Positive parenting, family resilience, and child participation in family reunification: good professional practices

Ainoa Mateos, Julio Rodríguez, Nuria Fuentes-Peláez & Sara Pérez-Hernando

Faculty of Education, Department of Research Methods and Diagnostics in Education, University of Barcelona, Barcelona, Spain.

ABSTRACT

Good professional practices in family reunification processes require a favorable attitude towards an approach to socio-educational action based on positive parenting, family resilience, and child participation. This quantitative study provides knowledge regarding these three perspectives based on the experience of 20 child protection system professionals (in Catalonia, Castilla-La Mancha, and Navarra) who have participated in training on and the implementation of the programme entitled *'Caminar en familia'* (Walk as a family). Data were collected by administering a Likert-type questionnaire on two occasions, before starting the training on the programme and after implementing it with the group of families. A descriptive analysis of the data was performed using the SPSS v.25 software package. The results indicated a positive trend when incorporating positive parenting, family resilience, and child participation into professional practices in the child protection system, raising awareness of the children's ability to identify their own needs and the parenting skills that their parents need to improve. In conclusion, the evidence invites us to shift the focus of professional support within the child protection system.

KEYWORDS

RESUMEN

Una buena práctica profesional en los procesos de reunificación familiar requiere de una actitud favorable hacia un enfoque de la acción socioeducativa basada en la parentalidad positiva, la resiliencia familiar y la participación infantil. El estudio cuantitativo que se

presenta aporta conocimientos sobre estas tres perspectivas basándose en la experiencia de 20 profesionales del Sistema de Protección a la Infancia
-SPI- (Cataluña, Castilla-La Mancha y Navarra), que han participado en la formación e implementación del programa 'Caminar en familia'. Para la recogida de datos se ha utilizado un cuestionario de escala tipo Likert que recoge datos en dos momentos: antes de comenzar la formación para la implementación del programa y después de su implementación con el grupo de familias. Se ha realizado un análisis descriptivo de los datos utilizando el programa SPSS v.25. Los resultados muestran una tendencia positiva a incorporar la parentalidad positiva, la resiliencia familiar y la participación infantil, en las prácticas profesionales en el SPI, tomando consciencia de la capacidad de los niños para identificar sus propias necesidades y las competencias parentales que sus progenitores deben mejorar. En conclusión, las evidencias invitan a apostar por un cambio en el enfoque de acompañamiento profesional en el SPI.

PALABRAS CLAVES

Introduction

Direct and continuous interventions with families in situations of vulnerability are aimed at providing support focused on positive parenting (Rodrigo et al., 2015).The Recommendation Rec 19 of the Committee of Ministers to member States on policy to support positive parenting (Recomendación Rec 19 del Comité de Ministros a los Estados Miembros sobre políticas de apoyo a la parentalidad positiva, 2006) highlights the importance of relying on professionals and services that support parents in their parenting activities. Positive parenting requires a change of perspective among professionals who work with families. This 'renewed' look implies a more positive and participatory vision, overcoming a pathological or deficit-based approach based on resilience. This new approach is essential in professional practices with families in the child protection system and with a reunification prognosis (Mateos et al., 2018), understanding reunification as the process whereby a child returns to their biological family after a period of provisional separation caused by a situation of help- lessness, neglect, and/or abuse (Balsells et al., 2015; Mateos et al., 2018).

Socio-educational action with families in the child protection system with a reunification prognosis requires working with the family as well as with the children. Without this professional intervention, the triggers of homelessness are unlikely to resolve on their own (Balsells et al., 2013). This socio-educational work should be articulated from a positive, resilient, and participatory perspective. A focus on protective factors or a resilience perspective can benefit families, especially those with serious problems and difficulties (Walsh, 2002). Only then can families be active participants and transforming agents of their reality.

Family commitment and joint decision-making between parents and professionals is a paradigm of professional intervention focused on the well-being of the child (Anthony et al., 2009), which suggests improvements in family reunification outcomes. This right to child participation is stipulated in Article 12 of the United Nations Convention on the Rights of the Child (Comité de los Derechos del Niño, 1989) and will facilitate empowerment of all family members by respecting their right to be informed and to participate in the processes that affect them (Mateos et al., 2017).

This approach is about legitimizing and recognizing the voice of children and providing them with an actively listening audience as well as adequate mechanisms and conditions to express their opinions (Lundy, 2007), while creating real opportunities in everyday life beyond a specific activity or a list of good proposals (Novella, 2012).

Along these lines, scientific literature identifies some elements of good professional practices when working with families in the child protection system.

Good professional practices in family reunification processes

Families in the child protection system with a measure of provisional separation from their children require formal support from specialized professionals for reversing the unfavorable social and family situation and enabling family reunification (Balsells et al., 2014).

For this reason, the attitude of professionals who work with families in the child protection system must be studied, particularly in terms of good professional practices that favour family reunification processes.

The analysis of the scientific literature identifies the attitude of professionals towards positive parenting and child participation as fundamental elements that promote good professional practices in family reunification (Mateos et al., 2018). A third element can be added, which is linked to the professional's positive view of a family as a unit that promotes its strengths, overcoming approaches based solely on eliminating or reducing deficits (Máiquez et al., 2019; Proctor et al., 2011; Walsh, 2002).

Therefore, some studies demonstrate how, in some cases, professionals can promote family reunification, while, in others, they delay the process over time as a result of risk-based evaluations (Davidson-Arad & Benbenishty, 201O).

The attitude of the professional towards parental competencies affects both the decision-making process and the professional intervention itself (Cheng, 201O; Davidson-Arad & Benbenishty, 201O). Good professional practices in family reunification processes demand skills and attitudes that facilitate an open and honest relationship with the family (Yatchmenoff, 2005), promoting their participation (Regional Research Institute for Human Services, 1998; Rooney, 1992), establishing a professional commitment to the family (Schofield et al., 2011), showing a respectful and empathetic attitude (Forrester et al., 2012), involving parents and children in the process (Keddell, 2011), establishing a partnership- based relationship, favouring collaboration over control (Balsells, 2007; Dumbrill, 2006; Planella, 2008), evaluating families from an ecological and systemic perspective, and recognising their strengths and the opportunities offered by their environments (Rodrigo et al., 2015).

All of these elements indicate the need for changing the model of intervention and family support (Planella, 2008) towards promoting the collaboration of everyone involved in the family reunification process, highlighting the potential of families and adopting an ecological and systemic perspective (Balsells et al., 2015; Rodrigo et al., 2015).

Positive parenting in family reunification processes

Positive parenting is a new way of understanding parenting considering the evolution of society and families. Recommendation 19 of the Committee of Ministers of the Council of Europe (Consejo de Europa, 2006) defines positive parenting as *'parental behaviour based on the best interest of the child that is nurturing, empowering, non-violent and provides recognition and guidance which involves setting of boundaries to enable the ful/ development of the child'.*

Recommendation 19 highlights the importance of a child rights-based perspective, parental responsibility in the care of children, and a positive parenting approach. Furthermore, it notes the added difficulty of parenting in situations of risk of social exclusion. In this sense, the recommendation emphasises the relevance of orienting professionals and services involved in childcare.

Positive parenting is crucial not only for families but also for educational interventions aimed at promoting equal opportunities for families and helping them fulfil the expected functions (Rodrigo et al., 2015). Therefore, positive parenting is not only a set of desirable competencies for the parental role; the inclusion of related content in the training of professionals is also recommended (Jiménez & Hidalgo, 2016).

A number of guiding principies underpin the practice of positive parenting (Amorós et al., 2011; Rodrigo et al., 2015), namely establishing affectionate, warm, protective and stable bonds, promoting a structured environment, offering stimulation and support to everyday and school learning, recognising the value of daughters and sons, promoting the training of daughters and sons as active agents, and providing an education free from violence.

The exercise of positive parenting is influenced by the needs of the children, parental skills, and the psychosocial context of the family (Rodrigo, 2015; Rodrigo et al., 201O). These vectors interact with each other, exacerbating or mitigating the impact of the exercise of positive parenting and resilient coping of this function.

Family resilience in reunification processes

The resilient perspective of families at risk is consistent with the importance given to positive parenting. Family resilience intervenes as a process of coping with and recovering from the adversities that affect a family (De Andrade & Da Cruz, 2011; Gómez & Kotliarenco, 201O) and a way to resist the processes of social exclusion (Ruiz-Román et al., 2017).

As indicated by Walsh (2004), family resilience makes it possible to regard families

as living organ- isms that face a crisis based on their recovery skills, potential, and resources. Therefore, the naive position of 'positive thinking' is insufficient, as criticised by Gómez and Kotliarenco (201O). Instead, professionals must relate to the damage suffered by the family system and look for the factors that facilitate facing adversity. For Walsh (2004), family belief systems, organisational patterns, and communication processes are key elements in addressing family resilience.

Children need their parental references to be able to face the inevitable difficulties of daily life (Riera, 2011), especially in situations where children are separated from their parents as a result of a protection measure. Engaging in a process of family resilience implies a proactive attitude of all family members to produce changes in the family (Delage, 201O). In this family involvement, the participation of children should not be ignored.

This resilient approach to the family opens the doors to a professional intervention that over- comes the deficit perspective, enabling families to empower themselves and emerge strengthened from the situation of foster care and subsequent family reunification.

Child participation in family reunification processes

Positive parenting implies a clear and firm commitment to a more participatory and inclusive professional intervention model (Dixon et al., 2019; Mateas et al., 2017). Article 12 of the United Nations Convention on the Rights of the Child (Comité de los Derechos del Niño, 1989) relates this participation to the right to have a free opinion and to be heard in the processes that affect their lives.

However, when we refer to protected children, the right to protection clashes with the right to participation (Kosher & Ben-Arieh, 2020), silencing the voice of children in making decisions about their lives (Dixon et al., 2019). Respecting these rights not only implies some benefits, such as more positive and effective results in family intervention, for example (Barnes, 2012; Hébert et al., 2016), but also involves the effort and sensitivity of professionals, so that children can express their opinion and be heard in family separation and reunification processes. However, different studies (Balsells, Fuentes-Peláez, and Pastor, 2017; Goodyer, 2014; Montserrat, 2014) demonstrate how decisions in child protection processes disregard children's viewpoint and usually fail to meet their need to be informed about the measures and their consequences. Accordingly, some studies indicate that wards feel poorly informed, undervalued, and even excluded from decision- making, especially in the initial moments of foster care (Balsells, Fuentes-Peláez, & Pastor, 2017; Staines & Selwyn, 2020), leading them to believe that they are not in control of their own lives (Hébert et al.,

2016).

To strengthen their agency and train their capacity to participate and influence decision-making processes, a relationship of trust must be established between the child and the professionals who care for them (Munford & Sanders, 2015). Cossar et al. (2014) indicate the elements that help to foster this relationship of trust: a) providing an adequate space in which children feel comfortable to express themselves, b) remaining in contact continuously, and c) preventing encounters only for the purpose of collecting information or interrogation.

In conclusion, the scientific literature reveals how the role of the professional and their attitude towards positive parenting, resilience, and child participation mediate the processes of separation and family reunification.

Objectives

The present study seeks to determine whether professionals in Spain (Catalunya, Castilla La Mancha, and Navarra) working with families with a family reunification prognosis adopt a professional
attitude and approach that promotes family support by focusing on positive parenting, resilience, and child participation after participating in the *'Caminar en familia'* (Walking as a family) programme (Balsells et al., 2015).

Research methodology

A comparative study with a one-group, pre-test-post-test design (Ary et al., 2009) was conducted to assess the impact of training professionals as well as their participation in implementing the family reunification programme 'Walking as a family' *('Caminar en Familia')*. 'Walking as a family' (Balsells et al., 2015) is a support programme for specific parenting skills in foster care and reunification. Its primary aim is to promote the acceptance and involvement of welfare measures as well as foster and strengthen reunification.

To implement the programme, child protection professionals receive mandatory, 20-hour, face- to-face training in which the fundamentals of the programme are explained to them and they experience the dynamics of its implementation. This training is aimed at enabling a change in their professional competencies (which includes skills and attitudes) in relation to the importance of implementing the positive parenting, family resilience, and child participation approach when working with families who participate in the programme.

This study adopted a cooperative action-research perspective (Bartolomé &

Anguera, 1990). Accordingly, university staff and child protection staff participated with the aim of transforming the way professionals work with families in the process of reunification. Including child protection professionals in the programme evaluation process makes them active members who are more sensitive to change with the progress of the study, and in the subsequent implementation of the outcomes and the resulting programmes (Balsells, Fuentes-Peláez, Mateo, et al., 2017).

The research has been approved by bioethics committee of the University of Barcelona. The Insti-tutional Review Board number is IRB00003099.

Instrument

A questionnaire focusing on professional skills to promote good practices in reunification was pre- pared for this study. The questionnaire included 41 closed items rated on a 5-point Likert scale (0-5 from disagreement to agreement). For each of the items, the professionals evaluated the importance of the skills (degree of importance of the skills needed to work with biological families) and their perception of their individual level of the skill. Only the dimensions related to positive parenting (4 items, e.g. if work with families involves raising parents' awareness of the needs of their children), family resilience (5 items, e.g. if families in foster care and family reunification have the capacity to change and improve), and child participation (4 items, e.g. if children have to actively participate in their foster care and family reunification process) were used. These dimensions were addressed in 13 items of this questionnaire. The corresponding indices were also calculated for each dimension.

To investigate the instrument's consistency and reliability, the Cronbach's alpha of the different dimensions that configure the scales was calculated. The sum of Cronbach's alphas (.912) indicated that the coefficient was outstanding, according to the classification of George and Mallery (2003, p. 231). Hence, the consistency and reliability of the instrument was confirmed.

Regarding its validity, the questionnaire was developed with the participation of university lecturers and expert professionals from the child protection system. They supervised the final wording of the instrument as well as the adequacy of the items. The expert review validated that all of the items were necessary and understood, valuating the univocity and relevance of each item on a scale of 0-5, in order to arrive at the final questionnaire.

Procedure

The skills questionnaire was completed by the professionals at two different times: before beginning the training for the implementation of the 'Walking as a family' programme and after conducting the programme with the families. The different programme groups were implemented during 2017 (14 groups) and 2018 (1 group). The study participants were informed verbally and in writing, and participation was confirmed by signing an informed consent form.

Data analysis

The data were analysed using the SPSS v.25 statistical package. A descriptive analysis of the three dimensions and indices was performed, calculating the mean and the standard deviation in the pre- and post-tests. In addition, the means were compared using the parametric Student's t statistic.

Characterisation of participants

The study sample consisted of all professionals who implemented the family reunification programme (Balsells et al., 2015).The sample composed of 20 professionals from three autonomous communities of Spain (Catalonia, 9, Castile La Mancha, 9, and Navarra, 2). Of the professionals involved, 70% were women (14), and 30% were men (6). They all belonged to the child protection services teams; that is, theywere not external professionals. The sample was small because the family reunification rate is very low, and 'Walking as a family' is an innovative programme within the child protection system. A total of 114 families have benefitted from the implementation of the programme. The different programme groups were led by these 20 professionals who constituted the study sample.

The professionals who implemented the programme were mostly social workers (7) and psychologists (5), while a smaller number were in professions related to educational careers such as pedagogy or social education (8). Of those involved, 80% were younger than 45 years old (16), and the average age was 40 years old, with a minimum of 33 and a maximum of 57.

Research findings

The pre- and post-test results, before and after the programme for the 13 items under study are reported in Table 1. As can be seen, there were significant differences

between the pre- and post- test evaluations as well as between the mean and standard deviation of each item at both times. Differences in means and standard deviations between the pre- and post-tests have also been included to assess whether, when significant, these differences express an improvement or deterioration in the evaluation of professionals regarding the item.

The results are divided into three categories: positive parenting, family resilience, and child participation.

Positive parenting

In the dimension of good professional practices, significant differences were found both in the total dimension of positive parenting and in two of the four items. The first item with significant differences (sig. = 0.020) refers to an approach to the intervention with families in the foster care and reunification processes focused on teaching parents to use the resources available in the context. This item decreases by just over half a point (0.58). Conversely, we observed an increase (0.29) in the item referring to encouraging parents to have greater awareness of the needs of their children

in the family intervention (sig. = 0.005).

In contrast, two items showed no significant changes. These correspond to the recognition of parental competencies, the needs of the children, and the elements of the context as factors that influence foster care and family reunification as well as the idea that the work with families should be aimed at improving parental competencies.

Table 1: Pre- and post-test of professional skills: positive parenting, family resilience and child participation

	PRE		POST		PRE-POST difference		Sig.
	Mean	SD	Mean	SD	Mean	SD	
Positive parenting index	**4.04**	**0.76**	**4.56**	**0.352**	**-0.52**	**0.41**	**0.005****
The work with families in the foster care and family reunification process is aimed at teaching parents to use the resources available in the context.	4.73	0.51	4.15	0.745	0.58	-0.24	0.020*
Parenting skills, children's needs and contextual elements influence foster care and family reunification.	4.49	0.662	4.85	0.366	-0.36	0.296	0.058
The work with families in the foster care and family reunification process aims at improving the parenting skills of fathers and mothers.	4.50	0.891	4.50	0.607	0.0	0.284	0.166
The work with families aims at helping parents be aware of the needs of their children.	4.46	0.45	4.75	0.444	-0.29	0.01	0.005**
Family resilience Index	**4.62**	**0.53**	**4.19**	**0.669**	**0.43**	**-0.14**	**0.213**
Knowing the elements of family resilience facilitates interventions with families in the foster care and family reunification process.	4.24	0.75	4.65	0.489	-0.41	0.26	0.012*
Families in foster care and family reunification have the capacities to change and improve.	4.65	0.489	4.05	0.286	0.60	0.203	0.802
Families in foster care and family reunification have the capacity to make decisions about their process.	4.39	0.69	3.85	0.988	0.54	-0.30	0.026*
Families in foster care and family reunification have strengths to improve their situation.	4.30	0.657	4.20	0.768	0.10	0.111	0.627
Reunified families have capacities to support other families in foster care.	4.26	0.511	4.30	0.657	-0.04	-0.146	0.868
Child participation index	**3.89**	**0.99**	**4.13**	**0.576**	**-0.24**	**0.41**	**0.029***
Children in the foster care and family reunification process can express their development and education needs.	3.62	0.93	4.05	0.826	-0.43	0.10	0.022*
Children in the foster care and family reunification process can identify the parenting skills needed to improve their fathers and mothers.	3.42	0.95	3.80	0.834	-0.38	0.12	0.010*
Children in the foster care and family reunification process can identify the formal and informal supports that can help them.	4.67	0.639	4.05	0.887	0.62	-0.248	0.073
Children have to actively participate in their foster care and family reunification process.	3.90	0.69	4.65	0.587	-0.75	0.10	0.001**

* p> 0.05 ** p> 0.01

Family resilience

Regarding the dimension of family resilience, two items showed significant differences. The perception of professionals regarding how knowing the elements of family resilience facilitates interventions with families showed a positive increase of 0.41 (sig. = 0.012), and the capacities of families to make decisions regarding their foster care and family reunification process showed a negative change in the post-test, decreasing by 0.54 (sig. = 0.026).

In turn, no significant changes were observed in three of the items of the dimension of family resilience. These items refer to the notions that families in foster care and family reunification have the capacity to change and improve as well as strengths to improve their situation or that, once reunited, these families may have the capacity to support other families in foster care.

Child participation

In the dimension of the participation of children in the intervention for family reunification, we observed an increase in three of the four items in addition to the clustering index. All cases showed an increase, thus highlighting the importance of active participation in foster care and family reunification processes (0.75) as well as the recognition of the children's capacity to both express their needs (0.43) and identify the parental competencies that their parents need to improve (0.38). Conversely, no significant difference was observed in the item of the child participation dimension that refers to the ability to identify the formal and informal supports that can help children
in the foster care and family reunification processes.

Discussion

A good professional practice in family reunification processes requires professionals with an attitude that incorporates positive parenting (Cheng, 201O; Jiménez & Hidalgo, 2016), family resilience (Delage, 201O), and child participation (Keddell, 2011) as key to the intervention.

Our study assessed the extent to which training and participation in the implementation of the programme has promoted changes in professional practice.

In general, the results revealed a positive change in attitudes regarding the three dimensions under study. However, consolidating this change requires framing a more participatory and holistic model that recognises the potential of families (Balsells,

Fuentes-Peláez, Mateo, et al., 2017; Farmer & Wijedasa, 2013).

With regard to the formal supports available to families, we identified a particularly important piece of information. The post-test data indicated a reduction in the item relating to the competence of professionals with respect to teaching parents to use contextual resources of just over half a point. We can infer that professionals feel less competent on this subject. After implementing the pro- gramme, they may have been able to understand first-hand why families do not use these formal supports, despite that such supports are key elements in making and maintaining the changes necessary for a successful family reunification (Cynthia et al., 2011). The use-or lack of use- of these resources will also depend on the quantity and quality of these media, which can be of dubious quality, according to the families. As highlighted by Balsells et al. (2014), families require greater availability and dedication from the professionals who provide these supports, more family therapy, and more training in their parenting skills.

Families that have gone through a family reunification process intend to re-establish family dynamics, which implies readjusting their parental skills, that is, adapting to changes in their children after the provisional separation, new rules and routines, and meeting the needs of the children, among others (Mateos et al., 2018).

This new stage poses a challenge to the family, as ambivalent emotions emerge: on the one hand, the joy of being reunited with each other and the children's joy of being with their parents and, on the other hand, the parents' fear of not knowing how to face the new family situation assertively and repeating mistakes. In turn, the children also face this stage with uncertainty, fearing a possible recurrence of the reasons that caused the separation. Hence, to be able to consolidate these changes, the family must be provided with quality formal support once family reunification occurs (Balsells et al., 2016)

Therefore, adopting a resilient approach to family interventions becomes even more necessary considering the positive results identified herein. This positive change may derive from the design and approach of the programme, which was particularly focused on activities that highlight the strengths of families without ignoring their difficulties. This innovative socio-educational intervention programme, which incorporates positive parenting, family resilience, and child participation as the axis of its intervention, can help professionals not only be aware of the different elements that build family resilience but also incorporate them into their professional practice. The pro- gramme (Balsells et al., 2015) provides the opportunity to face the challenge of family reunification from the positive and resilient perspective of the family's ability to reverse the situation and reunite. Continuing with this resilient approach, one finding of this study is striking. The difference in scores

between the pre- and post-tests revealed a lower score in the post-test regarding the attitude of the professional in relation to the ability of families to make decisions regarding the process. Our interpretation of this item, which a priori may seem negative, is that, after participating in a highly participatory methodology programme, the professionals have been able to better adjust their expectations regarding the family's ability to make decisions. Although goals must be set for families at a higher level than they can achieve to promote their development and motivate them to improve, excessively high expectations of families' capacity may also frustrate the work plan and their motivation for change. We believe that the professionals were perhaps excessively idealistic or utopian in their initial assessment of the capability of families. Once they have had a real opportunity to apply these knowledge and precepts, they have been able to realise that intentions do not suffice, and instead, families must have the resources to be able to ensure this participation.

However, this should not encourage professionals to lower expectations of families' capability. On the contrary, they must find the necessary resources and spaces to enable this participation. In this vein, not only must the families have these supports, but the professionals involved in these family care resources must also be empathetic and establish trust with them, including the children (Cossar et al., 2014; Nybell, 2013); moreover, they must believe in the strengths of the families and replace the role of experts with a role situated in a model of support through partnership (Planella, 2008). The theoretical framework of resilience and family reunification programmes such as 'Walking as a family' can help these professionals develop such competences.

This attitude conducive to a resilient approach by the professional can contribute to the commit- ment, willingness, and desire of the family members to accept the need to introduce changes and implement them. These three elements are key in the family reunification and resilience process (Lietz & Strength, 2011).

Regarding participation, in contrast to their assessment of the abilities of parents, professionals show a more favourable attitude towards the children's abilities to express their needs. The evaluation of the professionals differs between parents and children possibly because the programme particularly focuses on promoting the voice of children, giving them space, and offering them a real opportunity to express their opinions and needs, proposing activities that foster a context prone to generating child participation.

For the adults, the programme offers space but perhaps does not place as much emphasis on their ability to participate in decision-making as necessary, focusing more on the need for child participation, because the child is usually more undermined by the child protection system than are the parents. As a result, the professionals may have

had the opportunity to break one of the barriers that limit children's participation: the fear of not knowing how to channel this participation and in what space and time to do so.

Good professional practice requires empowering children. Beyond giving them a voice and listening to them, they must have the opportunity and the ability to participate, negotiate, and influence the institutions that affect their lives (Hébert et al., 2016).

This violation of the right of children to participate in the processes that affect them may be linked to the very concept of child participation. This is a relatively new approach to child protection (Mateas et al., 2018), which may be susceptible to subjective interpretations and, consequently, defined in various ways. If not, what do we understand by child participation? These questions present new scientific challenges in the field of professional intervention with families and children. Further studies are required to help reach a consensus on a definition, shared by the scientific com- munity and childcare professionals, not only of the construct but also of the approach to child participation, so that professionals involved in the direct care of children can transfer/move/translate the construct into real practice. A starting point may be the study by Bouma et al. (2018), who present three dimensions necessary for significant child participation: informing, hearing, and involving.

Finally, we would like to note several limitations of this study as well as its practical implications for future research.

The limitations of the study are primarily related to the methodological aspects; specifically, they concern the size of the sample. The sample size in this study was small, although its size should not be considered relative to the total number of professionals in the child protection system but, rather, to the total number of professionals who have received training or have implemented this innovative programme in the child protection system.

As future avenues of research, this study indicates the need to continue exploring the most effective formulas to favour the inclusion of children's participation in family reunification processes. Participation contributes to increasing children's agency over their lives (Hébert et al., 2016). We are currently facing a paradigm shift focused on child well-being (Anthony et al., 2009).

The *'Caminar en familia'* (Walking as a family) programme is the first step to begin this path towards a new model of family intervention in the child protection system. In the context of child protection, this is the first group family education programme that works simultaneously with parents and children and includes family sessions, in which the family as a whole can participate in the process, thus enabling them to trace, as a family, their path to reunification.

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