamineremo i risultati di un recente studio che coinvolge un numero significativo di insegnanti specializzati/e.

4. Il disegno di ricerca: l'oggetto, le ragioni motrici, il campione, la metodologia e i metodi

In linea di continuità con gli studi analizzati nel paragrafo teorico, la presente ricerca intende rilevare e analizzare le variabili d'inclusione ed equità nei saperi e nelle pratiche degli insegnanti specializzati sia durante la formazione, sia una volta entrati in servizio.

L'intento prioritario è cogliere aspetti che possono risultare favorevoli o, al contrario, costituire un ostacolo nel percorso formativo e professionale, consapevoli che tali prospettive/competenze acquisite possono

logorarsi o indebolirsi anche nell'incontro/scontro con stili e approcci educativo-didattici differenti e non immuni dal perpetuarsi di rappresentazioni e stereotipi riferiti non solo alla disabilità, ma agli insegnanti per il sostegno che, ancora oggi, purtroppo, sono considerati di mero riferimento agli alunni e alle alunne con disabilità e non per il sostegno didattico all'intera classe (Pileri, Dainese, 2023).

Di qui le ragioni dell'assunzione di un impegno pedagogico, politico e sociale attraverso una ricerca che possa contribuire alla "coscientizzazione" (Freire, 1979, *passim*) circa lo stato dell'arte relativo a questo profilo professionale, a partire dalla lettura dei bisogni a esso connessi sul piano formativo e professionale, che non può prescindere dall'individuazione di nodi di criticità che possono incidere su tale figura professionale. Una ricerca che ha lo scopo di individuare prospettive che possano contribuire a valorizzare e a qualificare il profilo dell'insegnante specializzato anche sul piano delle *policy making*. Questa la cornice in cui si colloca la spinta motrice di alcune domande generative che hanno accompagnato questo processo investigativo: il Corso modifica le rappresentazioni di inclusione e di equità degli specializzandi? Quali aspetti possono migliorare l'iter formativo? Quale sarà l'impatto della formazione una volta in servizio? Quali aspetti del contesto incideranno sulle competenze acquisite? Interrogativi che sono risultati essenziali per delineare la partitura-disegno di ricerca quale nucleo generativo di una fase che Demetrio definisce di «una formulazione (ancora una volta una rappresentazione) provvisoria che si arricchisce, e definisce, nel corso della ricerca [...]» (Demetrio, 1992, p.126).

Alla luce delle ragioni pedagogiche premesse, e sotto l'impulso di costanti interrogativi, la ricerca assume il paradigma della ricerca-formazione⁶, una metodologia del fare ricerca orientata alla trasformazione dei saperi, delle prassi educative e didattiche e alla promozione della riflessività (Vannini, 2020). Si privilegia un approccio *mixed method* (Creswell, 2003; Silverman, 2004, trad. it. 2008), che coniuga, appunto, matrici di analisi quali-quantitativi e diversi metodi di rilevazione (questionari⁷ e

⁶ Per approfondimenti sul modello di ricerca-formazione sviluppato dal CRESPI, il Centro Interuniversitario di Ricerca Educativa Sulla Professionalità dell'Insegnante, diretto dalla Prof.ssa Ira Vannini, si consulti <https://site.unibo.it/crespi/it> (data di ultima consultazione: 19.03.23).

⁷ I questionari sono stati somministrati a 307 corsisti/e in differenti fasi: prima e dopo il corso. Sono in fase di analisi i questionari somministrati a febbraio 2023, dopo sei mesi dalla presa di servizio.

*focus group*⁸). Si ritiene che le due tipologie possano correlarsi – ad approcci *bottom-up* e *top-down* – comprendendo la possibilità di integrarle e rendendo più “completa” e meno “sogettiva” l’analisi del corpus dei dati. L’uso integrato di differenti dispositivi, pensati e ri-pensati alla luce di quanto premesso, è risultato essenziale per annoverare in profondità la natura delle rappresentazioni, dei saperi e delle prassi didattiche riferite all’inclusione e all’equità. I questionari sono stati indispensabili per entrare in contatto con il campo d’indagine, acquisire informazioni sul campione coinvolto, monitorare e valutare il processo di cambiamento dopo il corso. I *focus group*, invece, hanno fatto emergere ulteriori ipotesi, permettendo di definire con più chiarezza l’oggetto d’indagine, approfondendo l’analisi delle categorie e dei temi ricorrenti rilevati anche nei questionari. Il corpus dei dati raccolti tramite questo metodo attivo e attivante, inoltre, ha consentito un’analisi e una concettualizzazione più completa e generativa, portando in superficie ulteriori variabili che risultano particolarmente incisive sia nel processo di comprensione dei dati, sia nell’individuazione e rilancio di possibili azioni trasformative.

5. *Analisi e discussione di alcuni primi risultati: temi e core categories ricorrenti*

Di seguito, riportiamo l’analisi quali-quantitativa⁹ dei primi due *step* di ricerca realizzati attraverso la somministrazione online di questionari e la realizzazione di *focus group*¹⁰. Come annunciato, il *corpus* dei dati comprende 307 corsisti e corsiste coinvolti/e sia durante il Corso di specializzazione¹¹, sia dopo alcuni mesi dalla presa di servizio a scuola, fase di monitoraggio attualmente in corso di rilevazione. La ricerca è iniziata nell’A.A. 2021-2022 e continuerà sino a giugno 2024.

⁸ Sono stati realizzati 22 *focus group* (112 partecipanti su 307).

⁹ L’analisi è stata realizzata tramite ATLAS T9 e seguendo l’approccio di analisi tematica in linea con il paradigma elaborato da Braun e Clarke (2012; 2019).

¹⁰ I due strumenti di rilevazione sono stati caratterizzati da alcune domande analoghe insieme ad altre di approfondimento (*focus group*) o ricognitive dal punto di vista quantitativo (questionario), a seconda della tipologia e delle possibilità relative allo specifico dispositivo impiegato.

¹¹ Sesta Edizione del Corso di specializzazione per le attività di sostegno didattico agli alunni e alle alunne con disabilità, presso il Dipartimento di Scienze dell’Educazione dell’Università di Bologna, diretta da Roberto Dainese.

5.1. *Primo step di ricerca: i corsisti prima del Corso*

La cartella dati del questionario, somministrato prima dell'avvio della formazione, fotografa un campione costituito per la maggior parte da corsiste (86%), la cui età media è fra i 30-50 anni. A eccezione di una corsista che segnala di essere nata all'estero, l'intero campione si è definito di cittadinanza italiana e senza background migratorio. Anche se la maggioranza risiede nella Regione Emilia-Romagna, è interessante sottolineare che il 53% proviene anche da altre province e Regioni. Interessante è notare che il 90% dei rispondenti (inclusi i/le residenti a Bologna) afferma di aver scelto il Corso seguendo il criterio della qualità e non della vicinanza. Il 18% dei corsisti è in possesso di specializzazione per un ordine scolastico differente, il 9% è in possesso di un Master e il 6,67% di un dottorato non di ambito pedagogico, mentre un 20% possiede una Laurea magistrale non attinente. Il 75% lavora a tempo determinato come insegnante di sostegno, la maggior parte ha da tre a sei anni di servizio e il 65% ha un contratto full time. Solo il 20% lavora a tempo indeterminato, ma non come insegnante (l'8% lavora in una scuola di grado differente rispetto a quello del Corso di specializzazione frequentato e il 12% come educatore/educatrice socio-culturale). Il 70,33% afferma di aver scelto di specializzarsi per la necessità di formarsi in questo ruolo professionale, mentre il 30% dichiara di averlo fatto per avere più chance di stabilizzazione professionale.

Emergono alcune interessanti correlazioni relativamente alla presenza di maggiori consapevolezze in coloro che hanno avuto esperienza con la disabilità a scuola (75%), ma anche la presenza di maggiori incertezze e timori. Tali aspetti ci hanno portati a formulare alcune ipotesi (le quali hanno trovato conferma nei *focus group*) circa la presenza di difficoltà legate sia allo svolgimento di un lavoro complesso, privi del supporto di una formazione adeguata, sia a esperienze avvenute in contesti scolastici il cui impatto è risultato frenante e non evolutivo, lasciando un vissuto tutt'altro che positivo.

I dati raccolti/prodotti prima della formazione confermano la presenza di rappresentazioni e stereotipi che richiedono azioni decostruttive da attivare durante il Corso e da consolidare anche in seguito. Si riscontra un significativo uso dei termini non certamente in linea con la prospettiva inclusiva e che sappiamo possono influenzare drasticamente non solo la didattica, ma la percezione stessa della disabilità e gli atteggiamenti di apertura/chiusura nelle interazioni con gli alunni con deficit (Avramidis, Bayliss, Burden, 2000).

Ci riferiamo ai seguenti termini: alunni con *handicap* (28%), disabili (40%), diversamente abili (60%), stranieri disabili (83,32%). Altri termini utilizzati, seppur in percentuale minore, ma non per questo meno incisivi, sono i seguenti: alunni autistici, alunni NAI, alunni H, casi ecc. Si rileva una significativa tendenza ad associare e categorizzare il termine disabilità con i seguenti aggettivi: problema, grave, disagio, fragile, vulnerabile, con limiti.

Ci preme, inoltre, segnalare alcuni temi/*core-categories* emersi sia nei questionari (nelle risposte aperte), sia nei *focus group* relativamente a domande riferite ai saperi e alle pratiche di inclusione e di equità rappresentate, immaginate o percepite.

Il tema "esclusione" è indicato dal 65% dei corsisti relativamente alla gestione dell'alunno fuori dalla classe, il 40% degli intervistati non pare contrario, ma riflette circa un uso mirato di uno spazio alternativo affinché divenga risorsa per tutti. Si riscontra il massimo grado di accordo circa il fatto che non deve divenire uno spazio prevalente per l'alunno/a con disabilità e, quindi, escludente dal resto della classe.

Anche il tema "incertezza" non passa inosservato, l'83% dei corsisti si percepisce incerto nelle competenze relative alla gestione della disabilità complessa, nella redazione e co-gestione del piano educativo individualizzato, nonché, nella relazione con i colleghi curricolari e i genitori. Un'ulteriore *core-categorie* (evidenziata dal 94% del campione) attiene al "timore" di sbagliare, di non comprendere l'alunno/a con disabilità. Inoltre, riteniamo particolarmente importante condividere questo ulteriore risultato: l'89% si percepisce in "ansia" nella gestione della disabilità complessa, in particolare se il deficit è di tipo intellettuale e se alla disabilità si aggiunge la dimensione della migrazione, situazione in cui risulta più significativo anche il timore della gestione del Piano Educativo Individualizzato (PEI) e della relazione con le famiglie. In proposito, il 90% dei rispondenti afferma che il PEI, spesso, non è tradotto in altre lingue, complicando il processo di coinvolgimento dei genitori nel progetto di inclusione del/la proprio/a figlio/a e la conseguente riuscita.

I dati rilevati prima della formazione confermano la presenza di rappresentazioni e stereotipi da parte dei docenti, che richiedono azioni di decostruzione da attivare durante il Corso di specializzazione e da consolidare successivamente. Interessante è notare che i dati sopraindicati includono anche i corsisti con esperienza a scuola e che relativamente al tema ansia e incertezza non si rilevano differenze significative fra chi ha lavorato come insegnante curricolare, per il sostegno o in qualità di educatore/educatrice a scuola. Ipotizziamo che la presenza di queste varia-

bili sia collegata alla consapevolezza di aver svolto esperienze educativo-didattiche in assenza di strumenti adeguati ad affrontarle efficacemente.

5.2. Secondo step di ricerca: i corsisti e le corsiste dopo il Corso

Presentiamo una parziale e preliminare analisi integrata dei dati che riteniamo più rilevanti, al fine di comprendere l'impatto della formazione dopo il Corso. Il *corpus* è stato rilevato con gli stessi dispositivi impiegati nello *step* di ricerca precedente, caratterizzati dalle medesime domande, insieme all'integrazione di alcune inedite, considerando i peculiari obiettivi di questa successiva fase: la fine del Corso e il conseguimento della specializzazione.

Questo *step* di ricerca evidenzia un impatto rilevante del Corso sul piano del cambiamento/trasformazione delle rappresentazioni, dei saperi e delle prassi in prospettiva equa e inclusiva. La maggior parte degli specializzati, nel questionario (97%) e nei *focus group* (100%), afferma che la partecipazione al corso di specializzazione ha cambiato significativamente il modo di percepire e di interagire con la disabilità, il proprio punto di vista, le rappresentazioni sull'inclusione e sull'equità, anche in riferimento alle famiglie e al valore del lavoro in *team* e, non da ultimo, è cambiato il linguaggio, divenuto più attento nell'uso di termini più in linea con il paradigma inclusivo.

Per entrare nel vivo di quanto enunciato, riportiamo la voce dei protagonisti attraverso alcuni estratti dei *focus group*:

Il modo in cui guardo lo studente con disabilità è completamente cambiato dopo il corso, penso meno alla categoria e vedo P. nel suo insieme e non solo la sua diagnosi (Ins. 3, 2022).

Devo ammettere che prima del corso percepivo con più difficoltà alcuni tipi di disabilità, ammetto che non sempre vedevo le possibilità e parlando con i miei compagni di corso so che questo è successo anche a chi ha esperienza sul sostegno come me (Ins. 10, 2022).

Prima mi sentivo molto in difficoltà, in ansia ancora prima di incontrare lo studente per il quale avevo avuto l'incarico. Ora è diverso, mi sento profondamente cambiata e voglio tenermi stretta questa conquista (Ins. 41, 2022).

Sento che è cambiato il mio atteggiamento con i genitori, prima li percepivo come invadenti, disinteressati o assenti, cioè li etichettavo, mi sentivo molto in

difficoltà con i genitori migranti più per una questione di ignoranza culturale, ora cerco di capire prima di giudicare (Ins 12, 2022).

Faccio molta attenzione alle parole che uso e a quelle che sento usare, il corso ha modificato completamente il mio linguaggio (Ins. 51, 2022).

Frequentando il corso, sono più consapevole del valore del lavoro di squadra e cerco tutte le strategie possibili per condividere il piano educativo individualizzato del bambino certificato e non accetto più di lavorare da sola (Ins. 7, 2022).

Accanto alle numerose affermazioni relative alla percezione di aver acquisito maggiori consapevolezze e fiducia (92%) nei saperi e nelle competenze didattiche inclusive, è interessante notare una diffusa preoccupazione relativa all'impatto con il contesto e ai possibili ostacoli che incontreranno una volta in servizio a scuola da specializzati. Emerge, inoltre, la necessità di essere accompagnati in questa fase, in cui la formazione acquisita deve interagire con le particolarità dei contesti scolastici percepiti o immaginati:

Sono preoccupata quando prenderò servizio a settembre: cosa si aspetteranno i miei colleghi da me ora che sono una specializzata? Voglio essere anzitutto un'insegnante considerata contitolare e non più di serie B (Ins. 1, 2022).

Penso che la parte più dura sarà quando entreremo in servizio da specializzati, la sento come una sorta di messa alla prova di quanto abbiamo appreso nel corso...come lo definisce pure Dainese? Ah si! La macchina infernale del corso di sostegno...dopo il corso saremo senza di voi e ci confronteremo con la vera macchina infernale...la scuola non è sempre inclusiva... (Ins. 64, 2022).

Quando sarò in servizio come specializzato, se mi verrà chiesto di lasciare la classe, mi rifiuterò, sarà difficile, ma penso di avere gli strumenti per oppormi, sarà dura, ma non mollo (Ins. 6, 2022)!

Spero che sia possibile contattarvi quando avremo finito il corso, perché avremo domande, dubbi e potremo incontrare ostacoli (Ins. 8, 2022).

Mi preoccupa come sarò percepito da specializzato dai colleghi e dal dirigente...eh... prima ho lavorato come insegnante di sostegno, ma ero diverso, insicuro nelle scelte, non riesco ad oppormi quando mi invitavano ad uscire dalla classe (Ins. 22, 2022).

Brevi conclusioni

I temi ricorrenti e le relative declinazioni di significato a cui si riferiscono hanno evidenziato una questione a nostro parere fondamentale: un numero significativo di corsisti e corsiste in servizio a scuola prima del Corso (75%) si percepivano inadeguati, in ansia nella gestione del PEI, manchevoli di strumenti per affrontare disabilità complesse, a disagio nell'incontro con alcune tipologie di deficit (in linea con gli studi di Avramidis, Bayliss, Burden, 2000; Cassady, 2011) in difficoltà con le famiglie, in particolare se migranti (aspetto già emerso in uno studio precedente di Pileri e Friso, 2019). In proposito, ci preme sottolineare che la fiducia nelle proprie competenze didattiche sia una variabile fondamentale per la riuscita scolastica (Ross-Hill, 2009) e per i processi di inclusione auspicati. Inoltre, molteplici testimonianze raccolte durante i *focus group*, palesano un vissuto di lavoro svolto prevalentemente in solitudine, poiché non sempre condiviso con i colleghi curricolari e spesso vissuto fuori dalla classe.

Sono aspetti preoccupanti che richiedono risposte urgenti, e non solo attraverso l'apporto dei Corsi di specializzazione, ma promuovendo azioni formative da realizzare nei contesti scolastici nei quali sono molteplici gli insegnanti non specializzati co-responsabili dei Piani Educativi Individualizzati.

La comparazione di quanto emerso dai dati rilevati nei primi due *step* di ricerca (prima e dopo la formazione) evidenzia un impatto rilevante del Corso sul piano del cambiamento delle rappresentazioni, della percezione di autoefficacia, dei saperi e delle prassi in un'ottica inclusiva, accanto a una diffusa preoccupazione relativa alla possibilità di "perdere" quanto acquisito e di entrare in conflitto con saperi e prassi differenti che potrebbero incontrare nei contesti.

I risultati descritti esortano a "non concludere", a proseguire attraverso una terza fase di ricerca che abbiamo avviato dopo sei mesi dalla presa di servizio dei/lle neo specializzati/e (febbraio 2023). Lo scopo è poter comprendere l'impatto dei saperi e delle prassi acquisite con il contesto e la loro conseguente "tenuta", individuando quali variabili possono limitarli o favorirli. Una fase a cui teniamo particolarmente perché consente non solo la possibilità di monitorare e valutare cosa avviene durante e dopo la formazione, ma anche di poter rispondere all'esigenza di essere accompagnati sul piano formativo/trasformativo anche dopo il Corso di specializzazione, nella fase che riteniamo più delicata e non sufficientemente esplorata sul piano della ricerca.

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Les parents et les notes scolaires. Une recherche herméneutique des perceptions des enseignants

Antigoni-Alba Papakonstantinou¹

Résumé

La présente étude tente à comprendre l'importance que les parents des élèves du secondaire attribuent aux notes scolaires, d'après les perceptions des enseignants. La technique de focus groups a été choisie et 20 enseignants du secondaire ont participé à des entretiens de groupe. Conformément aux enseignants participants les parents d'élèves du secondaire paraissent s'intéresser plus aux notes qu'aux connaissances que leurs enfants acquièrent à l'école. D'après les enseignants, les notes pour les parents sont la preuve des progrès de leurs enfants ainsi que reconnaissance de leur effort personnel à soutenir la trajectoire scolaire de leurs enfants.

Mots clés: notes scolaires; accompagnement parental aux devoirs scolaires; parents des élèves en secondaire; perceptions des enseignants; relations parents-enseignants.

Abstract

Questo studio tenta di capire l'importanza attribuita ai voti scolastici dai genitori di studenti di scuola secondaria, sulla base delle percezioni degli insegnanti. È stata scelta la tecnica del focus group con la partecipazione alle interviste di gruppo di venti insegnanti di scuola secondaria. Secondo gli insegnanti intervistati, i genitori degli studenti della scuola secondaria sembrano essere più interessati ai voti ottenuti che alle conoscenze acquisite a scuola. A parere degli insegnanti questo interesse si spiega sia come prova dei progressi dei loro figli, sia come realizzazione del loro sforzo di genitori nel sostegno della traiettoria educativa dei loro figli.

Parole chiave: voti scolastici; supporto dei genitori per i compiti a casa; genitori di studenti della scuola secondaria; percezione degli insegnanti; relazioni genitori-insegnanti.

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1. *Introduction*

La recherche concernant les rapports des parents à l'école s'avère riche et extensive, s'étendant de la modélisation des comportements parentaux face à l'école (Epstein, 1995; Hoover-Dempsey, Sandler, 1995) jusque à leur interprétation sur la base de facteurs multiples et complexes. Avant de procéder, deux remarques doivent être faites. La première est liée au fait que la grande majorité des recherches se réfèrent à l'école primaire (Dubet, Martuccelli, 1996; Gayet, 1999). Soit parce que l'organisation et la structure de l'éducation secondaire est plus complexe, soit parce que l'école primaire est considérée comme le niveau le plus primordial de l'éducation des enfants, toujours adressée et accueillante la grande masse des enfants de tous milieux sociaux, soit parce que l'âge des élèves en secondaire et l'adolescence les éloigne de la famille et des normes parentales, la recherche (des rapports parentaux au collège ou au lycée) reste limitée (Costa, Faria, 2017; Papakonstantinou, 2022).

La deuxième remarque concerne le fait que la performance scolaire et les notes scolaires des élèves paraissent assez négligées par la recherche consacrée à l'accompagnement parental de la scolarité (Delès, 2020). La fréquence et la qualité des relations, l'objectifs des visites à l'école, le contenu des discussions avec les enseignants ou même les aspirations parentales constituent des sujets qui sont passés au microscope de la recherche des rapports parents-école, tandis que le soutien pratique qui se réalise à la maison et se concentre surtout sur l'aide que les parents donnent à leurs enfants semble inaperçu ou indétecté.

Or, la performance scolaire de l'enfant s'avère un facteur décisif et en même temps explicatif des rapports des parents à l'école (Fan, 2001; Kiprianos, Papakonstantinou, 2011). L'implication parentale se diversifie conformément à la performance scolaire des enfants. Les parents des élèves en réussite se rendent à l'école plus souvent que ceux dont les enfants se trouvent en échec scolaire. En même temps, l'accompagnement parental systématique et le suivi actif de la scolarité se lient avec la meilleure adaptation de l'enfant à l'école et l'amélioration de sa performance scolaire (Otani, 2019; Wilder, 2014). L'implication parentale et la performance scolaire des élèves semblent donc rentrer dans un cercle vicieux. Les parents des élèves en réussite se rendent plus souvent à l'école que ceux dont les enfants connaissent un échec scolaire. Mais, si les derniers entretenaient des rapports plus fréquents avec l'école et plus sincères avec les enseignants, leurs enfants pourraient avoir une meilleure performance scolaire et par conséquent eux ils

aimeraient visiter plus souvent l'école et ils souhaiteraient plus s'occuper du suivi scolaire de leur enfant.

Dans tous les cas la distribution des notes constitue une raison, une excuse de contact entre l'école et la famille. Les parents sont invités à venir à l'école, ils sont encouragés à discuter avec les enseignants et ils sont censés à comprendre par ces rencontres, pas seulement quelle est la performance de leur enfant aux différentes matières, mais aussi quel est son niveau de connaissances acquis et si possible quel pourrait être son futur parcours scolaire. Car, les notes scolaires ne reflètent pas seulement la performance de l'élève, mais également son effort, son investissement personnel, son adaptation aux exigences, sa façon d'être et d'agir. Effectivement, on n'aurait pas tort de soutenir que les notes scolaires fonctionnent comme un prisme double, reflétant d'un côté l'investissement familial à l'éducation de l'enfant et projetant de l'autre côté son avenir éducatif, son futur professionnel et le statut social qu'il pourrait atteindre.

Partant de l'acceptation que tous les parents s'intéressent à la scolarité de leurs enfants (Papakonstantinou, 2013) et que les notes sont un indicateur essentiel de réussite ou d'échec scolaire, on pourrait aisément conclure que les parents d'élèves attribuent une certaine importance aux notes scolaires de leurs enfants. De plus, comme le souligne Dubet (2019) les parents d'aujourd'hui connaissent que leur capital culturel ne suffit pas pour garantir la réussite ou l'échec scolaire. Pour que les enfants obtiennent des bonnes notes, la cellule familiale, et notamment les parents, doivent agir, s'impliquer, investir, soutenir, se mobiliser face à la scolarité. Ainsi, la présente recherche vise à décrire les attitudes parentales envers la notation et à étudier l'importance que les parents des élèves du secondaire attribuent aux notes scolaires d'après les perceptions des enseignants. Trois questions de recherche étaient posées:

- Par quels événements les enseignants comprennent l'intérêt parental pour les notes scolaires ?
- Comment les enseignants expliquent l'importance qu'attribuent les parents aux notes scolaires ?
- Quelles sont les conséquences de l'investissement parental aux notes scolaires selon les enseignants ?

2. Méthodologie

Afin de répondre à nos questions de recherche nous avons opté pour une approche qualitative (Maxwell, 1999; Pourtois, Desmet, 2007).

Nous avons implémenté un échantillonnage de faisabilité (Bryman, 2017), partiellement imposé par la technique de collecte des données qui était les *focus groups* (Kamberelis, Dimitriadis, 2013). Cette technique a été choisie car elle permet l'interaction des participants et l'échange des opinions sur un sujet spécifique et donne la possibilité au chercheur, en biais des arguments, du récit des expériences et des négociations implicites des participants, de comprendre les perceptions partagées et d'approcher la vérité dans toutes ses dimensions.

L'échantillon était constitué de 20 enseignants travaillant aux collèges et aux lycées publics de l'agglomération d'Athènes et de la ville de Ioannina et donc entrant en contact avec des familles provenant de différents milieux socioéconomiques. Pour la réalisation des entretiens, ils étaient divisés en cinq groupes sur la base de leur spécialisation et des matières qu'ils enseignaient. Chaque entretien a duré environ deux heures et demie et tous les entretiens se sont réalisés en personne sur une période d'un mois. Pour l'analyse des données recueillies on a réalisé une analyse de contenu de type thématique (Bryman, 2017; Maxwell, 1999).

3. Résultats

L'analyse des entretiens a offert des résultats intéressants et riches, dont la présentation détaillée et analytique ne pourrait pas se réaliser juste dans quelques pages. Nous essayerons donc d'exposer les aspects les plus indicatifs des perceptions des enseignants participants concernant l'importance que les parents attribuent aux notes scolaires et de mettre en évidence les explications qu'ils donnent à leur effort d'interpréter les comportements et les attitudes parentaux envers la notation scolaire. Le premier sujet traité pendant les entretiens collectifs concernait les comportements parentaux qui révèlent, selon les enseignants, l'intérêt des parents pour les notes scolaires. Les expériences des enseignants se ressemblent et se focalisent sur le fait que la grande majorité des parents ne viennent à l'école que pour chercher les notes, ou, encore pire que pour se plaindre par rapport aux notes de leurs enfants.

Les parents en général s'en foutent de l'éducation de leurs enfants et ils ne viennent pas nous rencontrer. Ceux qui s'intéressent de la scolarité, s'intéressent uniquement aux notes.

Les parents ont des attentes spécifiques. Des plans même spécifiques. Et pour accomplir leurs plans ils ont besoin de notes spécifiques. Donc, soit ils les exigent, soit ils supplient, soit ils développent des stratégies pour s'en sortir. Eux! Pas leurs enfants. [...] A certains collègues les parents vont juste pour se plaindre. Pour négocier une meilleure note.

Par ailleurs, les enseignants de notre recherche sont convaincus que les parents s'intéressent plus aux notes, qu'aux connaissances recueillies par leurs enfants. Il leur paraît que les parents de leurs élèves développent des attitudes clientélistes et utilitaristes envers l'école exigeant qu'elle se rende pratiquement utile pour le futur de leurs enfants. Cette logique familiale soutient et renforce également, selon toujours, nos participants l'interventionnisme parental, lequel parfois dévient insupportable.

Spécialement pendant la période où pour rentrer à l'université on avait besoin des notes scolaires la situation était insupportable, affreuse ! Les parents nous exigeaient des pressions immenses. Ils exigeaient des bonnes notes. Ici, à cette école, la pression concernait l'avancement à la prochaine classe. Mais à d'autres écoles les collègues souffrent. On en discutait et je le connais et on le connaît tous d'ailleurs. Il s'agit d'une incroyable chasse des notes ! C'est un enfer ! Si les mères le pouvaient, elles passeraient elles-mêmes les examens !

De plus, nos participants affirment que les parents paraissent préférer une bonne note qui n'est pas révélatrice du vrai niveau de l'élève, qu'une moyenne ou mauvaise note, laquelle reflète les connaissances que l'élève a acquises. Leur perception est formée par les rencontres, les discussions et les questions directes des parents, qui n'hésitent pas à exiger la bonne note en admettant mêmes parfois qu'elle n'est pas en accord avec la performance scolaire, les aptitudes ou l'effort de leur enfant.

Quand tu vois une classe où tous les élèves sont excellents tu comprends qu'il y a quelque chose qui cloche. Mais les parents veulent voir ça. Ils le souhaitent, ils le demandent. Ils croient peut-être qu'une partie de cette excellence peut être vraie. Parce que sans doute ils savent que leur enfant vaut moins.

Il n'y a pas que les parents des élèves moyen ou bons. Les parents des élèves faibles, eux aussi focalisent aux notes scolaires. Ils viennent et nous demandent d'aider l'enfant à passer la classe. Pour qu'il rate pas l'année. Dans ce cas, ils ne sont pas intéressés aux connaissances que leur enfant a acquises, ni s'il a appris comment il doit étudier et organiser son travail. L'essentiel est de passer la classe. Et comment il réussira ? Par la note qu'on va lui donner, pas par son progrès ou son effort.

Par la suite, on a essayé de saisir les explications que nos participants offrent concernant le grand intérêt parental aux notes scolaires. La plupart considère que les parents d'élèves souhaitent que leurs enfants aient des bonnes notes pour des raisons à la fois pratiques, psychologiques et sociales. Plus précisément, les enseignants soulignent que la bonne performance à l'école est pour les parents une garantie du futur professionnel de leurs enfants et une promesse que leur enfant pourra continuer ses études à l'université. Or, les notes ont un poids spécial sur la conscience parentale, puisque les parents n'en voient pas seulement une preuve du progrès éducatif de leur enfant, mais également une preuve qu'ils ont réussi en tant que parents. La vérification qu'ils ont bien incarné leur rôle parental, qu'ils ont proprement soutenu la scolarité de leur enfant et que la famille qu'ils ont créée a atteint son objectif passe par les notes et le succès scolaire de l'enfant. Un nombre important de participants reconnaissent également une dimension sociale à l'intérêt parental pour les notes. Comme ils l'affirment, pour les parents de ces élèves ce qui compte le plus est l'image sociale de leur famille, l'idée que les autres se font d'eux en tant que parents, le témoignage externe de leur enfant et par conséquent d'eux-mêmes. Alors, dans cet effort de garder la face, comme le dirait Goffman (1974), les notes scolaires paraissent comme un élément essentiel d'importance majeure.

Les notes sont importantes pour eux (les parents). C'est leur image de soi? C'est leur propre ambition? Ils comparent les enfants entre eux. Ils pensent que si leur enfant a de meilleures notes qu'un autre enfant, celui de leurs amis par exemple, ça veut dire qu'ils se sont comportés mieux que les autres parents. Qu'ils ont réussi à leur rôle.

Ils souhaitent de bonnes notes parce que c'est un sujet de statut. De leur propre statut. Puisqu'il s'agit, à mon école, des familles qui appartiennent à des couches sociales aisées, les bonnes notes contribuent aussi à la construction, à la création de leur image sociale. Ils arrivent pas à accepter que leur enfant ne sera pas comme eux, qu'il n'aura pas le même trajectoire qu'ils ont eue.

Évidemment les enseignants se sont référés aux réactions parentales quand leurs enfants reçoivent des notes dites mauvaises; des notes qui ne répondent pas à leurs attentes ou des notes qu'ils jugent comme pas représentatives des capacités; des efforts et de la performance de leurs enfants; des notes qui ne reflètent pas leur propre investissement à la scolarité de leur enfant. Leur discours révèle que concernant certaines matières les parents cherchent à comprendre pourquoi la note n'est pas

celle qu'ils attendaient. Ces matières sont surtout les matières importantes pour les examens d'entrée à l'université ou les matières pesant plus dans leur conscience, comme les mathématiques, la langue grecque, le grec ancien, la physique. En ce qui concerne les autres cours, d'importance inférieure dans leurs logiques, ils sont agressifs et exigeants envers les enseignants, se comportant comme si la bonne note était un droit de leur enfant. Dans un grand nombre de cas, les parents n'hésitent pas à comparer l'évaluation que leurs enfants ont reçue par leur tuteur privé avec celle de l'enseignant de l'école.

Au début ils cherchent à comprendre pourquoi leur enfant n'a pas eu la note qu'ils attendaient. Si l'explication offerte par nous, par l'école, par leur enfant n'est pas convaincante, ils cherchent à accuser l'enseignant. [...] Parfois je pense qu'ils croient que leurs enfants ont droit aux bonnes notes. Et le pire est qu'ils font plus confiance aux enseignants de cours privé qu'à nous. Et ils le disent!

Ils viennent et ils me disent: «En décembre, grâce aux cours privés qu'il suit, il a eu son diplôme d'anglais. Comment ça se fait qu'il n'a pas eu 20/20 à votre cours?». La plupart des parents quand j'explique que l'enfant n'investit pas, qu'il ne participe pas au cours, etc. se convainquent. Mais pas tous. Il y en a certains qui reviennent avec des intentions pas amicales et essaient de nous causer de problèmes.

Les mauvaises notes sont pour les parents d'élèves une frustration, mais plus que ça une déception. S'identifiant à leur enfant, mais pas capables de changer la situation eux-mêmes, souvent se rendent à l'école déçus et désespérés demandant de l'aide aux enseignants. Bien évidemment, ce comportement parental a des conséquences non seulement sur les rapports parents-enseignants, mais aussi sur l'évaluation et la notation des élèves.

Cet investissement parental aux notes, cette obsession j'ose dire, nous influence tous. Quand je vois la mère qui vient, qui discute avec moi, qui me dit que son enfant aime mon cours, qui me demande des conseils, que je vois qu'elle essaye soutenir et aider son enfant, bref, tout ça ne me laisse pas indifférente. [...] Quand c'est l'heure de mettre la note je mets plus. Pas pour l'élève, pour sa maman. Je l'admets!

Finalement, selon les enseignants participants, la chasse aux notes des parents augmente l'interventionnisme parental à la vie scolaire et au travail de l'enseignant. Plus précisément, l'obsession à la notation

scolaire conduit les parents à des comportements intrusifs, qui se manifestent par des visites fréquentes à l'école, par des questions de contrôle auprès des enseignants ou par des gestes visant à influencer positivement les enseignants en faveur de leurs enfants. De plus, le phénomène de «cours particuliers soutenant la scolarité» s'aggrave, en mettant en péril la mission même de l'éducation secondaire.

Les conséquences sont plusieurs. On ne peut pas travailler tranquillement. Ils viennent tout le temps à l'école pour exiger des meilleures notes. On gaspille plus de temps à donner des explications aux parents concernant les notes, qu'à se préparer pour notre cours.

Cette chasse de notes est mauvaise pour tous. Pour les élèves en premier temps, pour nous après et pour les parents finalement. Comme les parents ne veulent pas accepter la vraie valeur de leur enfant, ils exagèrent, ils créent des problèmes à leurs enfants, ils causent de problèmes à nous et à l'école, ils payent pour des cours privés sans fin en fatiguant leur enfant, etc. Et tout ça pourquoi ? Pour que l'enfant ait 20/20 au lieu de 17/20. C'est triste.

4. *Discussion*

La présentation de résultats, réalisée auparavant, offre une idée des points-clés de la présente recherche, qui a tenté de saisir les perceptions des enseignants concernant l'intérêt et l'investissement parental aux notes scolaires. Les discours des participants se sont avérés détaillés et leurs conversations ciblées, dévoilant des aspects inaperçus jusqu'aujourd'hui du phénomène étudié. Ainsi, il s'avère que l'intérêt des parents aux notes se révèle par leurs comportements durant leurs visites à l'école, par leurs questions qui concernent uniquement les notes et pas les connaissances acquises par leur enfant, par les pressions qu'ils exercent sur les enseignants afin qu'ils attribuent de meilleures notes. Comme l'affirme d'ailleurs Dubet, les parents savent qu'à nos jours ils doivent «se conduire comme des usagers plus ou moins éclairés afin de favoriser la scolarité de leurs enfants» (2012, p. 134).

Les explications que les enseignants de notre recherche offrent relativement aux comportements et aux attitudes parentales envers les notes scolaires se mettent en accord avec les résultats des recherches précédentes (Anastasiou, Papagianni, 2020; Stamatis, Chatzinikola, 2021). D'après les témoignages des enseignants les parents par le biais des notes

scolaires visent à confirmer l'éducation familiale exercée, à vérifier le succès de leur rôle parental, à récompenser l'investissement parental à la scolarité. Les notes constituent pour les parents d'élèves une preuve qu'ils sont de bons parents et que leur enfant est capable de progresser, alors que pour certains elles constituent leur billets de reconnaissance sociale et probablement d'une future ascension sociale. Il n'est pas donc surprenant le fait accentué par nos participants que les parents souhaitent que leurs enfants aient de bonnes notes indépendamment de leurs capacités, de leur effort ou mêmes des connaissances acquises à l'école.

Enfin, les conséquences de cette priorisation des notes scolaires par les parents sont évidentes dans plusieurs aspects de la quotidienneté scolaire et influencent selon les enseignants participants les relations parents-enfants, autant que les relations parent-enseignants et la procédure de notation. Plus spécifiquement, les enseignants avouent que la pression parentale pour l'attribution de bonnes notes influence leur notation finale. Ils signalent également qu'ils attribuent parfois des notes incompatibles à la performance des élèves, étant influencés par l'investissement réel (cours particuliers, aide aux devoirs, etc.) ou symbolique (aspirations, fréquentes visites à l'école, etc.) des parents à la scolarisation de leurs enfants. De plus, nos participants constatent que cette persistance de parents pour de bonnes notes accentue et favorise leur interventionnisme, rendant le travail des acteurs éducatifs plus difficile et stressant. Il devient donc indispensable d'«aider les parents à clairement identifier leur rôle éducatif» (Poncelet et al., 2014, p. 93) et à comprendre les objectifs de la notation.

5. Conclusion

La présente recherche a réussi à saisir et à interpréter les perceptions des enseignants concernant le rapport des parents aux notes scolaires. Des sujets intéressants qui préoccupent la quotidienneté scolaire et les rapports entre les acteurs éducatifs (parents, enseignants, élèves) se sont révélés, prouvant encore une fois le rôle important et décisif que les parents jouent dans l'éducation scolaire. Evidemment, une recherche comme la nôtre ne peut pas prétendre à la généralisation de ses résultats. Pour cette raison on propose par la suite une recherche quantitative, qui donnera la possibilité de tester nos conclusions et de généraliser nos résultats (Bryman, 2017).

Enfin, on considère que la recherche sociologique des rapports parentaux à l'école doit se focaliser sur le suivi parental de la scolarité, qui se réalise à la maison, et aussi sur l'investissement des parents aux notes scolaires. Il s'agit de sujets importants et décisifs, non seulement pour le progrès des tous les élèves, mais également pour l'amélioration des rapports entre parents et enseignants et la diminution des inégalités scolaires. En concluant, nous sommes d'avis que chaque recherche autour de ce sujet doit s'appuyer sur le principe que chaque note attribuée aux élèves par les enseignants exerce une influence significative sur les aspirations et les conduites parentales.

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Vivre avec un coparent anxieux en période de transition à la parentalité

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Résumé

En période périnatale, 21,7% des mères et 9,9% des pères vivent avec l'anxiété. Cette étude qualitative s'intéresse à l'expérience des parents en réponse à l'anxiété de leur coparent de la grossesse aux deux premières années de vie de l'enfant. Un questionnaire en ligne invite des parents vivant avec un coparent anxieux à décrire leur expérience. L'analyse thématique des récits de 12 pères et 15 mères témoigne d'émotions (anxiété, colère, impuissance, etc.), de cognitions (inquiétudes, incompréhension, etc.) et de comportements (soutien, conflits, évitement, prise en charge, etc.) divers, généralement négatifs. Ces résultats suggèrent que l'anxiété parentale n'est pas un phénomène individuel.

Mots-clés: anxiété, parentalité, couple, famille, coparent.

Abstract

Nel periodo perinatale, il 21,7% delle madri e il 9,9% dei padri vivono con ansia. Il presente studio qualitativo analizza l'esperienza dei genitori in merito all'ansia dei rispettivi co-genitori, dalla gravidanza ai primi due anni di vita del bambino. Un questionario online invita i genitori che vivono con un co-genitore ansioso a descrivere la loro esperienza. L'analisi tematica dei racconti di 12 padri e 15 madri ha rivelato una varietà di emozioni (ansia, rabbia, impotenza, ecc.), cognizioni (preoccupazioni, incomprensioni, ecc.) e comportamenti (conflitto, evitamento, caregiving, ecc.), generalmente negativi. Questi risultati suggeriscono che l'ansia dei genitori non è un fenomeno individuale.

Parole chiave: ansia, genitorialità, coppia, famiglia, co-genitori.

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1. *Introduction*

La transition à la parentalité, qui s'étend de la grossesse à la deuxième année de vie de l'enfant (Twenge, Campbell, Foster, 2003), s'accompagne généralement de défis nécessitant une adaptation, incluant le développement d'habiletés parentales, l'intégration d'un nouveau rôle à son identité, des défis financiers, professionnels ou relationnels ou encore des préoccupations liées à la santé et la sécurité durant la grossesse ou la période post-partum (Bayrampour *et al.*, 2016; Pilkington, Rominov, 2017). La transition à la parentalité est donc un contexte propice à l'anticipation et à une vigilance excessive, biais souvent présents chez les individus anxieux.

L'anxiété prend racine dans le sentiment d'absence de contrôle sur des événements futurs perçus comme pouvant être une menace ou un danger pour le bien-être et l'intégrité de l'individu (Barlow, 2000). Cette émotion est surtout étudiée sous sa forme clinique, mais peut aussi interférer avec le bien-être à des niveaux sous-cliniques. Les études indiquent qu'un niveau cliniquement significatif d'anxiété est plus souvent observé durant la période périnatale avec une prévalence de 21,7% chez les mères et 9,9% chez les pères (Leiferman *et al.*, 2021), comparativement à une prévalence de 16,4% chez les femmes et 8,9% chez les hommes de la population générale pour n'importe quel trouble anxieux sur un an (Somers *et al.*, 2006).

Les pères et les mères s'inquiètent d'éléments similaires, incluant le bien-être du fœtus, les facteurs liés à la mère et les facteurs individuels et situationnels (Bayrampour *et al.*, 2016; Lavoie, Fontaine, 2016; Pilkington, Rominov, 2017). Cependant, les pères s'inquiètent davantage d'un manque de connaissances et de sommeil ainsi que de l'absence liée à leur emploi, tandis que les mères s'inquiètent davantage des critiques possibles de leurs habiletés parentales, du développement de l'enfant et de leur relation d'attachement avec celui-ci.

Les répercussions de cette anxiété sur le coparent, le couple ou la famille sont peu documentées. Pourtant, l'expérience parentale d'un parent influence et est influencée par la relation qu'il a avec l'autre parent (Lacharité *et al.*, 2015). Cette relation est importante pour le bien-être et le développement de l'enfant et de la famille.

Une réaction potentielle à l'anxiété d'un coparent est la mobilisation des ressources du parent. Dans une étude qualitative, Locock et Alexander (2006) explorent l'expérience des pères, tel que perçue par les mères, lors d'un dépistage prénatal, ainsi que leur réaction à l'annonce d'un

diagnostic d'handicap chez l'enfant. Dans des entrevues, menées surtout auprès de mères, les pères y sont décrits comme des protecteurs qui soutiennent leur conjointe en adoptant une attitude optimiste et en dissimulant leurs émotions. La documentation indirecte de leur réaction invite toutefois à la prudence quant à la généralisation de ces résultats. De plus, cette étude ne nous informe pas sur la réaction des mères devant l'anxiété de leur conjoint. D'autres études sur l'anxiété dans un couple rapportent une relation négative entre l'anxiété et la satisfaction conjugale (Mazzuca *et al.*, 2019; Monin *et al.*, 2017; Pankiewicz *et al.*, 2012) ainsi que la cooccurrence des troubles anxieux chez les deux membres d'un couple (Wang *et al.*, 2017). Considérant les changements envisageables et les sources d'anxiété qui accompagnent la transition à la parentalité, ainsi que l'interinfluence des parents selon une compréhension écosystémique de la parentalité (Lacharité *et al.*, 2015), on se doute que l'anxiété d'un coparent puisse avoir des impacts à plusieurs niveaux.

Ce projet pilote visait donc à explorer l'expérience, lors de la transition à la parentalité, des pères et des mères vivant avec un coparent perçu comme anxieux. Trois questions ont été posées: (a) quels sont les facteurs qui contribuent à l'anxiété du coparent selon le parent?; (b) quelles sont les conséquences perçues par le parent de l'anxiété du coparent sur le plan de ses propres émotions, cognitions et comportements, et ce, dans les sphères individuelle, conjugale et familiale?; (c) est-ce possible de dégager différents profils de réactions face à l'anxiété du coparent?

2. Méthodologie et méthode de recherche

Ce projet de recherche exploratoire fait appel à une méthode mixte et inductive (Bourgault *et al.*, 2010; Elo, Kyngäs, 2008). Il vise à décrire la réalité des parents comme ils la conçoivent. L'échantillon est composé de 15 mères et 12 pères ($M = 32$ ans) qui attendent leur premier enfant ($n = 8$) ou dont l'enfant le plus jeune a moins de deux ans ($n = 19$) et qui sont en couple avec un coparent qu'ils considèrent comme anxieux (13 pères, 14 mères formant 26 familles hétéroparentales et une famille homoparentale). La majorité sont également parent d'un autre enfant ($n = 19$). L'échantillon est fortement scolarisé avec une majorité de participants ayant obtenu un diplôme universitaire ($n = 18$) ou collégial ($n = 4$).

Les participantes ont répondu à un questionnaire anonyme en ligne, via LimeSurvey. La première section documentait les sources perçues de l'anxiété du coparent à l'aide d'une liste développée à partir de re-

cherches antérieures. La seconde comportait des questions ouvertes invitant les participant.es à décrire une situation illustrant l'anxiété de leur coparent ainsi que la façon dont ils ou elles y ont réagi. Les participant.es remplissaient ensuite le *General Anxiety Disorder 7* (GAD-7; Williams, 2014), pour leur coparent ainsi que pour eux- ou elles-mêmes afin de documenter le niveau d'anxiété perçu chez le coparent en comparaison avec leur propre niveau d'anxiété. Enfin, les questions sociodémographiques de la dernière section ont permis de décrire l'échantillon.

La collecte de donnée a eu lieu de janvier à mars 2022. Les participantes ont été recrutés via la liste de distribution courriel de l'Université Laval (Québec, Canada), ainsi que par Facebook.

3. Critères d'analyse

Une analyse de fréquence a permis de compiler les sources d'anxiété des coparents. L'analyse thématique des réponses ouvertes a fait ressortir les conséquences individuelles, conjugales et parentales de l'anxiété d'un coparent. Une grille de codification a été développée à partir d'une lecture flottante. Une fois les réponses codifiées indépendamment par quatre chercheurs, les désaccords ont été résolus par consensus, afin d'assurer une objectivité adéquate. Finalement, une analyse interprétative consensuelle visait à identifier des profils de réactions en dégagant des tendances et des liens entre les thèmes saillants et discordants lors de l'analyse thématique.

4. Résultats

4.1. Niveaux d'anxiété

Les participantes perçoivent, en moyenne, chez leur coparent un niveau d'anxiété modéré et potentiellement clinique ($M = 11,44$) alors qu'ils rapportent vivre en moyenne un niveau d'anxiété léger ($M = 5,78$). Trois participants ont cependant des scores > 10 , suggérant un trouble d'anxiété sévère selon le GAD-7. Globalement, le niveau d'anxiété perçu chez les coparents est plus élevé que celui des parents répondants ($t(26) = 4,87, p < 0,001, d = 0,94$).

4.2. Sources d'anxiété

L'ensemble des sources d'anxiété identifiées dans la recension d'écrits ont été mentionnées par les participantes, en plus du risque de transmission de la COVID-19 à l'enfant. La santé du bébé est la source d'anxiété la plus fréquemment perçue par les répondant.es chez leurs coparents mères (8/13) et pères (10/14). Les habiletés parentales semblent également une source importante d'anxiété pour les coparents mères (7/13) et pères (7/14) selon les répondantes. Plus de la moitié de nos répondantes perçoivent que l'anxiété de leur coparent père résultait de préoccupations pour la santé de la personne enceinte (8/14), la conciliation travail/famille (8/14) et les problèmes de comportement ou la discipline (7/14), alors que l'anxiété des coparents mère est fréquemment liée au sommeil et à la sieste de l'enfant (7/13).

4.3. Conséquences perçues

En ce qui concerne les conséquences perçues de l'anxiété du coparent, celles-ci varient en intensité. Elles touchent tant l'individu dans son expérience personnelle que dans sa relation de couple et son rôle parental.

4.3.1. Émotionnelles

Les parents rapportent vivre des émotions principalement négatives en réponse à l'anxiété de leur coparent. Au niveau individuel, des parents rapportent de la tension, un sentiment d'être dépassé, de la solitude, de la déception et de la culpabilité liée aux conséquences de l'anxiété du coparent. Toutefois, l'anxiété et l'épuisement sont les émotions rapportées le plus souvent dans notre échantillon. Par exemple, une mère dit: «J'étais brulée par la charge émotive et la charge mentale (M#101).»

Bien que des conséquences émotionnelles soient rapportées par les parents des deux genres, ces réponses viennent majoritairement de mères. Parallèlement, il est intéressant de noter qu'un père mentionne ne pas percevoir de conséquences émotionnelles négatives de l'anxiété de son coparent: «Je me sens bien, c'est fait sans douleur ou dérangement pour mon enfant. (P#141)».

Dans la sphère conjugale, les émotions rapportées viennent principalement des pères, bien que quelques mères en rapportent. Des parents rapportent un sentiment d'impuissance, une diminution de l'empathie, de l'impatience, de la colère et de la culpabilité à propos des actions dirigées envers le coparent. Un père explique bien son expérience lorsqu'il dit: «Plus elle est anxieuse, plus je me sens restreint, plus je suis frustré, plus je me fâche et à ce moment nous avons des conflits (P#147)».

Il est à noter qu'un père rapporte également être compréhensif vis-à-vis l'anxiété de sa partenaire, donc le portrait n'est pas entièrement négatif. Aucune émotion envers le rôle parental ou la famille n'est exprimée par nos participants.

4.3.2. *Cognitives*

Les cognitions rapportées sur le plan individuel comprennent des inquiétudes à propos de nouveaux éléments soulevés par le coparent, une évaluation du soutien à apporter comme étant trop important pour les ressources personnelles du parent, ainsi que de l'envie envers les gens qui n'ont pas à conjuguer avec l'anxiété d'un coparent. Par exemple, une mère dit: «J'envie les autres familles qui font de belles activités tous ensemble sur une base régulière (M#72)». Deux pères rapportent percevoir une restriction de leur liberté et de leur agentivité.

Sur le plan conjugal, des cognitions variées sont rapportées autant par des pères que des mères. Malgré de l'incompréhension et un désaccord quant à l'évaluation par le coparent anxieux de certaines situations, des mères et des pères expriment une volonté voire l'obligation de limiter l'anxiété vécue par leur coparent. Des pères et des mères perçoivent que l'anxiété cause un certain déséquilibre dans le couple en raison de l'indisponibilité physique, émotionnelle ou cognitive du coparent. À cet égard, un père dit: «J'ai parfois l'impression de ne pas avoir droit à mes moments de faiblesse moi aussi (P#47)». L'anxiété semble également pouvoir mener à l'attribution d'intentions négatives au coparent, à ne pas reconnaître son coparent lorsqu'il est anxieux et même à des pensées de séparation. Plusieurs mères et pères rapportent une baisse de la satisfaction ou de la qualité de la relation conjugale. Cela peut toutefois fluctuer avec l'intensité des symptômes anxieux, comme l'explique un père: «Lorsqu'elle est moins anxieuse par rapport à tout ce qui touche les risques du quotidien, je me rapproche d'elle et cela nous amène alors à renouer (P#147)».

Les cognitions liées à la sphère familiale et au rôle parental incluent l'inquiétude que l'anxiété du coparent ait des effets sur l'enfant, la volonté de limiter ces effets et l'émergence de doutes quant à ses propres habiletés parentales des suites de l'anxiété du coparent. Une mère et un père estiment toutefois que l'anxiété de leur coparent pallie certaines de leurs faiblesses: «En même temps, je pense qu'on se complète (M#53)».

4.3.3. *Comportementales*

Les comportements rapportés par les parents découlent des émotions et cognitions rapportées. Sur le plan individuel, outre les pleurs, un comportement découlant directement d'une charge émotive, deux mères rapportent faire preuve de vigilance envers les déclencheurs possibles de l'anxiété du coparent, agissant avant que les situations anxiogènes se produisent: «Je tente toujours d'agir en amont (M#71)». Un père et une mère rapportent dissimuler leurs émotions et une mère dit dissimuler ses inquiétudes afin d'éviter de causer de la détresse supplémentaire au coparent. D'autres parents rapportent chercher à s'outiller ou à prendre soin d'eux afin de s'aider à conjuguer avec l'anxiété du coparent.

Presque tous les participant.es rapportent des comportements liés à la sphère conjugale (25/27). Des mères et des pères partagent avoir délibérément refusé d'accommoder l'anxiété de leur partenaire («J'ai quand même continué de faire ce que je voulais (P#140)»), alors qu'un père rapporte plutôt avoir diminué ses heures de sommeil pour accommoder l'anxiété de sa partenaire. Toutefois, les comportements de soutien (réassurance, encouragement, résolution de problème et prise en charge du coparent), ainsi que les tentatives de communication dans une variété de styles (discussion, rationalisation, instauration de limites, conflits et crises de colères) sont les types de comportements les plus nombreux dans cette sphère. D'autres parents rapportent adopter des comportements d'évitement physique ou cognitif de l'anxiété du coparent. Une mère rapporte avoir «parfois tenté de m'évader dans ma tête sans rien dire (M#101)». Enfin, un père attribue un épisode d'infidélité envers sa conjointe à l'anxiété perçue chez elle.

Dans la sphère familiale, le seul comportement direct rapporté pour ce thème, et ce uniquement par des mères, est la prise en charge d'une part plus large, des responsabilités parentales et familiales. Plusieurs pères et mères rapportent toutefois des conséquences familiales de l'anxiété d'un coparent comme l'isolement, les retards, la désorganisation, la

réduction du temps passé en famille ainsi que l'indisponibilité physique ou émotionnelle du coparent anxieux. À cet égard une mère dit: «Mon conjoint est très préoccupé par son travail et cela affecte grandement sa capacité à être présent pour les enfants (M#58)».

4.4. *Profils de réponse à l'anxiété*

Des profils distincts n'ont pu être identifiés au sein de notre échantillon limité. Cependant, la présence de plusieurs marqueurs temporels (*au début, de moins en moins, à long terme*) dans les réponses des parents suggère une progression temporelle dans leurs réactions émotionnelles, cognitives et comportementales. Ainsi on peut associer l'arrivée des conflits et de l'épuisement avec l'accumulation de situations de stress causées par l'anxiété du coparent. La progression n'est toutefois pas linéaire et semble fluctuer avec l'intensité de l'anxiété présente chez le coparent.

Il est également intéressant d'observer les différents styles de réponse entre les répondantes pères et mères. En effet, les réponses des pères se concentrent sur la sphère conjugale, avec une faible fréquence de mention de la sphère familiale, alors que les réponses des mères se répartissent également dans les trois sphères.

5. *Discussion*

À la lumière des résultats, les sources d'anxiété répertoriées sont cohérentes avec celles documentées dans la littérature. Les sources d'anxiété liées à l'emploi sont perçues plus fréquemment chez les pères que les mères de l'étude, ce qui va dans le sens des résultats de Pollock et collaborateurs (2005). Les habiletés parentales sont une source d'anxiété fréquente tant chez les mères que les pères de l'étude, ce qui concorde avec les résultats d'études antérieures (Bayrampour *et al.*, 2016; Pollock *et al.*, 2005).

Les émotions, cognitions et comportements négatifs sur les sphères individuelles et conjugales s'apparentent au phénomène de fatigue de compassion, qui peut survenir lors de la prise en charge d'une personne dans le besoin à long terme (Blair, Perry, 2017). Ce type de phénomène est reconnu pour les proches aidants de personnes souffrant de problèmes de santé mentale comme la démence, les troubles alimentaires, le trouble bipolaire ou la schizophrénie (MacCourt *et al.*, 2013), mais nous n'avons recensé aucune étude l'observant chez les proches aidants de personnes anxieuses.

Les comportements de soutien rapportés par les parents de l'étude s'apparentent à ce que Locom et Alexander (2006) qualifient de mobilisation des ressources. Mais contrairement à cette étude qui ne considérait que les réactions de pères à un diagnostic de handicap chez l'enfant, et qui les attribuaient au rôle paternel de protéger et soutenir la mère, il semblerait que les mères et les pères adoptent aussi ce rôle lorsque leur partenaire est anxieux. Il semble donc s'agir d'une réaction au besoin d'un proche plutôt qu'une réaction ancrée dans un rôle parental genré.

Les sphères perçues comme étant affectées par l'anxiété du coparent et pour laquelle les ressources sont mobilisées pourraient toutefois varier quelque peu selon le genre du parent. En effet, lorsque questionnés sur les impacts individuels, conjugaux et familiaux de cette anxiété, les pères partagent surtout des éléments conjugaux. Cela pourrait refléter un mode de réponse plus concis chez les pères, ce qui serait cohérent avec la littérature (Haas, 1979; Kiecker *et al.*, 2000) ou refléter l'attention particulière que portent les pères à leur conjointe.

La concentration des réponses des pères dans la sphère conjugale ne permet toutefois pas de conclure que les pères ne perçoivent pas de conséquences importantes de l'anxiété de l'autre sur eux-mêmes, leur parentalité ou leur famille. Les questions invitaient les parents à partager une situation vécue et ses conséquences, sans sonder explicitement les différentes sphères. De plus, les conséquences conjugales rapportées peuvent tout de même entraîner des conséquences sur la famille et le développement de l'enfant au travers de la relation triadique mère-père-enfant (Favez, Frascarolo, 2011).

Sur le plan familial, les inquiétudes dirigées vers l'enfant et la volonté de le protéger des impacts de l'anxiété sont cohérentes avec le rôle parental d'assurer les besoins de l'enfant (Srikandi, 2020). Les pères et les mères parlent aussi d'une désorganisation de la famille. Cet impact est cohérent avec l'étude de Dickstein et coll. (1998) ayant trouvé que le fonctionnement familial serait le médiateur le plus important qui explique les impacts de la psychopathologie de la mère sur l'enfant, ce qui réitère l'importance d'adresser les impacts de l'anxiété dans la période de transition à la parentalité de façon familiale plutôt qu'individuelle.

6. Forces et limites de l'étude

La nature qualitative et exploratoire de l'étude permet de documenter une plus grande diversité d'expériences. De plus, l'inclusion de pères

et de mères dans l'étude informe sur la perspective des deux genres que ce soit chez le coparent anxieux ou le parent qui compose avec cette anxiété, ce qui est encore trop peu fréquent dans la littérature périnatale.

La petite taille de l'échantillon et la proportion importante de diplômés universitaires invite à la prudence puisque l'ensemble des expériences possibles pourraient ne pas avoir été recensées. De plus, contrairement à une entrevue, le questionnaire en ligne suscite des réponses plutôt brèves des participants. Des éléments pertinents pourraient ne pas avoir été mentionnés. Malgré le processus continu d'intégration de l'identité de parent durant la grossesse et les deux premières années de vie de l'enfant, il est possible que la manifestation de l'anxiété du coparent et ses répercussions sur le partenaire diffèrent selon qu'elles soient vécues pendant la grossesse ou durant les premières années de vie de l'enfant, considérant les enjeux propres à ces différents stades de la transition à la parentalité. De telles distinctions seraient à considérer dans des recherches futures, puisque les données recueillies pour la présente étude exploratoire ne permettaient pas de mener des analyses aussi précises.

7. Conclusions

Les résultats de la présente étude suggèrent que les partenaires perçoivent que les sources d'anxiété des pères et des mères sont diverses et couvrent autant la santé de l'enfant et de la mère que les habiletés parentales, le travail et les finances. Les participants(-es) (participants hommes et femmes) soulignent des impacts négatifs de l'anxiété perçue chez un coparent sur leur partenaire, leur couple et leur famille, peu documentés dans la littérature à ce jour. Bien que les pères rapportent principalement des impacts conjugaux de l'anxiété, alors que les mères semblent percevoir des impacts à la fois individuels, conjugaux et familiaux, la volonté de soutenir son coparent semble mener à des symptômes qui s'apparentent à de la fatigue de compassion, peu importe le genre du parent. Il semble donc important que les intervenants(-es) (autant hommes que femmes) en périnatalité soient attentifs(-ves) à l'expérience des deux parents et non seulement à celle de l'individu anxieux. L'étude suggère que l'anxiété des pères lors de la transition à la parentalité entraîne des conséquences négatives au même titre que celle des mères, et ce non seulement pour eux et elles-mêmes, mais aussi pour l'autre parent, leur couple et leur famille.

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Education Professionals and the COVID-19 Pandemic: Turning Crisis into New Opportunities

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Abstract

The COVID-19 pandemic emergency brought human vulnerability to the proscenium revealing the uncertainty associated with existence. It appears as a symptom of a deeper crisis of modern society, whose paradigms need to be questioned. Could this be an opportunity, though? The qualitative study presented here aimed to investigate the emotions experienced and the responses developed by the education professionals during the first lockdown. It explored the areas related to motivation, fears, and the ideas prompted by the change, with a focus on the conditions able to foster “creative solutions”. Teamwork and the presence of training programs appear to be crucial elements.

Keywords: COVID-19 pandemic, crisis, change & opportunities, education, new paradigms.

Abstract

L'emergenza pandemica da COVID-19 ha disvelato la vulnerabilità e l'incertezza associate alla condizione umana. Ciò, tuttavia, appare come sintomo di una crisi più profonda della moderna società, i cui paradigmi necessitano di essere messi in discussione. La crisi potrebbe forse essere considerata un'opportunità? Lo studio qualitativo presentato indaga le emozioni e le risposte dei professionisti dell'educazione durante la prima fase di emergenza. Oggetto di indagine sono state la motivazione professionale, le paure e le idee suscitate dal cambiamento, con un focus sulle condizioni a favore di “soluzioni creative”. Il lavoro in team e la presenza di piani formativi sembrano essere elementi cruciali.

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Parole chiave: pandemia da COVID-19, crisi, cambiamento & opportunità, educazione, nuovi paradigmi.

1. *The value of metamorphosis: Moving from a crisis to a change*

The COVID-19 pandemic emergency was a symptom of a deep crisis, exceeding the health one: the crisis of the epistemological and socio-economic paradigms of modern society, which now have to deal with an increasingly uncertain scenario and are subject to a *radical change* (Fabbri, 2019; Morin, 2020). Contini (2021) argues that «it was foreseeable, but we did not foresee it» (p. 9; our translation) because we thought that anything scary we could have foreseen would not have affected us closely anyway: «Drunkness erased the sense of limitation intrinsic to the human condition and took with it the awareness of our finitude, respect for nature, and solidarity and devotion to other humans» (*Ibidem*; our translation).

Those “uncomfortable” themes inherent to human existence (namely its finitude, its being fragile and breakable) suddenly emerged to the surface though and the impossibility of exercising control, whether collective or individual, over all variables interacting in a complex system (Bateson, 1972) was clearly revealed.

However, following Brown’s reflections (2015), the recognition of the vulnerability intrinsic to human experience opens up the possibility of change. Such a possibility can be realised if subjects are also able to accept the fear associated with change, both in the most intimate sphere and in the professional one. If the year 2020 was the year of trauma, the years to follow will be the ones of analysis on the consequences: it is up to us to transform the crisis into a chrysalis, to accomplish the process of metamorphosis for humanity. The crisis is a moment of discontinuity that inevitably forces us to evaluate, choose, and change (Fabbri, 2019). Why not then look at it as an opportunity? What if, at last, what seemed to be indisputable was now necessarily questioned? Could not a paradigm of thought, a model of life, an entire socio-economic system finally be challenged and deconstructed, renewed, and innovated?

This paper deepens the possibility of looking at change as a chance for rebirth. Opposing a “given” destiny and searching for a “creative exit” is a gamble. Certainly, a courageous one, which does not trap subjects to the status of victims, but looks at them as protagonists of new narratives, even within their profession.

Leonard Mlodinow (2018) emphasises the importance of the ability to leave our reassuring certainties behind (which, perhaps, also includes the ability to “unlearn”), to accept contradictions and to exercise “flexible thinking”. Indeed, the importance of accepting and knowing how to experience uncertainty is a key step in the process of change. Uncertainty is valuable, not only because it is ineradicable but also because the chance of controlling all the variables of complexity is not given to humans, even if they have developed intelligence and can interact with machines (Morin, 1990).

In the frame of the *complexity paradigm*, Simon maintains (1947) we have to deal with limited rationality. Based on the available information – which is inevitably fragmented and partial – and being able to consider only some of the possible consequences, human beings try to make satisfactory and sufficiently good choices, without ever being certain of having chosen the best one.

However, it must be said that uncertainty is often linked to fear. In the words of Bauman (2006), “fear” is the term we choose to name our uncertainties. This reminds us that – when facing the need for change – fear is inevitable, but it is also the real driving force behind brave choices. Indeed, courage is not fearlessness tout court, but rather an exposure and risk-taking. Vulnerability and fragility characterise us, they are the «backbones» (Borgna, 2014, *passim*; our translation) of human existence, inextricably linked to the environment in which we are embedded and to our fellow human beings. In Latin, the root of the word *fragile* is the same of the verb *frangere* (to break) and the noun *fragmentum* (fragment). Being aware of human fragility means facing the idea that humans might break and that we are all “pieces” of a more complex and interconnected whole (Malaguti, 2005). Nevertheless, Western cultures are inclined to favour the idea of fragility as a weakness and lack of solidity (Borgna, 2014).

However, the possibility of change lies precisely in the recognition of our ontological fragility and the acceptance of risk-taking. The fear of change, as a matter of fact, can inhibit action, can lead to clinging, to seeking refuge in certainties (for example, in established professional practices that are considered valid “no matter what”). But it can also be experienced as the moment preceding the leap into emptiness, the vertigo before the desirable (or necessary) unpredictable course of action.

We hereby view the crisis as an opportunity for change. Referencing the “crisis-chrysalis” binomial mentioned above, the crisis is a fracture: a breach in the armour of our comfort zone and of our “reassuring cer-

tainties". For the chrysalis, indeed, it is precisely in the fracture of the shell (which protects and reassures) that the signal of the forthcoming metamorphosis (transformation) shows, making it ready to reveal itself and all its potential beauty.

The discourse on crisis and change is of interest to us above all for the contexts of education and its professionals. All areas of education have been forced to cope with the pandemic emergency, and this has necessarily entailed breaking new ground, even reinventing established practices. The call, therefore, for those involved in education, is to be stimulated by a paradigm shift that the pandemic has brought along (Spiteri, 2021; Zhao, 2020).

The COVID-19 emergency posed the problem of how to educate without the school facilities (ECEC services, schools, after-school services, etc.). This is a pedagogical and didactic challenge that has been addressed and has confirmed a key point: the need for (formal) education is superior to any critical aspects that the public and academic debate has always raised about the educational system (Farné, 2020). So why, strengthened by this renewed certainty, can we not assume that the crisis represents an opportunity rather than just a deadlock?

2. The study "Education at the time of Coronavirus (and after)"

The qualitative study "Education at the time of Coronavirus (and after)" was designed starting from this framework. The research aimed at investigating education professionals' perception of their role during the pandemic emergency. The study explored the areas related to the meaning and motivation attributed to their educational activities, the doubts and fears that came to light, the new ideas prompted by the change, and the perceived risks.

2.1. Procedures

Five different online focus groups were carried out in May-June 2020. They were moderated by the same researcher and with the presence of a second researcher as an observer.

The meetings were attended by educators (N=4) and pedagogical coordinators (N=6) of ECEC services and by kindergarten (N=5), primary (N=6) and secondary (N=7) school teachers from 9 different

Municipalities of Emilia Romagna and Marche (N=28; 26 females, 2 males). All participants were recruited according to convenience criteria. Professionals working for the same type of service (ECEC service or kindergarten) or school grade (primary or secondary school) formed each group.

In the days before each meeting, participants anonymously answered an online questionnaire with three open-ended questions on the focus groups' target topics: the answers were the starting point of the meetings. The contents of the meetings were recorded, fully transcribed, coded by both authors and analyzed in order to identify patterns of meaning (Braun, Clarke, 2006).

2.2. Results and discussion⁴

The study shed a light on some emotions experienced by professionals during the first lockdown and helped in understanding how these might have influenced their representations of the educational role.

The change and the uncertainty caused by the pandemic emergency destabilised them and generated disorientation, sense of ineffectiveness and loss of meaning.

Not being able to control the events revealed fragility and vulnerability, described by some of the participants with words such as «I hesitated» (G., teacher), «It was all so new. I felt a little on a raft, at the mercy of the events» (M., teacher), «It was a shock at the beginning [...]. It's been a very difficult personal experience» (B., educator). Such emotions, which were experienced on a personal level first, also resonated at the professional one and were translated into feelings of perceived helplessness and frustration. «I felt unable to help», said C.B. (teacher). M.'s (teacher) and G.'s (teacher) words appear emblematic, when describing distance learning activities implemented by schools as «a field hospital [...], an emergency solution», «a patch [...], a palliative».

As we saw previously, the fear generated by an unexpected change might inhibit action, but it can also be experienced as vertigo that anticipates the jump “into the void”. The evidence from the focus group confirms that reactions fluctuated between attempts to remain within

⁴ Unless otherwise specified, English translations of the speeches of participants taking part in the study are edited by the Authors, Editor's Note.

the reassuring perimeter of rooted and well-known practices and the desire to explore new paths, inspired by the intention to rethink the educational course.

The desire to linger in (or to re-enter) one's comfort zone is perceivable, for example, in L's (teacher) words, who states «when you find something that overturns the equilibrium, that disrupts it, you [...] you can, however, go back to the already outlined way. This is somehow what we are waiting for, in my opinion».

But change, as highlighted before, can also be experienced from a pro-active perspective. Indeed, the need to question those professional practices is one of the elements grasped during the focus groups.

First of all, change and uncertainty are opportunities to critically revisit the goals that drive educational professionals and their actions. Unprecedented and unknown situations, like the COVID-19 pandemic, actually require new avenues of intervention to be found, especially when the already known solutions or those that seem to be defined a priori prove to be ineffective. To be able to do that, professionals needed to go back to the motivations of their work, not only focusing on how things have always been done, are done or should be done, but above all on why they are done, on what the purposes are. C.F. (teacher) explains:

It was a good opportunity also as a group, to re-examine ourselves, to interpret the things we had done, the motivations behind them, and to put them back on the table. We had to do that, especially because we had to share our decisions with families. Even if it's not been easy, it's been really useful: we studied a lot, re-read the national indications and did an in-depth analysis.

Reflecting on one's role and mission can trigger creative thought processes, which start precisely from questioning what seems to be definitively acquired, certain, almost indisputable. The need to reflect on consolidated paradigms emerges from E.'s (pedagogical coordinator) words:

We now have the great opportunity to work on many aspects of a pedagogical paradigm that perhaps needed to be refreshed [...]; sometimes [...] I notice a sort of paralysis. I don't believe in this way of working, as if it were faith and not a job. Sometimes I hear people saying: «we've always done this way», but maybe you've always been wrong! Not being willing to change often turns out to be kind of cultural protection, while change should be a great chance for ECEC services, educators and the families.

Change can really be an opportunity to unlearn and re-learn in new forms, finding “creative exits”. Which were the factors encouraging such a generative process?

First of all, a constant inter-subjective dialogue with the workgroup, which can be a source of new knowledge and ideas, a place where people feel less alone in the face of their professional challenges and that opens up to curiosity, experimentation, and reflection. When dialogue within a group struggles to occur, responses might be less effective, as F. (teacher) emphasises:

We all thought «Come on, let’s go. What shall we do? Shall we test it? Let’s try this». But it might have been more useful if we all (the entire working group, all the teachers of the school, I mean) had talked about it beforehand and if we acted on a common and shared basis. It is surely true that each section has “its children and its own parents” – so maybe good for my section would not have been good for another one – but...

Indeed, reflecting together, putting fears and constraints on the table, and making one’s idea of education explicit can help in finding collective, organic, and structured answers. We do not want to maintain that being able to react and to respond in a very short time to compelling vital needs is not important when an emergency occurs, but expressing clear intentionality even beyond the short term is equally significant, in order to seize the opportunity of a crisis.

Discussion within the team creates the valuable opportunity to (re)give meaning – on an individual and collective level – to one’s own educational action, to find new motivations. This is what M. (teacher) highlights when she says «it helps the teaching team to be a cohesive body and to reflect together about the meaning we give to the school, to children, what we think about the relationship between teachers and families».

Families also are a precious resource, if their contribution is recognized, valued and made complementary to their professional skills. D. (pedagogical coordinator) recalls:

It was parents who made this request [video-calls between children and teachers, Ed.] and we accepted it, in that thread of alliance [...]. They had seen a need in their children and we listened to them while being aware of and claiming adults’ – and education professionals’ in particular – responsibility for a conscious and attentive use of communication technologies.

Taking the opportunity to be in a relationship of authentic exchange with children's families also helps to experience some of the concepts that sometimes remain abstract statements. Among these, the awareness that effective educational action is conceivable only within a systemic approach and is based on reciprocity: everyone – respecting specific roles and competencies – can make their contribution and bring their added value to the table. This is witnessed by D. and E. (pedagogical coordinators), who respectively say: «we are taking home the message that parents know how to be parents» and «the pedagogical colonialism that some educators sometimes have – as they might think they can teach the world how to bring up children – has decreased».

Possible new creative solutions are therefore the result of a process that is not undertaken alone, but with a community, where others are a source of enrichment. Certainly, new courses of action are not without real or perceived risks. Taking up the challenge of change and uncertainty implies risk-taking and accepting oneself as fallible. M. (teacher) says:

We tried, and we did things. That was the only thing we could do, what else could we have done? What were the risks and what were the possibilities? [...] If we had been sitting on our hands, we could not have done anything. [...] Let's try, [...]: let's insert a variable, let's look at the boys and girls, let's try to find ways, opportunities and paths to respond to their needs.

Given the impossibility to control all interacting variables, new initiatives sometimes are fully successful, and sometimes not. There are two important aspects to be highlighted though. First, when education is involved, “trial and error” approaches are not conceivable: an ethically guided intentionality is the baseline of every educational action and this means that the respect and well-being of the subjects can never be questioned or at stake. As already mentioned, one cannot be sure that the choices made are the best ones, but they must certainly be the best possible at a given time, in a given context, based on the information available.

Second, recognising oneself as imperfect, not omniscient and not (self)-sufficient may sometimes be perceived as a disavowal of one's professional value, particularly when this is linked to a feeling of “superiority” in asymmetrical relationships based on the education professionals' presumed “higher level of knowledge”.

A latent “principle of authority” (or a “desire for authority”) is indeed still detectable among professionals. For example, in the words they use to describe a good relationship with the families: «every time parents

accepted our requests willingly, we had good results» (L., teacher). «It is important that parents are engaged, but discreet, too» (M., teacher). «It is positive when parents come with ‘the hat in their hand’, meaning the parents are there to hear what you say, to ask for your advice. Unfortunately, not all of them are like that» (G., teacher). «Students improve when parents echo what I say at school» (D., teacher).

When one’s professional role is interpreted in this manner, anything that questions the “teacher’s authority” and that contradicts the system of thought and action that is commonly considered logical, coherent and validated is “rejected” (Morin, 1990). This limits the willingness to openly and continuously rethink one’s profession, to share thoughts and ideas and to cooperate to identify new possible solutions.

Going beyond this attitude means being aware that we are “pieces of a greater whole”, and that we are partial, and limited in vision and possibilities. This awareness makes us complementary to others, allowing us to find motivations, conceive ideas and reach goals greater than the ones we could achieve on our own. This is a further element that allows us to unveil the *positive* and *generative* potential of a crisis.

Conclusions

The COVID-19 pandemic represented a “test” of the actual quality of our educational system, putting its implicit and/or explicit logic – as well as its socio-cultural and pedagogical value – under the magnifying glass.

As the professionals stated, «during the lockdown [...] everything got bigger, so the good things became beautiful, the bad things terrible» M. (teacher). The exceptionality of the situation shed a light and brought on the proscenium already known (but probably temporarily set aside as “secondary”) issues.

The words of the professionals we met are significant proof that the themes related to the crisis can become an opportunity for growth if the individuals directly affected experience the situation as protagonists, with responsibility, creativity and flexibility. At the same time, they open a reflection on which structural conditions can foster this type of attitude and response, highlighting two crucial elements that can help to “take care of the crisis”.

On one hand, the importance of valuing teamwork and the presence of professionals who facilitate reflective processes. On the other hand,

the centrality of the support and continuous training processes, aimed at enhancing metacognitive and emotional skills. Key factors for the care of the educational professions, especially, but not only, in times of crisis.

The post-pandemic ECEC services and schools should not return to the previous status quo. There should be the opportunity to take advantage of the lessons learned and take a step forward toward a truly democratic and emancipatory education.

After this experience, [...] there could be the circumstances for a political and cultural battle [...] to reaffirm the value of school as a community. A democratic community that is based on the active participation and cooperation of its members, on the civic passion for teaching and the desire to learn, and in which everyone finds the opportunity for intellectual and ethical-social growth (Baldacci, 2020, p. 157; our translation).

This unexpected and paradoxical opportunity could foster a collective awareness of the meaning of educational (and care) work. It is therefore not a question of «not worrying, not asking so many questions and seeing how it goes», as was suggested to F., one of the teachers we met, but perhaps, on the contrary, of not stopping reflection. Indeed, in the midst of the emergency, the places of education never stopped being lived.

This brought to light what, perhaps for too long, had been taken for granted: from nursery schools to universities, the world of education has continued to grow and build – even if sometimes it has also collected roadblocks and failures (the perpetuation of inequalities first and foremost). The essential dimensions of education, which have never really been forgotten, have emerged: relationships, the community, the value of knowledge as a tool for collective and individual growth.

But it is not only in the contexts of formal education that we can reap the benefits of the opportunity “offered” by the pandemic: indeed, pedagogical reflection can make its way and become an opportunity in the most varied areas of life. As Cambi remarks, we are called to question all the “big” pedagogical issues

from lifestyle to a rethinking of guiding values, from a renewal of politics to a revival of the role of culture (also and precisely of the highest and noblest culture), from the cultivation of the self (of that inner hole of the ego that the pandemic with its isolation has put back at the center [...]), looking also at a redefinition of our idea of civilization as a whole (2020, p. 56; our translation).

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“I Comply with the Recommendations”: The Interactional Construction of ‘Good Parenting’ in Pediatrician-Parent Conversations

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Abstract

The paper sheds light on the invisible pedagogical dimension of pediatrician-parent interactions. It does so by adopting a Conversation Analysis-informed approach to a corpus of 23 video-recorded well-child visits involving two pediatricians and twenty-two families with children aged 0 to 18 months. In particular, the analysis focuses on how a mother seeks the pediatrician’s advice on everyday baby care issues. The single-case analysis is illustrative of how parents in this corpus, when seeking advice, perform themselves as “good” parents: competent and knowledgeable on caring practices, concerned by their children’s well-being, and concurrently sensitive to the ultimate epistemic and deontic authority of the pediatricians.

Keywords: pediatric visits, parenting, advice seeking, implicit pedagogy, Conversation Analysis.

Abstract

Il contributo porta alla luce l’invisibile dimensione pedagogica dell’interazione pediatra-genitore. L’approccio dell’Analisi della Conversazione viene applicato a un *corpus* di 23 visite di controllo crescita videoregistrate che coinvolgono due pediatri e twenty-two famiglie con figli tra gli 0 e i 18 mesi. Lo studio di caso si concentra sulla richiesta di consiglio di una madre al pediatra riguardo alla gestione quotidiana della sua bambina. L’estratto illustra in modo perspicuo come, durante le richieste di consiglio, i genitori coinvolti nello studio si “inscenano” come “buoni” genitori: competenti e informati sulle pratiche di cura, preoccupati del benessere del/la proprio/a figlio/a, e contemporaneamente, attenti all’autorità epistemica e deontica del pediatra.

Parole chiave: visite pediatriche, genitorialità, richiesta di consiglio, educazione tacita, Analisi della Conversazione.

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Introduction

This contribution aims at shedding light on the invisible – and often neglected – *pedagogical* dimension of pediatrician-parent interactions occurring during a specific kind of pediatric visit: namely, well-child visits². These are regular check-ups where the pediatrician evaluates the child's physical growth and socio-cognitive development according to the expected standard and provides parents with information concerning illness prevention, nutrition, and health and safety issues. Well-child visits therefore constitute a crucial site for monitoring and promoting babies' developmental milestones during the well-known critical "first thousand days of life".

The relevance of studying well-child visits from a pedagogical perspective is twofold. First, pediatricians are among the first professionals (together with early childhood educators) working at the transition between families' private «small cultures» (Holliday, 1999, *passim*) and larger sociocultural models and expectations of competent parenting practices and children's upbringing (see Caronia, Ranzani, 2022, 2023). Second, the pedagogical dimension of pediatricians' everyday (communicative) practices received little attention in both international and national literature (but see Caronia, Ranzani, 2022, 2023).

This paper aims to fill this gap by focusing on the interactional construction of "good parenting" in well-child visits. In particular, the single-case analysis of how a mother requests the pediatrician's advice about everyday baby management issues is illustrative of how parents in this corpus display their previous knowledge and competence about the topics submitted to the pediatrician's attention and, at the same time, acknowledge the pediatrician's expertise and professional role. In this way, when engaging in this discursive activity (i.e., seeking advice), parents display themselves as competent, knowledgeable, caring, and therefore "good parents".

In line with the phenomenological perspective that recognizes the crucial role of communicative practices for the collaborative constitution of local and social identities (Aronsson, 1998; Caronia, 2011; Raymond, Heritage, 2006; Zimmerman, 1998), the contribution focuses on the practices deployed by a mother to display *her* understanding of what

² "Well-child visit" is the term used by the American Academy of Pediatrics. In Italy, they are known as "visite di controllo-crescita" or "bilanci di salute"; they are typically carried out by general pediatricians at pediatric primary care clinics, Author's Note.

constitutes a "good" parent (for a similar approach, see among others Caronia, 2019; Galatolo, Caronia, 2018; Heritage, Lindström, 1998; Pillet-Shore, 2015). In other words, the analysis illustrates how parents implement and demonstrate their orientation to culturally-informed models of «doing being» (Sacks, 1984, p. 416) "good" parents.

1. *Epistemic and deontic gaps in doctor-patient interactions*

In the last decades, healthcare professions faced a progressive erosion of their epistemic and deontic authority (respectively, who has the ultimate right to know what, see Heritage, 2012a, 2012b; and who has the ultimate right to decide what about what, see Stevanovic, 2013; Stevanovic, Perakyla, 2012).

Several studies have shown how practices of accountability, i.e., the physician's need to justify his/her diagnostic reasoning and treatment prescriptions, have been gradually substituting the more authoritative "plain assertion" format (Peräkylä, 1998) that historically characterized the "voice of medicine" (Mishler, 1984). Concurrently, many studies have illustrated the pivotal role played by patients' contribution in shaping not only the local unfolding of the visit but even its outcomes (e.g., Gill *et al.*, 2010; Koenig, 2011; Stivers, 2007; Stivers, McCabe, 2021). This is particularly evident in pediatric visits, where parents increasingly display themselves both as competent and knowledgeable subjects (Hanell, 2017) – sometimes even challenging the pediatrician's diagnosis and prescriptions (Stivers, 2005, 2007) – as well as «surrogate decision makers» (Stivers, Timmermans, 2020, p. 63) for their children³.

However, if the so-called patient's (and parent's) empowerment turn – together with other factors – has curtailed physicians' authority (Halpern, 2004), recent studies investigating actual naturally occurring conversations in medical contexts revealed that epistemic and deontic

³ This (relatively) new involvement of parents in decision-making processes regarding their children's treatment plans can be considered as one possible consequence of broader sociocultural and historical changes investing contemporary western upper-middle-class families (see for instance the notion of «intensive parenting», Faircloth, 2014, *passim*, or «involved parenthood», Gigli, 2016, *passim*, my translation), where being a parent is more and more considered a life "project" and a "function" to exercise (Formenti, 2008; Gigli, 2016). *From now on, unless otherwise specified, footnotes are edited by this paper's Author, Editor's Note.*

imbalances between doctors and patients – to a certain extent inevitably – still persist (Pilnick, Dingwall, 2011; Stivers, Timmermans, 2020). Despite sharing the same macro-goal (i.e., taking care of the patient's health), doctors and patients experience an asymmetrical relationship mostly due to the differential distribution of relevant knowledge (i.e., biomedical vs. experiential knowledge) and to the social stratification of the participants' roles, namely the institutional role of the physician vs. the lay status of the patient. Correspondingly, they retain different control over the deontic domain: if doctors have the “power” and responsibility to prescribe treatments grounded on their expertise, patients (and/or caregivers) have control over compliance with doctors' recommendations.

This different distribution of epistemic and deontic rights impacts not only the outcomes of the visit, but also the (discursive) activities accomplished during the visit, such as asking, giving, and receiving advice.

1.1. *The epistemic and deontic asymmetries of advice: The case of well-child visits*

Epistemic considerations play a crucial part in framing the request, the delivery, and the reception of advice. A socially shared assumption underlying medical visits is that the physician can offer advice on medical and health-related problems relying on his/her expert knowledge, which is allegedly out of the realm of the patient. This assumption entails that – when engaging in sequences of advice – participants concurrently position themselves along an epistemic gradient (Heritage, Raymond, 2005); while the advice-giver physician saturates the more knowledgeable position (“K+”, Heritage, 2012a, 2012b), the advice recipient and/or seeker patient assumes the relative less knowledgeable position (“K-”, *Ibidem*). Advice sequences in medical interactions are also strictly related to deontic rights. Since advice-giving consists in «forwarding or promoting a possible future course of action» (Pilnick, 2003, p. 837) among alternatives, it gives the recipient room to choose and decide what to do. However, since it is provided by a doctor, the expert's advice acquires a normative connotation that prevents the recipient from easily ignoring or contesting it (but on parents' resistance to the pediatrician's advice see Caronia, Ranzani, 2023). For the above-mentioned reasons, scholars describe advice-giving, receiving, and seeking as delicate and face-threatening social actions (Heritage, Sefi, 1992; Heritage, Lindström,

1998, 2012; Shaw, Hepburn, 2013). As Fatigante and Bafaro put it, the physician's expertise-based authority «needs to be balanced with, on one hand, the entitlement s/he can claim in offering the advice and, on the other, the extent to which that advice impinges upon the freedom of the advice-recipient» (2014, p. 159).

Epistemic and deontic imbalances at stake in doctor-patient sequences of advice are even more evident in pediatric visits, where the management of knowledge asymmetries strictly intertwines with morally laden implications (Heritage, Sefi, 1992; Heritage, Lindström, 1998, 2012; Silverman, 1987; Stivers, 2007). Indeed, while receiving unsolicited advice clearly constructs the parent as "the one who does not know", asking for advice is not less morally implicative: it reveals a relative lack of knowledge or a certain degree of uncertainty regarding the more appropriate course of action to be undertaken. At the same time, as I contend, asking for advice displays parents' concern for their child's well-being, awareness of their possible incompetence, and sensitiveness to the pediatrician's epistemic and deontic authority on the matter.

2. *Data, methodology, and analytical procedures*

The study draws from a dataset of 23 video-recorded well-child visits involving two pediatricians and twenty-two families with children aged between 0 and 18 months. Participants written consent was obtained according to EU Regulation n. 2016/679 (GDPR 2016/679) and Italian law n. 196/2003⁴, which regulate the use of personal and sensitive data. For anonymity purpose, pseudonyms substitute any use of participants' name or other identifying information.

Data were transcribed and analyzed adopting a Conversation Analysis approach (Jefferson, 2004; Sacks *et al.*, 1974; Sidnell, Stivers, 2013), which is broadly used for the study of naturally occurring interactions in healthcare contexts (Barnes, 2019; Heritage, Maynard, 2006) and has proven to be well-suited for providing empirical basis for the design and implementation of medical and patient education interventions (see Antaki, 2011, 2013; Pino, Parry, 2019; Robinson, Heritage, 2014). Transcripts are presented in two lines: the original Italian transcript is followed by an almost literal translation in American English.

⁴ For full details on the abovementioned laws, see References, Editor's Note.

Advice seeking. To identify sequences of advice in the corpus (see also Caronia, Ranzani, 2022, 2023), I adopted Heritage and Sefi's (1992) definition, i.e., the interactional practice through which the professional confirms, «describes, recommends or *otherwise forwards* a preferred course of future action» (p. 368, my emphasis) to the client. After identifying the instances of pediatricians' advice giving (N=145), I distinguished between advice delivered by the pediatrician *without any request* by the parents (N=67) and advice *requested* by the parents (N=78), on which this paper focuses.

For reasons of space, in the next section I analyze a «single fragment of talk» (Schegloff, 1987, p. 101) where a mother seeks the pediatrician's advice on a feeding practice. Even though parents in this corpus design their requests for advice in different ways (e.g., by asking to confirm a proposed future course of action or an already undertaken course of action, by reporting a treated as problematic conduct or the intention to undertake a certain future course of action), the excerpt chosen for analysis is illustrative of a recurrent phenomenon in this corpus: when seeking advice, parents interactionally construct themselves as “good” parents.

3. Analysis: The interactional construction of the “good” parent

The following example shows how, despite downgrading her right to “know and decide” by the very act of seeking the pediatrician's advice, a mother stages herself as a competent, knowledgeable, and caring parent.

Ex.1 - VA_5_11.11.19 (7.12 – 8.06)

P=pediatrician; M=mother

- 1 M io (.) ho preso
I (.) have taken
- 2 M senza la sua:: (.) autorizzazione=
without you::r (.) authorization=
- 3 M =ma (.) >ho guardato le dat-<
=but (.) >I've looked at the dat<

- 4 M l'Aptamil tre
the Aptamil three⁵
- 5 M perché [ormai siam] vecchi
because [by now we are] old
- 6 P [^si::,]
[^ye::s,]
^((looking at M))
- 7 M ve[ro?]
ri[ght?]
- 8 P [ce]rto,=
[su]re,=
- 9 M =>mh<. ((nodding))
- 10 M devo ancora iniziare
I still have to start
- 11 M però [ho preso il tre].
but [I've taken the three].
- 12 P [eh lei (.) l'an]no
[eh she (.) turns]
- 13 P lo comp[^]ie:=
one ye[^]a:r=
^((looking at M))
- 14 M =esatto
=exactly
- 15 P [il quattordici,
[the fourteenth, ((looking at the computer))

⁵ "Aptamil 3"[®] is a kind of fortified formula milk, specific for children aged 1 to 2 years.

- 16 M [>infatti devo ancora iniziare <
[>indeed I still have to start <
- 17 M perché mi: mi attengo alle:
because I: I comply with the
- 18 M le (.) indicazioni.
the (.) recommendations.

At the beginning of the excerpt, M tells P that she has bought the Aptamil 3[®] for the baby. This information is delivered in a quite interactionally elaborated way in terms of the epistemic and deontic work carried out by M. First, in line 1, M initiates her informing trajectory by stating that she has taken something.

However, rather than completing the turn with the direct object at issue, she inserts a further layer of information, that is she did not ask for P's permission (line 2). In this way, M projects the incoming information as something possibly problematic and, at the same time, acknowledges P's epistemic and deontic authority on the matter (note the use of the deferential pronoun "*suo*", in Italian, line 2). Immediately after, M provides an account for her initiative undertaken without consulting P ("but I've looked at the date", line 3).

Through this account, M a) treats her action as something based on her previous first-hand knowledge and not as grounded on a mindless naïve base, and b) downgrades the potentially problematic nature of having entered P's domain of expertise (i.e., by knowing and deciding by herself what is the best thing to do for the baby). The direct object is finally uttered in line 4, where M states that she has taken the formula milk "Aptamil three" (a kind of formula milk for children aged 1 to 2 years). By stressing the word "three" (line 4), M evokes her knowledge concerning what kind of formula milk is more suitable for her own child. Immediately after, she continues her telling by providing an additional account that further constructs herself as a knowledgeable and competent mother who knows the culture- and age-specific babies' feeding practices ("because by now we are old", line 5).

Furthermore, knowing what age her child is, belongs to her experiential epistemic domain: in other words, it is something she is entitled to know with certainty. After P's overlapping confirmation in line 6, M asks for P's advice and final validation through a request for confirmation

("right?", line 7). In this way, M recognizes P's epistemic and deontic authority but still, in part, displays her ones (on the different epistemic stances embedded in different types of questions, see Sidnell, 2012). Then, in line 8, P provides an upgraded confirmation ("sure"), to which M aligns ("mh", see also the nodding, line 9).

Interestingly enough, despite the sequence can be considered technically closed, M carries on with her telling and adds another piece of information: she has not given yet the Aptamil three to the baby (line 10). Immediately after, M repeats again the kind of Aptamil milk she has taken ("but I've taken the three", line 11). This latter unit is produced in overlapping with P's turn in line 12, where P provides what can be heard as an account for her previous confirmations ("yes", line 6, and "sure", line 8): the baby is turning one year the fourteenth (meaning the fourteenth of November, so three days after the visit), so it is ok that M has bought the Aptamil 3°. In this way, P a) ratifies M's conduct, thus re-establishing her authority on the matter, and b) contributes to transmitting culturally shared models of babies' feeding practices. Note that in line 16 M repeats again that she has not yet started feeding the baby with Aptamil 3°, and then she accounts for this decision by explicitly stating that she follows the recommendations ("because I comply with the recommendations", lines 17-18).

In doing so, M continues her work of constructing herself as a caring mother who retains the epistemic and deontic rights to know and decide what is the appropriate age- and culture-specific feeding practice for her baby. Concurrently, her competence as a "good" mother resides also in acknowledging the pediatrician's expertise and in following meticulously and faithfully the general normative rules.

4. *Concluding remarks*

The analysis has illustrated how, while asking for the pediatrician's advice, a mother displays herself as a competent, knowledgeable, caring, and therefore "good" parent (see Heritage, Sefi, 1992; Heritage, Lindström, 1998). Despite downgrading the right to "know and decide" by the very act of seeking advice (thus projecting a more knowledgeable status to the pediatrician), through the different ways parents in this corpus design their requests for advice (e.g., by asking for confirmation or by reporting a problematic state of affairs) they make interactionally relevant their expertise so as to avoid displaying a relative lack of knowledge or competence.

In this way, parents not only do epistemic (and deontic) but also moral work: I advance that while asking for a piece of advice can be conceived of as an activity displaying a lack of knowledge or need for assistance, the forms through which parents ask for advice rather index their being concerned by and informed about their child's well-being and caring practices. Moreover, at least in these visits, doing "being a good parent" is also accomplished through the acknowledgment of the pediatrician's epistemic and deontic authority and socially sanctioned professional role.

To conclude, pediatrician-parent interaction can be considered a site of «informal education» (Tramma, It. Ed. 2009, *passim*, my translation) where cultural models of good parenting, appropriate caregiving practices, and children's well-being are both enacted by the parents and ratified by the expert. Far from being a mere "biomedical knowledge sounding box", the pediatrician acts as a culture-maker, and therefore his/her voice is profoundly *pedagogical*.

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Appendix

Jeffersonian Transcription Conventions

- (.) = falling intonation
- (?) = strong rising intonation
- (,) = slight rising intonation

- [...] = Overlap, simultaneous talk
= Latching = absence of a silence of a normal length or to extend ones turn
- (0.5) = Silence, measures in 10th of a second
(.) = small pause under 2 10th of a second
- Underlining = emphasis
CAPITAL LETTERS = loud talk
>fast< = increased speed
<slow> = decreased speed/stretch
Colo:::ns = stretch the prior sound
- = cut-off
((...)) = description of an action
(.....) = uncertain of what was said

Homeworking, Care Work and Gender-Based Violence The Condition of Women and Mothers during Covid-19 Domestic Confinement

*Francesca Dello Preite*¹

Abstract

The Covid-19 pandemic, like any social event characterised by the loss of securities and balances, has caused a worsening of the living conditions of women who, suddenly, have experienced the expansion of many problems that already existed before the sanitary emergency, including: job insecurity, the increase in family tasks and loads, and the exacerbation of domestic violence. The contribution, taking into consideration some recent documents and studies published at an international and national level, attempts to analyse these issues and their consequences from a pedagogical and gender perspective, highlighting both the political strategies designed to contrast the forms of discrimination still suffered by women and the crucial role that pedagogy plays in the promotion of educational paths and practices aimed at implementing and consolidating gender equality.

Keywords: Pandemic, women, work, family loads, violence.

Abstract

La pandemia da Covid-19, come ogni evento sociale caratterizzato dalla perdita delle sicurezze e degli equilibri esistenti, ha causato un peggioramento delle condizioni di vita delle donne che, in modo repentino, hanno sperimentato l'ampliarsi di molte problematiche già esistenti prima dell'emergenza sanitaria tra cui: la precarietà lavorativa, l'accrescimento dei compiti e dei carichi familiari e l'inasprirsi delle violenze domestiche. Il contributo, prendendo in considerazione alcuni recenti documenti e studi prodotti a livello internazionale e nazionale, cerca di analizzare tali problematiche e le loro conseguenze in ottica pedagogica e di genere, evidenziando sia le strategie predisposte per contrastare le discriminazioni che le donne continuano a subire, sia il ruolo cruciale che la pedagogia ricopre nella promozione di percorsi educativi volti a implementare le life skills necessarie per contrastare le disuguaglianze e consolidare la parità tra i generi.

Parole chiave: Pandemia, donne, lavoro, carichi familiari, violenza.

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Introduction

The last two years of the new Millennium were marked by the health emergency, which has profoundly altered the main arrangements underlying the functioning of social communities. To counteract the spread of the virus and reduce its dramatic consequences, the entire world population had to suddenly change its daily habits and routines, facing problems of various kinds and magnitudes (United Nations, 2021).

For months, distancing and repeated lockdowns have been the main “regulators” of social life and, as it has been extensively documented in national and international the scientific literature, difficulties have mainly affected the most fragile groups, aggravating their pre-existing conditions. It is sufficient to mention the fact that on the health front, the repercussions regarded most of all the elderly and the immunocompromised (as far as virus infections are concerned), but also adolescents who, deprived of their relational spaces and times, have been showing a growing discomfort in the sphere of mental health, with a worrying increase of depression cases, self-harming acts, and even suicide attempts (World Health Organization, 2022; Department for Family Policies, Istituto degli Innocenti, 2021).

Moreover, in terms of employment, the greatest difficulties have fallen on young people, women and foreigners: individuals who were the first to be affected by precariousness, or even by the loss of their employment and related economic benefits (International Labour Organization, 2021; Ministry of Labor et al., 2020). There is no doubt that the pandemic has globally amplified the existing severe social inequalities. As argued by Liu Zhenmin, Under-Secretary-General for the United Nations:

The pandemic has exposed and intensified inequalities within and among countries. The poorest and most vulnerable people have a greater risk of becoming infected by the virus, and bear the brunt of the economic fallout. The crisis has threatened the livelihoods of 1.6 billion workers in the informal economy. The collapse of international tourism disproportionately affects small island developing States. And vast inequities exist in vaccine distribution: as of 17 June 2021, around 68 vaccines were administered for every 100 people in Europe and Northern America compared with fewer than 2 in sub-Saharan Africa (United Nations, 2021, p. 3).

In view of these premises, the paper intends to develop an in-depth study of the repercussions that anti-viral actions (first and foremost, confinement within the home) produced on women's life and the obstacles they experienced in both public and private contexts. In particular, an analysis will be conducted starting from these questions: have social policies been able to respond to the new female demands, which even in "ordinary times" struggled to obtain proper recognition? What strategies have been planned in our country to support women who have lost their jobs, or those that during smart-working had to take care of their children and their education, up to those women who, within the walls of their home, have been the victim of gender-based violence? Has the education field been able to take on these new needs, not simply by limiting its interventions to the "here and now" but looking toward a foresighted change able to provide full citizenship to that half of the population that still feels the effects of a long-lasting patriarchal and misogynistic culture? Starting from these promptings, the contribution proposes some reflections of a pedagogical nature with the intention of highlighting all those educational actions and dynamics that can actively and responsibly foster a culture based on respect and equal opportunities.

1. *Pandemic, women, labour market and family burdens. "An emergency within an emergency"*

A first picture of the situation women faced during the pandemic can be drawn from "The Sustainable Development Goals Report" published by the UN in 2021, which states:

The social and economic impacts of the COVID-19 pandemic have adversely affected progress towards gender equality. Violence against women and girls has intensified; child marriage, on the decline in recent years, is expected to increase; and women have suffered a disproportionate share of job losses and increased care work at home. The pandemic has highlighted the need to act swiftly to address pervasive global gender inequalities. Women have played a central role in the response to COVID-19, as frontline health workers, care providers, and as managers and leaders of recovery efforts. Yet they remain underrepresented in leadership positions, and their rights and priorities are often not explicitly addressed in response and recovery measures. The crisis presents an opportunity to re-shape and rebuild systems, laws, policies and institutions to advance gender equality (ivi, 2021, p. 36).

The Report focuses on an analysis of the goals of the Agenda 2030 in relation to Covid-19, and at Goal 5 “Gender equality” highlights that in the world, and especially in the poorest countries and contexts, women, girls and little girls have become one of the main targets of the pandemic crisis. About one in three women (736 million, including girls and underage girls) have experienced physical and/or sexual violence predominantly by their partners or a man in the household. School closures, economic shock, and the interruption of reproductive health services have amplified the risk of early marriages for girls by predicting an increase of 10 million cases over the next 10 years. The amount of time women have to devote to childcare has significantly risen (mainly due to the closures of schools and childcare centres), a situation that has forced many mothers with children under the age of 6 to leave their jobs.

Generally speaking, the critical issues observed worldwide also reflect the conditions manifested in our country, where women, even before the emergency, were already experiencing a long-standing delay on the gender equality and equal opportunity front.

In Italy, the gender gap is certainly not a recently born issue. We can rather see it as the outcome of a long and deep-rooted imbalance in the management of power and resources between men and women (Beard, 2018; Bourdieu, 1998; Brogi, 2022; Cantarella, 2019).

Work instability, increased family burdens and domestic violence: we can define these elements as the three big wounds that the emergency has unfolded in the lives of Italian women (and not only). Starting from an analysis of what happened in the working sphere, the darkest year was definitely 2020 and, in particular, the month of December, which ended with the loss of 101 thousand positions of which 99 thousand were held by women (Istat, 2021a). The “Rapporto annuale 2021. La situazione del Paese” by Istat shows that those who suffered the most from the backlash were women with lower educational qualifications, with children under the age of 6 and residing in the South and Islands. As mentioned within the same document:

The shock that the crisis brought to the labour market has exacerbated the interaction between the level of education and family roles. Employment performance is dramatic for less-educated women who are also mothers of children under 6, with the rate falling in 2020 to 26.4 percent for mothers with low education compared with 76 percent for college graduates with young children; the corresponding rates are 13.9 and 66.7 percent in the South. Women living in families with parents, which is to say in the role of daughters, also present a relatively difficult situation, in particular when they have low education: their

employment rate was 29.7 percent at national level and 18.1 percent in southern regions (Istat, 2021b, p. 151).

Women's employment situation, which is still very uncertain and precarious despite the slight recovery recorded in 2021 (Istat, 2022), is configured as closely related to another persistent issue concerning the time women spend on domestic work and caring for family members. In this regard, the research "Prima, durante e dopo il Covid: disuguaglianze in famiglia" (Del Boca et al., 2020) highlighted that the closure of kindergartens and schools has primarily influenced mothers with negative effects. In detail, the study was carried out on a sample of 1250 employed women and wanted to investigate how the lockdown has caused changes on the sharing of family loads and roles within couples. The data analysed showed that 68% of the participants spent more time doing housework than before; 29% spent the same amount of time; and only 3% spent less time than before. For what concerns the answers given about partners, it can be observed that 55% of them did not change their schedule at all, 6% decreased the time spent doing house chores and 40% incremented it. Looking at issues related to family care and, specifically, to childcare, it is shown that 61% of working mothers saw an increase in their commitment, 34% maintained their previous standards and only 5% reduced them; whereas for partners, it is noted that 51% increased the time they devoted to their children, 45% did not change their habits, and only 3% reduced this commitment. As scholars state, gender asymmetries in family settings persist and it will take a long time to overcome them. In particular, what contributes to the persistence and durability of this phenomenon is the lack of an adequate network of early childhood socio-educational services that can support families, and especially mothers, in their daily routine. In Italy, in the educational year 2019/2020, only 14.7% of children between the age of 0 and 2 years attended a nursery (Save the Children, 2022). In the past decades, Italian policies and investments on childcare services have been almost absent although research strongly argues that high-quality education in the earlier years of life can have a marked effect on adult life outcomes, as well as foster mothers' employment and thus contribute to the reduction of the gender pay gap².

² On the issue, the European Commission reaffirmed that «Public or subsidized ECEC is a key facilitator of parental employment outcomes. Research has shown that the provision of public or subsidized ECEC is a key facilitator of parental employment outcomes, particularly for mother» (European Commission, 2022, p. 6).

Exacerbated by the pandemic, women's employment, gender pay gap and work-life balance remain three major challenges for the future, not just for women, and specifically for mothers, but for the whole country. As the President of the Republic himself, Sergio Mattarella, declared at the Stati Generali della Natalità (General States of Natality):

The issue is particularly topical for women who still face too many impediments and difficulties in achieving full equality, and an essential contribution may come from reconciling family care time and work time. This issue also concerns businesses and their social function. No opposition can exist between professional commitment, work activity and the choice of motherhood. The Republic cannot be deprived of the talents of women's full participation. Work is not what keeps women away from motherhood: women are kept away because of the deficiencies in the support given to mothers. Family policies are an essential contribution to the balanced and sustainable development of the country (Mattarella, 2022).

2. Domestic confinement and gender-based violence. Living h24 with your perpetrator

While the virus paralyzed economic activities and people's mobility, it failed to restrain the gender-based violence that everyday hurts girls and women in every part of the world. As the 2011 "Council of Europe Convention on preventing and combating violence against women and domestic violence" asserts:

a. "violence against women" is understood as a violation of human rights and a form of discrimination against women and shall mean all acts of gender-based violence that result in, or are likely to result in, physical, sexual, psychological or economic harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life;

b. "domestic violence" shall mean all acts of physical, sexual, psychological or economic violence that occur within the family or domestic unit or between former or current spouses or partners, whether or not the perpetrator shares or has shared the same residence with the victim (Council of Europe, 2011, p. 3).

For centuries, the abuse perpetrated by men on women appeared as

a “natural behaviour” acted and suffered without any hesitation because it was thought to be closely related to the biological dimension of the sex they belonged to. Men, constantly finding themselves in a position of greater power, have believed that subordinating women from an early age through all forms of coercion was their own prerogative and should not to be questioned (Ulivieri, 2014). Conversely, the female gender has introjected the idea that inferiority, submissiveness, as well as meekness and gentleness, were unchangeable biological characteristics, seamlessly transmitted from one generation to the next. These pseudo-truths, placed at the foundation of patriarchal culture, have made violence against women appear as a permissible and legitimate behaviour, even from a legislative perspective. In this regard, it is significant to recall that the “delitto d’onore” (honour killing), sanctioned in 1930 by the Rocco Code (Art. 587 of the Penal Code) and abolished only in 1981 by Law 442. The same applies to the case of “rehabilitating marriages” (Article 544 of the Penal Code), according to which «For the crimes stipulated in Chapter One and Article 530, the marriage, which the offender contracts with the offended person, extinguishes the crime, even with regard to those who are concurring in the same crime; and, if there has been a sentence, its execution and penal effects cease». For far too long in family and public contexts, women have remained hostage to a misogynistic culture that has deprived them of their freedom and considered them as male property.

It has only been a few decades since protecting women victims of violence became a principle in our legislative system. The latest legislation, introduced to fight cases of violence against women, is the so-called “Codice rosso” (Red Code) (Law N. 69 of 2019), which provides a “fast track” for investigations and harsher punishments for crimes committed in family settings or within cohabiting relationships. In particular, the law introduces four new crimes into the Criminal Code: the crime of illicit dissemination of sexually explicit images or videos without the consent of the persons depicted (revenge porn); the crime of deformation of the person’s appearance by permanent facial injury; the crime of coercion or inducement to marriage; and the violation of restraining order from the family home and prohibition from proximity to places frequented by the offended person. Unfortunately, despite the intentions, this Law has been of little benefit in countering the cases of domestic violence exploded during the pandemic. The rules imposed by social distancing forced the entire population to be confined within the domestic sphere, they increased the amount of time that members of the same family had to live together and, given that most abusive men possess “the keys to

the house”, this fact further exposed women to intrafamilial violence (Abramson, 2020; Campbell, 2020; Kumar, 2020).

According to ISTAT statistics (2021c), in 2020 there were more than 15,000 women who started their path out of violence through a specialized centre (CAV – Centro Antiviolenza) and among them about 13,700 (90%) sought support for the first time during the pandemic, despite the fact that 74.2% (about 7,700) claimed to have experienced violence prior to the health emergency. In terms of demographics, victims belong to all age groups, and in terms of citizenship, 72% said they were Italian. Going into the type of violence enacted by perpetrators, the report shows that the most frequent violence was psychological, followed by physical violence, threats and economic violence; all harassment that in 10.5% of cases combined and generated abuses of different form and severity.

As Daniela Loi and Flavia Pesce from the Institute for Social Research (2021) emphasized, this health emergency has substantially amplified the already existing criticalities associated with women’s difficulties in accessing territorial services, but also in finding temporary accommodation facilities; in addition to these impediments, there are also organizational and coordination problems faced by specialized services and the lack of sufficient resources to cover the expenses arising from Covid-19.

3. Measures, strategies and actions to contrast gender-based violence. The goals of the National Strategy 2021-2026

In July 2021, while the pandemic continued to be a focus in Italian political agendas, the Department for Equal Opportunities, under the Presidency of the Council of Ministers, released the first «National Strategy for Gender Equality», a document aimed at «giving the country a clear perspective and a definite path towards gender equality and equal opportunities, to clearly outline a system of integrated policy actions in which concrete, defined and measurable initiatives will come to life» (Presidency of the Council of Ministers, 2021, p. 2). In the document, policy-makers, taking up the five domains that the European Institute for Gender Equality (EIGE) uses every year to draft the Gender Equality Index³, map out, for each of the five domains, the interventions to be

³ The five domains that the EIGE every year uses to draft the Gender Equality Index

taken and set the relevant indicators and targets needed to guide government action on the issue and monitor the effectiveness of the interventions enacted. For the purposes of this work, although we consider all of the Strategy's domains to be of utmost importance, it is considered pertinent to focus on the "skills" as it is closely related to the educational and formative reflections that will be outlined in the final part of the paper.

Specifically, in the section devoted to "Context Analysis", it is highlighted that our country ranks only 12th in Europe in relation to participation in education, achievements and segregation in academic paths. What penalizes us the most is the phenomenon of educational segregation that sees girls and boys undertaking their high school and university paths asymmetrically. In fact, regardless of the fact that girls achieve, on average, higher levels of education and training than their male peers, there is a strong tendency for them to be concentrated in the disciplines from the fields of teaching, psychology and law while, as far as STEM disciplines are concerned, the scenario is reversed as it shows a male prevalence. Consequently, these largely unbalanced trajectories contribute to increase horizontal segregation (Iori, 2014) and gender pay gap, two elements that in the workplace penalize, as we know, the female gender. A similar process is also found in academic careers where only 11% of full professors are women. Based on this analysis, the paper identifies indicators and targets to look at in order to reverse the trend. First, there is the need to promote equal development of mathematical and scientific skills in order to reduce the gender gap that persists in these disciplinary fields. The targets to be measured, therefore, are «the percentage of female students in the 5th grade who do not reach the minimum proficiency levels in mathematics [...]; the percentage of female students enrolling in STEM degree programs» (Presidency of the Council of Ministers, 2021, pp. 14-15). The second goal is to raise female participation in academia, assuming as a target «the percentage of female full professors over the total [...]]» (*ibidem*). Finally, this is followed by «the goal of increasing the digital, computer and communication technology skills of women» monitoring «the percentage of women with "above average" digital skills out of the total female population» (*ibidem*).

The last section of the Strategy, reserved for "measures", is composed of a list of initiatives to be put in place to qualitatively and quantitatively improve the "skills" domain, and among these:

are: work, income, skills, time, power.

- to revise the requirements for textbooks and teaching materials in order to incentivize publishers to promote non-stereotyped products that give equal visibility to genders;
- to introduce guidance and reinforcement pathways in STEM disciplines and strengthen curricular programs in mathematics;
- to establish some forms of support for student-mothers in college;
- to introduce gender quotas in university personnel's evaluation committees;
- to organize public and cost-free after-school courses on digital and computer literacy;
- to provide mandatory training for teachers on gender mainstreaming and gender stereotype, especially in STEM and high-segregation subjects.

The Strategy, as a whole, turns out to be a proactive, coherent and innovative tool since, starting from the problems that our country is still facing, it advances concrete suggestions and targeted indications to strengthen gender equality, especially in the areas where inequalities and discrimination are still pervasive. At the moment, the risk at hand is that the document will remain, as it has already happened with other devices (think of all the indications contained in the Istanbul Convention), only on the level of good intentions and promises. This conjecture must be absolutely avoided, and it can be done by incentivising and supporting all the actors involved (from institutions to the third sector) to synergistically achieve the objectives of their own pertinence.

4. The contribution of pedagogy and gender education to support present and future women

The pandemic crisis has clearly demonstrated that women's rights and achievements continue to be characterised by a high level of precariousness that, especially in vulnerable and unpredictable situations such as those arising during Covid-19, facilitates the reappearance of violence and discrimination thought to have been overcome. This consideration should, therefore, serve to not let down our guard and to maintain a vivid and constant commitment to women's empowerment as a fundamental goal for the sustainable development of the entire Earth's society (UN, 2015).

So how can pedagogical reflection contribute to mending the gen-

der inequalities created by the pandemic? What educational devices can provide re-generative and transformative support for all those women and mothers who have personally experienced job insecurity, family work overload and domestic violence during social distancing? How can we implement, from a preventive perspective, the culture of respect and equal opportunities starting from the early ages of life?

In the awareness of having to significantly limit the current analysis, it is considered appropriate to focus this last reflection on two intervention perspectives that, although seem to be distinct one from the other, are strongly interconnected: the first concerning the implementation of life skills that, at present, can support women in regaining confidence in their abilities and in making themselves active protagonists of the work and family challenges that await them; the second relating to equality education programmes to be promoted in educational and school contexts in order to contribute to the formation of critical and plural thinking and to the construction of intergenerational relations «open to mutual aid and supportive collaboration» (Loiodice, 2020, p. 7).

With regard to the first perspective, it emerges the need to accompany and guide women towards those formal, non-formal and informal education paths aimed at reactivating in them the 'desire' to start planning their lives again, to become more receptive to new possibilities (Bruscaglioni, 2007; Dato, De Serio, Lopez, 2007) by exploiting the talents they possess (Margiotta, 2018) and enhancing proactive coping strategies. The latter, in particular, are indispensable for anticipating critical events and reducing their negative effects (Aspinwall, Taylor, 1997), for thinking ahead, for taking responsibility and making conscious choices both at work and at home. The processes of coming out of difficult and complex phases, in which the person may have felt his or her own efficacy competencies weakened, require a strong emotional and cognitive investment in regaining self-esteem, empowerment and all those life skills that allow one to take care of the self and then to take care of others and of the world. The objective is, therefore, to urge women and mothers who have experienced the pandemic with criticality, to acquire the skills that allow them to 'navigate their way through a myriad of complex changes' (Boffo, Iavarone, Nuzzaci, 2022, p. 3) effectively managing the unfolding situations and confidently planning those that will follow. Over the last two years, many organisations and associations operating online and, in the territories, have moved in this direction. Starting from the most tangible and explicit needs of women, they have proposed a multidimensional and multidirectional

training programme capable of providing resources both to deal with the most pressing and material problems and to restore confidence in that deep part of the self that has been strongly affected by the adversities exacerbated by the pandemic.

Considering the second perspective, educating children and young people to understand that each person – regardless of sex, gender or any other difference – should be respected, valued and allowed to make their own choices is the first step towards a democratic and inclusive society.

It is precisely in the encounter and equal confrontation with otherness that each individual becomes aware of himself or herself, of his or her abilities and limitations, and learns to interact with the world, recognising that respect for others is the first educational device to be used to prevent and combat violence, discrimination and inequality. However, in order to guide the new generations to actively build a culture of respect and equality, it is necessary, first and foremost, to train educators and teachers in this direction both in basic and in-service training. As the National Strategy 2021-2026 highlights, educators and school staff need to be solicited to recognize in their own behaviour, as well as in the way they think and teach, the presence of sexist clichés that, if not critically recognised, obstruct the development of educational interventions aimed at promoting the full appreciation of differences and self-determination in growing individuals. It is therefore necessary to offer professional training that, starting from the deconstruction of gender stereotypes, aims at the acquisition of transversal skills of a reflective, linguistic, planning, methodological and didactic nature (Dello Preite, 2019). Thanks to these skills teachers can construct curricula and establish gender-oriented educational settings.

Despite all its critical issues, the health emergency has taught us that in times of uncertainty and precariousness, human rights, which are at the foundation of democracy, are likely to be unjustly undermined and obliterated, causing discomfort and vulnerability, especially at the expense of the most fragile social groups. Therefore, seeking to draw benefits from this dramatic experience, it is time to «change our path» (Morin, 2020) and to target an education that makes equality and inclusiveness its «reference briccola» (Trisciuzzi, 1995), and of dialogue and confrontation its pedagogical devices to promote the respect and appreciation of differences.

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Femmes (monoparentales) et le mal-logement au Luxembourg. Défis pour l'inclusion sociale

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Résumé

Dans la perspective de l'inclusion sociale, l'article se concentre sur la problématique des femmes accueillies seules ou avec leurs enfants dans un foyer d'urgence pour femmes. L'analyse se base sur les données d'un groupe de discussion et d'un entretien d'expert avec des professionnels de l'action sociale. Les résultats sont issus du projet de recherche SOHOME (Social Housing and Homelessness) à l'Université du Luxembourg. Ils mettent en évidence les multiples facteurs qui rendent la trajectoire des femmes particulièrement vulnérables dans la crise de logement au Grand-Duché de Luxembourg. La discussion se centre sur les incohérences émergentes dans l'accompagnement de la personne dans le but de promouvoir son inclusion sociale.

Mots clés: femmes (monoparentales), foyer d'urgence, inclusion sociale, logement, travail social.

Abstract

Dal punto di vista dell'inclusione sociale, l'articolo si concentra sul problema delle donne accolte da sole o con i loro figli in una casa di emergenza per le donne. L'analisi si basa sui dati di un focus group e su un'intervista di esperti con professionisti dell'azione sociale. I risultati provengono dal progetto di ricerca di SOHOME (Social Housing and Homelessness) all'Università del Lussemburgo. Evidenziano i molteplici fattori che rendono la traiettoria delle donne particolarmente vulnerabili nella crisi abitativa nel Gran Ducato del Lussemburgo. La discussione si concentra sulle incongruenze emergenti nell'accompagnamento della persona al fine di favorirne l'inclusione sociale.

Parole chiave: donne (singolo-parente), casa di emergenza, inclusione sociale, alloggio, lavoro sociale.

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1. *Introduction*

Le concept de l'inclusion sociale, comme celui de l'exclusion sociale s'applique de plus en plus dans le contexte socio-politique de la vulnérabilité (Davey, Gordon, 2017). L'inclusion sociale peut être définie comme un processus permettant aux personnes en situation de vulnérabilité matérielle et sociale d'avoir accès aux droits humains fondamentaux d'une vie décente (Bouquet, 2015). Dans cette perspective, nous pouvons citer l'exemple du REVIS, le revenu d'inclusion sociale, au Luxembourg. En 2018, le REVIS a remplacé le revenu minimum garanti et règle les multiples situations de vie nécessitant des revenus sociaux (Mémorial, 2018) afin de pouvoir mener une vie autonome dans la société. L'inclusion sociale contient l'idée de la participation entière mais inconditionnelle à tous les aspects de la vie, notamment éducatif, social, culturel et économique (Bouquet, 2015; Davey, Gordon, 2017). Dans cette définition, la participation se réfère plutôt à la personne concernée et moins à la complexité du processus social de l'inclusion (Davey, Gordon, 2017).

La présente contribution se concentre sur la problématique des femmes accueillies seules ou avec leurs enfants dans un foyer d'urgence pour femmes et leurs chemins d'inclusion sociale. D'abord, nous introduisons le projet de recherche (SOHOME 2019-2023) qui a permis d'étudier les difficultés liées au logement au Luxembourg. Par la suite, nous caractérisons les situations de vie des femmes mal-logées. Puis, nous nous consacrons aux aides proposées en foyer d'urgence pour femmes et au-delà de ce séjour pour enfin refléter les défis rencontrés dans l'intervention sociale et les incohérences par rapport à l'inclusion sociale. Enfin, quelques perspectives sont élaborées pour le travail social, pour le contexte socio-politique et pour le domaine de la recherche en éducation familiale liée à l'intervention sociale.

2. *Contexte et méthodologie*

Le projet SOHOME (Social Housing and Homelessness) poursuit des questions de recherche liées aux personnes, ici les femmes (monoparentales), en difficulté de logement au Grand-Duché de Luxembourg. Le projet est soutenu par le Fonds National de la Recherche Luxembourg. Il explore les offres d'aide, les défis et les pistes de solution dans le champ du travail social et dans la perspective des intervenants sociaux. Deux questions précises guident cette partie du projet de recherche :

1) Qu'est-ce qui caractérise les femmes en difficultés de logement au Luxembourg?

2) Quelles sont les offres d'aide du travail social et les défis rencontrés face aux personnes accueillies en foyer d'urgence pour femmes?

La méthodologie de recherche est qualitative et repose sur la concertation de nombreux acteurs professionnels par le biais des entretiens individuels et des groupes de discussion. Concrètement, six domaines d'intervention sociale ont été retenus pour le projet SOHOME, à savoir le travail de rue, l'office social, le foyer d'enfants et le logement encadré pour jeunes adultes, l'accueil d'urgence pour femmes, l'accommodation urgente et de court terme ainsi que l'approche du logement d'abord (Housing First). Un groupe de discussion a été organisé pour chaque domaine d'intervention sociale ou socio-éducative afin de mieux connaître la perspective des professionnels sur la population prise en charge par leur service et sur leurs pratiques et défis professionnels concernant la problématique du logement.

Au Luxembourg, cinq associations offrent l'accommodation et l'accompagnement en foyers d'urgence aux femmes, filles et femmes avec enfants en détresse. Des travailleurs sociaux de trois des cinq associations ont participé au groupe de discussion. De plus, une directrice d'une des trois associations a été interviewée individuellement. La collecte des données s'est déroulée en été 2020.

3. *Femmes en difficultés de logement*

Pour Bernard (2007), les femmes sont davantage plus exposées au risque du mal-logement que les hommes, empreint de l'écart salarial toujours présent. En conséquence, le risque de pauvreté touche davantage les ménages monoparentaux, toujours majoritairement composés d'une femme avec enfant(s). Pour Finfgeld-Connett (2010), la pénurie croissante de logements abordables avec l'augmentation simultanée de la pauvreté (Meadows-Oliver, 2003) d'un côté et les problèmes de violence domestique, de comportements d'attachement ambigus, de santé mentale ou de toxicomanie de l'autre côté contribuent aux difficultés de logement des femmes. De multiples facteurs interconnectés favorisent finalement le mal-logement de la femme.

Pour Baptista (2010), les femmes forment un groupe vulnérable spécifique dans le domaine de la recherche sur le sans-abrisme. La forme typique du mal-logement s'exprime dans un sans-abrisme «caché»,

c'est-à-dire les femmes trouvent majoritairement d'autres solutions pour se loger que d'entrer dans le système de protection sociale, comme par exemple s'installer à court terme chez des amis. Lors de l'entrée dans un foyer pour femmes, celles-ci ont généralement déjà expérimenté les formes alternatives du sans-abrisme (Meadows-Oliver, 2003).

Au Luxembourg, les femmes accueillies aux foyers d'urgence sont âgées entre 35 et 45 ans en moyenne. Par rapport aux études internationales, les femmes sont davantage plus jeunes et présentent un arrière-plan migratoire (Batista, 2010), ce qui se conforme seulement au niveau de l'aspect migratoire au Luxembourg. Dans la majorité des cas, les femmes sont confrontées aux différentes formes de la violence domestique, c'est-à-dire surtout aux forces physiques et aux privations. Elles vivent dans une relation de dépendance financière de leur partenaire et l'histoire familiale est fréquemment difficile, c'est-à-dire il n'y a plus de contact ou plus d'entente avec les membres de la famille élargie (Finfgeld-Connett, 2010). Cela favorise qu'elles se trouvent dans une situation d'isolement social. En cas de relations entretenues, la famille élargie n'a souvent pas les moyens de venir en aide en matière du logement, soit par manque d'espace, soit par restriction de bail en logement social. Les femmes sont de toute nationalité, aussi bien luxembourgeoise qu'étrangère. Néanmoins, deux tiers des femmes accueillies dans les foyers d'urgence pour femmes au Luxembourg ont une nationalité de pays hors de l'UE et cette tendance ne cesse d'augmenter. Concernant le revenu des femmes, la majorité des femmes n'a pas de travail ou se trouve dans un contrat de travail instable. En conséquence, elles n'ont pas ou peu de revenu ou bénéficient seulement des revenus sociaux. Il arrive même de retrouver des femmes sans revenu, tandis qu'elles ont bien le droit de bénéficier du REVIS. Les femmes avec un contrat de travail, souvent dans le secteur du nettoyage, sont salariées pour 15 ou 20 heures de travail par semaine, même en travaillant bien plus, mais sous contrats déterminés. La précarité de travail favorise la précarité de logement. Ces conditions rendent l'accès au logement sur le marché privé très difficile voire impossible, notamment parce que les propriétaires des biens préfèrent un locataire avec un contrat de travail CDI temps plein ou même de préférence un couple avec deux revenus. Les prix du logement sur le marché privé restent inabordables pour une femme bénéficiant du REVIS. Selon le Fonds nationale de solidarité (2023), l'allocation d'inclusion maximale brute peut s'élever à 2.346,51€ pour un adulte, 353,91€ en addition par un enfant à charge dans un ménage monoparental. Sur le marché du logement, les prix de vente, fortement influencés par la distance à

Luxembourg-ville, pour un appartement existant s'élèvent en moyenne à 8,105€ par m² (STATEC, 2022, p.7). Les prix de location remontent à 31,35€ par m² en moyenne (STATEC, 2022, p.14). De plus, le REVIS n'est pas bien perçu auprès des propriétaires.

Selon les intervenants sociaux, le logement est le problème central pour beaucoup de femmes: «Le problème du logement se présente en premier. Tu veux vivre indépendamment, mais peut-être que tu n'as pas travaillé avant ou tu n'as qu'un petit salaire ou tu n'as travaillé que 20 heures, tu n'obtiens rien avec ça, c'est comme ça que ça (le problème avec le logement) commence»².

Dans nombreuses situations, un suivi social ambulatoire serait possible et suffisant, mais face à la situation du logement au Luxembourg, les femmes doivent s'intégrer au foyer à défaut d'une autre option. Au cours des dernières années, cette situation s'est dégradée. La STATEC (Institut national de la statistique et des études économiques du Grand-Duché de Luxembourg) et L'Observatoire de l'Habitat confirment la hausse constante des prix du logement. Pour l'année 2021, la hausse des prix de vente s'élève à 13,9% en moyenne par rapport à l'année précédente, rapportant une augmentation similaire (STATEC, 2022, p. 5). Dans la location, les mêmes tendances sont observées avec un décalage entre les évolutions des loyers pour un nouveau contrat de bail et celles des loyers en cours de bail (STATEC, 2022, p. 12). En conséquence, de plus en plus de femmes restent plus longtemps au foyer d'urgence et dans les logements encadrés. Il devient même de plus en plus difficile pour une femme avec deux enfants bénéficiant un salaire minimum ou le REVIS de trouver un logement adapté et abordable en dehors des logements sociaux. «Celles (femmes) qui restent chez nous (en service d'accueil) sont majoritairement celles qui bénéficient le REVIS ou qui travaillent 20 heures dans la restauration ou dans les entreprises de nettoyage»³. Finalement, beaucoup de situations de vie ne changent pas et cette situation reste précaire, ce qui affecte également les listes d'attente correspondantes.

² Notre traduction, texte original: «De Logementsproblem ass direkt mol als éischen do. Du wëlls fir dech wunne goen, mee hues vläicht net geschafft virdrun oder du hues engkleng Pai oder du hues nëmmen 20 Stonne geschafft, domat kriss du iwverhaapt näischt, domadder fänkt et un».

³ Notre traduction, texte original: «Di bei eis bleiwen, si meeschtens déi di de REVIS hunn oder di 20 Stonnen an der Restauratioun oder an de Botzfirmen schaffen».

4. *Séjour au foyer d'urgence pour femmes*

Au niveau de l'accueil des femmes au Luxembourg, les foyers d'urgence pour femmes des différentes associations fonctionnent avec une liste d'attente partagée. Les informations de base sur la femme concernée sont enregistrées afin d'éviter qu'elle doive réciter sa situation à chaque intervenant. La femme concernée est contactée par le foyer qui peut assurer sa prise en charge. Certains foyers accueillent davantage des femmes avec enfant(s) et d'autres évidemment aussi bien des femmes sans enfants. L'intervention sociale en foyer d'urgence se déroule en deux temps: d'abord la phase dite «calme» puis la phase dite «de projet».

En arrivant, les femmes ont besoin de retrouver le calme et le sentiment de sécurité vue qu'elles ont généralement fait l'expérience de violence domestique. Pendant cette phase, une psychologue est à l'écoute des femmes et des enfants. De plus, l'intervenante socio-éducative de référence pour la femme et les enfants est en même temps l'interlocuteur pour les enfants. Elle retravaille la relation mère-enfants avec eux. Les enfants n'ont pas fait la même expérience de violence, mais en étant généralement témoins. D'autres études confirment que la sécurité et la protection de l'enfant sont centrales pour les mères en foyer d'urgence. De plus, elles sont plutôt inquiètes de l'impact de l'expérience vécue sur le bien-être mental de leur enfant (Meadows-Oliver, 2003). Au Luxembourg, cette intervention sert à mettre en place les aides adaptées afin de stabiliser la nouvelle structure familiale monoparentale. En cas de nécessité ultérieure, une approche de consultation familiale ou un suivi spécifique focalisé sur l'enfant sera mis en place pour mieux répondre aux besoins.

Le temps entre la phase calme et la phase de projet reste courte parce qu'il est important que l'accueil en foyer d'urgence ne persiste pas et que les femmes deviennent rapidement l'acteur principal de leur propre vie. Pour déclencher la phase de projet, les travailleurs sociaux analysent la situation des femmes concernant les aspects suivants: présence d'enfants, revenu à disposition, activité professionnelle, réseau socio-familial etc. Dans l'élaboration du projet, les prochains pas et points de repère essentiels comme soumettre le divorce, demander le REVIS, demander le droit de garde de l'enfant ou apprendre la langue sont définis et mis en route. En outre, les femmes sont sollicitées à exprimer leurs priorités dans l'élaboration du projet. Avant sa réalisation, elles ont avant tout besoin de secours et de support pour pouvoir se projeter dans l'avenir et retrouver des forces pour s'investir. D'autres études confirment que cette phase permet à la femme de grandir (Meadows-Oliver, 2003).

Un traumatisme, un problème mental ou une dépression doivent être considérés dans l'accompagnement de la femme. Les femmes ayant un problème de dépendance ou de toxicomanie sont habituellement orientées vers des services travaillant à long terme avec elles, car le temps d'intervention prévu dans les foyers d'urgence n'est pas suffisant face à un tel problème. Les différents foyers d'urgence pour femmes accueillent une femme avec ou sans enfants pour une durée de trois ou quatre mois mais la plupart du temps, le séjour initial est prolongé parce que le temps n'est pas suffisant pour stabiliser la situation. Généralement, les femmes restent pendant six à douze mois au foyer d'urgence. De plus, le travail avec une femme ayant plusieurs enfants ou un enfant en situation de handicap à charge prend généralement plus de temps que le projet d'une femme sans enfants (Finfgeld-Connett, 2010). L'expérience des travailleurs sociaux montre que surtout les femmes âgées de 50 ans et plus restent particulièrement vulnérables quant aux possibilités de projet et d'avenir.

Dans les différents foyers existent des règles internes qui doivent être respectées par chaque femme accueillie, comme par exemple la contribution au ménage et l'absence de violence. Quand une femme ne réalise pas sa charge du plan de ménage, elle reçoit un avertissement. Lors du troisième incident, elle est priée de quitter le foyer. Cependant, quand une femme devient violente, elle perd immédiatement sa place au foyer, ce qui n'arrive que très rarement. Certaines règles peuvent paraître restrictives, mais elles sont perçues importantes pour le bon fonctionnement du foyer dans la perspective des intervenants sociaux. En meilleur cas, les autres femmes peuvent même être perçues comme source de support et le partage des pièces communes réduit le sentiment d'isolement et de marginalisation (Meadows-Oliver, 2003). Pendant la période du lockdown liée à la pandémie du Covid-19, les intervenants sociaux ont observé que les femmes ont particulièrement fait attention l'une à l'autre.

Dans une image sociale et politique plus large, une personne peut se sentir incluse dans un groupe, mais ce groupe peut être exclu au niveau social et devient ainsi un cas invisible d'exclusion sociale (Davey, Gordon, 2017). Pendant l'hébergement d'urgence, les femmes se préparent à la vie autonome ultérieure et à leur inclusion sociale définie dans leur projet, mais restent plutôt un groupe exclu en comparaison aux femmes célibataires ou monoparentales dans la société.

5. *Poursuite du parcours dans et en dehors de l'intervention sociale*

Quand l'intervention au foyer d'urgence pour femmes se termine, les parcours sont différents:

- Certaines trouvent un logement sur le marché privé;
- La plupart des femmes poursuit l'intervention sociale dans un autre service ou une autre structure d'accueil;
- D'autres se lient à un nouveau partenaire pour sortir du foyer et s'installent rapidement chez lui;
- D'autres encore mais très rare retournent auprès de leur partenaire;
- Pour finir, certaines femmes, aussi rarement, qui choisissent d'habiter la rue et sortent ainsi du système de protection sociale.

Au niveau des nouvelles structures, nous retrouvons par exemple les services de santé mentale ou les foyers pour réfugiés qui assureront le logement et la prise en charge ultérieure. Il s'agit généralement d'un accompagnement à moyen ou à long terme.

Cependant, la plupart des femmes s'intègre dans un autre service d'intervention sociale. Les services offrent une suite grâce au concept des logements de deuxième phase, une forme de logement encadré. Les logements de deuxième phase fonctionnent avec des projets d'autonomisation de trois ans. Le revenu et sa gestion autonome forment une condition d'accès au logement de deuxième phase. Il est important que la femme puisse gérer ses ressources financières. Elle paye un loyer, mais l'institution paye souvent ce qui manque au loyer si les ressources financières de la femme sont insuffisantes. La coopération de la femme et sa participation au projet forment l'autre condition d'accès au logement de deuxième phase. La recherche d'un logement, la consolidation de l'emploi ou l'apprentissage d'une langue peuvent faire partie du projet à réaliser. Pendant cette phase à la suite de l'hébergement d'urgence, les femmes reçoivent donc un logement et un suivi social. Il arrive qu'une femme n'a pas besoin de projet et de suivi social, mais elle ne trouve simplement pas de logement adapté sur le marché privé au Luxembourg, comme par exemple une femme peu formée avec enfants à charge et ayant peu de revenu. Très souvent, les femmes se trouvent sur une liste d'attente pour un logement social. Dans cette situation, le projet et le logement de deuxième phase sont prolongés au-delà de ces trois ans an attente d'un logement social ce qui prend généralement plusieurs années. Il s'agit d'un cercle vicieux parce que certaines femmes restent de plus en plus longtemps dans les structures parce qu'il n'y a pas suffisamment

de logements sociaux ou abordables ce qui empêche les finalités d'inclusion sociale. La plupart des femmes a besoin d'un logement à long terme où elles peuvent trouver des places d'accueil précoce ou extrascolaire pour leurs enfants et développer leurs vies.

Les femmes qui sortent du système de l'intervention sociale sont rares mais existantes. Elles échappent à de nombreux regards, notamment parce qu'elles passent de manière inaperçue grâce aux mécanismes du sans-abrisme caché (Batista, 2010). Par exemple, elles ont une adresse de référence auprès de la commune, respectivement de l'office sociale, mais dorment chez différents amis et/ou dans la rue. D'autres femmes finissent l'intervention sociale par se retrouver dans la rue. Au Luxembourg, un praticien-chercheur a retrouvé et suivi certains parcours de femmes qui habitent la rue (Almeida Cabral, 2020). Un exemple ethnographique montre le cas d'une jeune femme, mère de trois enfants, ces derniers placés en institution ou en famille élargie d'accueil une fois arrivée à la rue. Elle s'est mise en couple avec un homme habitant la rue pour se sécuriser dans la rue (Almeida Cabral, 2020). En même temps, ce comportement peut être perçu comme une mise en couple pour échapper à l'intervention sociale et au «contrôle» social. Dans le cadre du projet SOHOME, nous pouvons observer des tendances comparables, notamment dans les stratégies «s'installer auprès d'un nouveau partenaire» ou «retourner auprès du partenaire». Dans la perspective de Davey et Gordon (2017), cette femme opte pour une forme d'inclusion dans le groupe des habitants de la rue en acceptant l'exclusion sociale par la société sociale dominante en général, mais en préservant un sentiment de liberté (Almeida Cabral, 2020).

6. Incohérence par rapport à l'inclusion

Au Luxembourg, la demande de logement abordable excède nettement l'offre existante (Baden, 2023). De ce fait, Ametepe (2019) observe le renforcement du risque de pauvreté du au coût de plus en plus élevé du logement ce qui touche davantage les femmes (Baptista, 2010; Bernard, 2007). En conséquence, nous avons vu que les femmes accueillies dans les structures de logement encadré doivent prolonger la durée de l'intervention sociale à cause de ce manque de logements sociaux et abordables. Même en bénéficiant le REVIS, il semble impossible qu'une femme (monoparentale) puisse se retrouver sur le marché privé du logement. Un outil d'inclusion sociale, comme le REVIS, paraît de créer

de nouvelles dépendances et une forme invisible d'exclusion sociale (Davey, Gordon, 2017). En cas d'extrême, certaines femmes sortent du système de protection sociale (Almeida Cabral, 2020).

Le système de protection sociale au Luxembourg se présente plutôt dense, c'est-à-dire de nombreux instances ou projets face aux problématiques sociales existent, toutefois sans que ces aides ressoudent le problème rencontré. Nous pouvons observer un déplacement d'un service à l'autre. Les femmes accueillies dans un foyer d'urgence y restent plusieurs mois pour ensuite être accompagnées dans le logement encadré en attendant qu'un logement social se libère pour elles. Elles restent donc dépendantes du système d'aide, même si elles ont toutes les capacités nécessaires pour s'émanciper et mener une vie autonome à défaut de la pénurie persistante de logements abordables. Dans cette perspective, ce développement contredit la finalité d'inclusion sociale. Une organisation sans but lucratif ne peut être une instance d'inclusion sociale parce que la participation de la personne est liée à certaines conditions de prise en charge (Davey, Gordon, 2017).

D'un autre côté, le projet SOHOME a montré que de nombreux projets se créent pour répondre à une demande particulière. Par exemple, dans le but d'assurer le maintien de contact avec les deux parents, prévue dans les droits internationaux de l'enfant, des espaces de rencontres ont été créés. En cas d'expérience de violence conjugale vécue par la femme, les services s'engagent à créer un espace de rencontre surveillée entre père et enfant(s) sans que la femme (mère) devrait croiser son ancien partenaire et sans craindre la sécurité de son enfant.

7. Conclusion et perspectives

En résumé, notre étude contrée sur les femmes qui cherchent de l'aide dans un foyer d'urgence pour femmes sont âgées entre 35 et 45 ans en moyenne et dont deux tiers sont issus de pays tiers. Elles ont toutes fait l'expérience de violence domestique. Dans leurs projets d'avenir, élaborés et initiés lors de l'accueil en institution, l'accès au logement reste généralement l'obstacle central à la vie autonome. En conséquence, les femmes encadrées par un service social restent de plus en plus longtemps dans le logement et le suivi social en attente d'un logement abordable ou social, ce qui produit un effet négatif sur la liste d'attente pour accéder à un hébergement d'urgence pour femmes (RTL, 2022). L'inclusion sociale reste donc compromise, même parfois que partiellement en restant attaché au domaine de l'intervention sociale (Bouquet, 2015; Davey, Gordon, 2017).

Dans le cadre du projet SOHOME, les expériences dans les foyers d'urgence pour femmes peuvent également être observées dans de nombreux domaines de l'intervention sociale ce qui freine le développement des personnes concernées ainsi que leur inclusion sociale. Le projet SOHOME s'est centré sur l'aspect transversal de la problématique du logement en intervention sociale. Concernant l'étude des femmes en foyers d'urgence, le projet se limite à l'analyse des perceptions des intervenantes sociales sans tenir compte de la perspective des femmes concernées. Une étude ultérieure serait nécessaire afin de compléter cette image.

Durant les dernières années, de nombreux acteurs de différentes institutions sociales et/ou publiques représentant différents groupes d'intérêt ont élucidé la question du logement de manière critique (Leners, 2022). Une prise de conscience de la politique du logement peut être observée durant les dernières années, ceci notamment sur la question du logement abordable et l'accès au logement.

En termes de perspectives, l'investissement de plusieurs domaines s'avère important pour avancer sur la problématique du logement. D'abord, l'intervention sociale doit poursuivre sa mission d'accompagner les personnes en difficulté individuellement tout en faisant remonter la problématique structurelle au niveau politique. Concrètement, il reste important de créer des cadres d'accompagnement adapté à la personne en difficulté, donc de répondre à ses besoins spécifiques. En même temps, les élaborations de projets et de structures d'intervention constituent un indice important pour le contexte socio-politique. Ensuite, il s'agit de la politique sociale de réagir sur le problème structurel rencontré. Pour le Luxembourg, le problème réside essentiellement dans le manque de logements abordables et sociales. Les initiatives actuelles devraient être poursuivies afin de «soigner le 'mal de terre'» avec un parc public locatif social assez faible en comparaison à d'autres pays de l'Europe afin de retrouver un équilibre entre les intérêts public et privé (Hurt, 2022). Enfin, la recherche en éducation familiale et en intervention sociale peut étudier davantage la problématique et offrir une compréhension approfondie des femmes (monoparentales) en difficulté de logement. Elles se trouvent non seulement dans une structure d'accueil, foyer d'urgence inclus, mais également à la rue (Almeida Cabral, 2020), tout en sachant qu'une partie d'elles restent entièrement inaperçues grâce aux nombreuses stratégies d'accommodation en dehors de la sphère publique et en restant invisibles (Baptista, 2010; Finfgeld-Connett, 2010) dans l'étude du problème.

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- Permettere ai ricercatori e ai professionisti della formazione di tutti i paesi di scambiare le loro produzioni, i loro orientamenti di ricerca e le loro rispettive pratiche.
- Favorire la diffusione della ricerca e dei modelli di produzioni in educazione familiare.
- Incrementare il partenariato tra l'università e i diversi contesti professionali che hanno come finalità lo sviluppo dell'insegnamento, della ricerca e di azioni in educazione familiare.

Alla luce di questi principi generali nasce A.I.F.R.E.F. Italia, con l'obiettivo prioritario di inserire anche il nostro Paese nel circuito internazionale degli studiosi e dei professionisti di educazione familiare.

Le finalità di A.I.F.R.E.F. Italia sono, ovviamente, le medesime dell'Associazione Internazionale, ponendosi con forza l'obiettivo di promuovere la collaborazione tra il mondo della ricerca ed il mondo dei servizi educativi e sociali.

L'iscrizione a A.I.F.R.E.F. Italia – con il pagamento della somma di € 30 – consente di ricevere i due fascicoli annuali della «Rivista Italiana di Educazione Familiare».

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