

Original Article

Parental Empowerment in Family Centres: A Cross-Sectional Study

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Abstract

Background: Around the world services for families with children are being organised into family centres which aim to increase parental empowerment. Parental empowerment can be seen to manifest at three levels: the individual level in the family itself, in a specific service situation, and in the wider system of services.

Aim: To describe the realisation of parental empowerment in family centres and the factors associated with it.

Methods: The study used a cross-sectional study design. The parents (n=1447) were recruited from the city in Finland where services for families with children were provided through family centres in February to April 2022. A total of 215 parents with children aged 0–6 responded to the Webropol-survey. Parental empowerment was measured using the Generic Family Empowerment Scale (G-FES). The data were analysed using t-test and one-way analysis of variance.

Results: According to G-FES, parental empowerment was high at the family (mean 4.1, SD 0.60) and service situation (mean 4.1, SD 0.60) and moderate at the service system (mean 3.2, SD 0.7) subscales. Challenges in everyday family functionality were statistically significantly associated with decreased parental empowerment, across all levels. At the service situation and service system context adequate access to assistance and experience of families' views having an association increased parental empowerment. Parents' and children's backgrounds were somewhat associated with parental empowerment.

Conclusions: Results of this study highlights that the most significant factor shaping parental empowerment, across all levels, is the self-reported everyday functionality of the family. Further attention must be paid to supporting the everyday lives of families, including those who have particular concerns and challenges.

Key words: parental empowerment, family, parent, family centre, childcare service, survey

Introduction

Improvements in family services increasingly aim to empower families (Koren & Friesen, 1992). WHO (2020) highlights an increased focus on user involvement and empowering people to take action in their own lives. Parental empowerment is a collaborative process, through which families access skills, knowledge and resources that enable them to exercise positive control over their lives (Wallersteins, 2006).

Parental empowerment plays a significant role in shaping how childhood challenges affect children, and the current and future well-being of the whole family (Vuorenmaa et al., 2013a; Vuorenmaa et al., 2016a; Damen et al., 2019).

According to Zimmerman (2000), inclusion empowerment occurs at the individual, organisational, and community levels and manifests itself at three levels: the individual level in the family; within the service situation; and within the wider service system.

At the individual level parental empowerment means parents' sense of confidence in dealing with services concerning their children (Koren & Friesen, 1992; Kerppola, 2021). Parents can be seen as an equal partner with the professional (Zimmerman, 2000).

At the service level, participation in planning the services that are offered increases both customer satisfaction with those services and the quality of care (Leone et al., 2012). Providing services in a client-centred manner increases customers' active involvement (Kerppola-Pesu et al., 2016).

In service situations empowerment refers to empowerment as it is expressed and experienced in interaction with services provided to one's own child and family (Koren & Friesen, 1992). It includes parents' knowledge and understanding of the system of services for families with children in their municipality or city, parental trust in the system, and opportunities to improve services (Vuorenmaa et al., 2015a).

According to Koren & Friesen (1992) empowerment at the service system level refers to advocacy for improvement of services more generally. In the community, empowerment arises from meaningful

experiences such as contributing to good social relationships and investing in the common good (Isola et al., 2017).

Family centres offer a range of services including health and well-being, and growth and development services for children, young people and families. They serve to coordinate the services of municipalities, parishes, and Nongovernmental Organisations. The family centre can operate as a network, in a physical location or as an electronic family centre. (Finnish Institute for Health and Welfare, 2022.)

Family centres like those in Finland are also being instigated in other Nordic countries (Kanste et al., 2018). Family centres compiling regional services for families and support promote the health and well-being of families with children. It also includes services from open meeting places (Finnish Institute for Health and Welfare, 2022).

It has been argued that there is growing need for interdisciplinary services, such as can be offered through family centres (Bulling & Berg, 2018), which are universally accessible and consider the particular needs of families with children (Kanste et al., 2019).

The challenge in developing the service system is strengthening user participation in services and ensuring the views of children and families are heard when decisions are made about services for children and families (Kanste, Halme & Perälä, 2014; Halme, Vuorisalmi & Perälä., 2014; Pelkonen et al., 2020).

There are relatively few studies of family centres, especially in relation to this topic. Studies only explore how well they work for families with children who face specific challenges such as behavioural problems (Damen et al., 2019), mental health problems (Piotrowska et al., 2017), physical disabilities (Alsem et al., 2019) or autism spectrum disorder (Casagrande & Ingersol 2017; Khara et al., 2020). Thus, the aim of our study was to describe the realisation of parental empowerment in family centres and the factors associated with it.

The specific research questions were:

1. How is parental empowerment realized in the Family Centre?

- 1.1. How do parents evaluate their empowerment in the family?
- 1.2. How do parents evaluate the realization of their empowerment in their child's service?
- 1.3. How do parents evaluate the realization of their empowerment in the development of the child and family services?
2. Which factors are associated with the realisation of parental empowerment in the Family Centre?

Methods

Study design: During February-April 2022, all parents who attended the family centre with their children, and parents of children using municipal, parish and organisational childcare, were invited to complete a Webropol survey. The distribution of the survey utilised the operating environment of the family centre. Family centre employees or early childhood education supervisors distributed the survey to the parents. The survey was shared to the parents in social and health services by professionals with cover letter, or kindergartens and parish services by manager with email. The survey was shared by family centre employees or relevant service staff, in person or by email. Parents were asked to evaluate the services from the perspective of the family centre. The staff instructed the respondents that the questionnaire would be used to find out how parents perceive their involvement in family centres and the related factors. In addition, parents were given instructions for this in a cover letter.

Participants and data collection The cross-sectional survey was conducted in one city in Finland with a population of approximately 200 000, 7% of whom are children of less than school age (Statistics Finland, 2022). This city was chosen because family centre activities have been in operation there for some ten years. Family centres provide local services in accessible locations close to where children and families spend their time on a daily basis. A questionnaire was circulated to 1447 parents, of whom 215 completed and returned it (response rate 15%). Inclusion criteria were 1) parents of children aged 0–6; 2) customers of a service in a family centre; 3) able to answer the survey in Finnish; and 4) willingness to participate in the study. Families with under school-age children (0-6)

were selected because their experiences are essential to study, because they have insight in this matter.

Measures: Parental empowerment was measured using the Generic Family Empowerment Scale (G-FES) (Vuorenmaa et al. 2013b), which is based on the Family Empowerment Scale that was developed for families of children with emotional disabilities (Koren & Friesen, 1992). The FES is a reliable instrument for measuring parental empowerment (Koren & Friesen, 1992) which has been validated for use in the Finnish context (Vuorenmaa et al. 2013a; Vuorenmaa 2016b). The G-FES has 32 items covering parents' attitudes, knowledge and behaviours, which are divided into three groups: 10 items about the family, 12 about the service situation, and 10 about the service system. It uses a 5-point likert-type scale (1 =fully disagree to 5 = fully agree). Higher scores indicate higher levels of empowerment, with a maximum mean score of five on each dimension (Table 2). In addition to the G-FES -meter in the survey, parents were asked to evaluate statements related to finances, functionality of daily life, access to information and practical help. They were also asked how decisions were made in family centers in consultation with parents and how much the views of families with children influenced decisions in their municipality.

Statistical analysis: Background information about the participants were summarised with descriptive statistics, frequency and percentage, and family characteristics classified into a table (table 1). Levels of parental empowerment as measured with G-FES were divided into three subscores: low (1–2.4), moderate (2.5–3.4) and high (3.5–5) based on the results of earlier studies (Koren & Friesen, 1992; Vuorenmaa et al., 2015a). To describe each aspect of empowerment the scores obtained with G-FES were compiled by summing the ratings on each scale. Internal consistency of the measures and coefficients of 0,80 or more were considered desirable (Polit & Beck, 2017). Associations between family characteristics and empowerment were evaluated using t-test and one-way ANOVA (Polit & Beck, 2017) followed by Tukey's posthoc tests and data met the requirements of the tests. As a statistically significant limit, the value $p \leq 0.05$. Data were analysed using

IBM SPSS Statistics for Windows (version 28).

Results

Respondents' backgrounds: A total of 215 parents returned the survey, of which 175 (81%) were mothers and 36 (17%) were fathers. The mean age of respondents was 35 (range 20-49 years). Most of the respondents lived with a partner (88%) and were in employment (69%), and were highly educated (71%).

About a third of respondents had only completed basic or secondary education. Over 90% of respondents had attended a child health clinic, and over 70% had used early childhood education services in the previous year. Most of the respondents expressed the view that their everyday life works well or fairly well (90%), and that, if needed, getting help is easy or very easy (39%), (*Table 1*).

Realisation of parental empowerment in the Family Centre

Parental empowerment *in the family* was high (mean 4.4, SD 0.4). Respondents made efforts to learn new ways to help their child to grow and develop, and to deal with their child (G-FES meter). Parental empowerment *in the service situation* was high (mean 4.0, SD 0.6). Respondents felt that they had the right to approve the services that their child received, and were able to work and stay in regular contact with the relevant agencies and professionals (G-FES meter).

Parental empowerment *in the service system* was moderate (mean 3.2, SD 0.7). Respondents believed that they had better experience of this than some other parents and could influence services for children. They felt that their knowledge and experience as parents could be used to improve services for children and families. (G-FES meter.) (*Table 2*).

Factors associated with the realisation of parental empowerment in the Family Centre

Parental empowerment in the family

A higher level of education was associated with a reduction in parental empowerment ($p=0.031$). We found statistically significant differences between parents with basic or secondary education and those with higher

education ($p=0.047$, mean 4.5-4.3). Worries about the child had statistically significant differences in parental empowerment ($p=0.044$), but after adjustment posthoc tests showed no statistically differences. The functionality of everyday life means that how easy and fluent everyday life works at home.

It was significantly associated with parental empowerment ($p\leq 0.001$). Parental empowerment was moderate (mean 3.4) where families faced difficulties with everyday living, and highest where everyday life was easy (mean 4.6). Challenges in accessing assistance were associated with lower levels of parental empowerment ($p=0.006$). Posthoc tests showed that there was statistically significant differences between easy or very easy compared with difficult or very difficult access to assistance ($p=0.020$).

Parental empowerment in the service situation

A higher level of education was associated with a reduction in parental empowerment ($p=0.020$). We found statistically significant differences between parents with basic or secondary education and those with higher education ($p=0.014$, mean 4.20-3.90). Worries about the child ($p=0.012$) were associated with lower parental empowerment.

Those who had worries about the child had lower parental empowerment than those who had no worries ($p=0.008$). The functionality of everyday life in the family was associated with parental empowerment in the service situation ($p\leq 0.001$). Parental empowerment was below average (mean 2.0) where everyday family life was very difficult, in contrast to those for whom everyday life was easy (mean 4.2).

Parental empowerment in the service situation was positively associated with joint decision-making between service providers and parents ($p=0.028$). When decisions were made together (mean 4.1) compared to decision making by employees (mean 3.7) differed statistically significantly (0.042). Adequate access to information was associated with parental empowerment in the service situation ($p\leq 0.001$).

Access to information was enough or well enough had bigger information compared

with that those has insufficiently information ($p \leq 0.001$). Families' views being taken into account had associations with parental empowerment into service situation ($p = 0.045$) but after adjustment posthoc tests showed no statistically differences.

Parental empowerment in the service system

The experience of empowerment varied to according to the number of children in a family ($p = 0.022$). In families with a child parental empowerment were lower than families with more children mean (3.0-3.4). Families with children with special needs evaluated the realisation of empowerment better ($p = 0.035$, mean 3.4-3.1).

In the wider service system, parental empowerment was least realised (mean 2.0) for families for whom everyday living was very difficult, in contrast to those for whom every day living was easy (mean 3.3, $p = 0.047$) but after adjustment posthoc tests showed no statistically differences. Easy or very easy access to assistance increased parental empowerment ($p = 0.035$, mean 3.4-3.0).

Adequate access to information was associated with parental empowerment in the service system ($p \leq 0.001$). Access to information was enough or well enough had bigger information compared with that those has insufficiently information ($p \leq 0.001$). Parents' sense that their opinions have an association also increased their empowerment within the service system ($p = 0.007$).

Posthoc tests showed that those who had enough or well enough impact of parents familie's views had bigger parental empowerment than who had moderate impact ($p = 0.013$), (*Table 3*).

Discussion

This study has presented new information on the realisation of parental empowerment in the provision of services for families with children. The most significant results of the study was that families' difficulties in everyday functionality undermine the realization of empowerment at all levels. Therefore, professionals should pay more attention to confirm it.

The results show that parental empowerment is high in the family itself and in the service situation, and moderate in the wider service system. Kerppola (2021), Kalleon, Jahnsen & Østensjø (2019) and Vuorenmaa et al. (2015a) have obtained similar results.

Parents' self-confidence in helping their child's development, control over family life and experience of themselves as good parents contributed to their parental empowerment in the family.

High parental empowerment in the service situation may be explained by the family centre model which has changed the operating culture of family services (Pelkonen et al., 2020), enabling parents to decide on the services their child receives and work in collaboration with the professionals concerned.

Parental empowerment in the wider service system could be improved by involving parents more in developing services Social and health policies could influence this, and support the inclusion of children and adults of all ages (Ministry of Social affairs and Health, 2022). Employees can reinforce parental empowerment if they have adequate professional training and resources (Kerppola et al., 2016).

This study confirmed the findings of earlier studies, that a higher level of education have a potentially diminishing effect on feelings of empowerment the realisation of parental empowerment in the family and in the service situation (Casagrande & Ingersoll, 2017).

There may be different factors behind the understanding of the meaning of empowerment and thus can increase the courage to take a stand and express your views. In contrast to earlier findings, income level had no effects on parental empowerment (Leemann et al., 2021) or maternal empowerment (Vuorenmaa et al., 2016a, 2015a).

Low threshold services are for everyone equally accessible so that gender (Vuorenmaa et al., 2015b), education or income (Mercer et al., 2020) are not as an obstacle to get service or support.

We found that families with four or more children expressed higher levels of parental

empowerment at the service system level. This could reflect the fact that larger families has frequent contacts than smaller families do, and are therefore more involved in them. This is not something that previous data has shown. It is, however, worth paying more attention to families with only one child, to identify other factors that may increase parental empowerment. Previous data has shown that

worries about a child are associated with lower parental empowerment in the family and service situations. However, concerns about parenting and everyday functioning were more significant than concerns about the child. (Vuorenmaa et al., 2015b.)

Table 1. Background information on study participants (n=215).

Background variable	n	%
Gender		
Mother	175	81.4
Father	36	16.7
Other	4	1.90
Age		
< 30y	44	20.5
31-40y	139	64.7
> 41y	32	14.9
Civil status		
Married	132	61.4
Common-law marriage	58	27
Single parent, divorced, widow	25	11.6
Family form		
Family with two adults	188	87.4
Family with one adult	21	9.8
Education		
Basic or secondary education	61	28.4
Lower college	88	40.9
Higher college	64	29.8
Employment		
Worker	148	68.8
Student, unemployed, other	67	31.2
Number of children		
One child	66	30.7
2-3 children	113	52.6
≥ 4 children	36	16.7
Children with special support		
No	174	80.9
Yes	40	18.6
Number of children with special support		
One	32	14.9
Two or more	8	3.70
Age of children		
0->2y	53	24.7

2->4y	59	27.4
4->6y	62	28.8
6->7y	33	15.3
Gender of child		
Girl	94	43.7
Boy	119	55.3
Other	1	0.50
Day care of child		
Home	23	10.7
Part or full day care	163	75.8
Preschool	27	12.6
Worries about the child		
No	166	77.2
Can not say	15	7.0
Yes	33	15.3
Worries about family		
No	150	69.8
Can not say	21	9.80
Yes	42	19.5
Adequacy of sources of income		
Easy	86	40.0
Quite easy	84	39.1
Quite difficult	29	13.5
Difficult	16	7.40
Everyday functionality		
Easy	100	46.5
Quite easy	94	43.7
Quite difficult	18	8.40
Very difficult	2	0.90
Access to assistance		
Easy or very easy	83	38.6
Quite easy	70	32.6
Quite difficult	32	14.9
Difficult or very difficult	30	14.0
Decision-making		
Together	164	76.3
Family	13	6.0
Employees	14	6.5
Adequacy of acces to information		
Well enough or enough	104	48.4
Moderately	79	36.7
Quite insufficiently or very insufficiently	28	13.0
Impact of families' views		
Well enough or enough	53	24.7
Moderately	68	31.6

Quite little or very little	63	29.3
Can not say	28	13.0

*Comparisons with gender were made with two groups using t-test. Others was not involved in analyze.

Table 2. G-FES meter results and reliability according to Cronbach alpha coefficient (n=215).

	n	Mean	SD	Cronbach alpha	n of Items
Family	210	4.40	0.40	0.795	10
1. I feel confident in my ability to help my child grow and develop.	213	4.50	0.90		
2. I know what to do when problems arise with my child.	215	4.20	0.70		
3. I feel my family is under control.	215	4.40	0.90		
4. I am able to get information to help me better understand my child.	214	4.60	0.70		
5. When I need help with problems in my family, I am able to ask help from others.	213	4.00	0.90		
6. I make efforts to learn new ways to help my child grow and develop.	215	4.70	0.50		
7. When dealing with my child, I focus on the good things as well as the problems.	215	4.70	0.60		
8. When faced with a problem involving my child, I decide what to do and then do it.	215	4.40	0.60		
9. I have a good understanding of my child's disorder.	215	4.50	0.70		
10. I feel I am a good parent.	215	4.20	0,80		
Service situation	211	4.10	0.60	0.837	12
1. I have feel that I have a right to approve all services my child receives.	215	4.60	0.70		
2. I know the steps to take when I am concerned my child is receiving poor services.	215	3.80	1.10		
3. I make sure that professionals understand my opinions about what services my child needs.	214	4.20	0.90		
4. I am able to make good decisions about what services my child needs.	215	4.30	0.90		
5. I am able to work with agencies and professional to decide what services my child needs.	213	4.50	0.80		
6. I make sure I stay in regular contact with professionals who are providing services to my child.	215	4.30	0.90		
7. My opinion is just as important as professionals' opinions in deciding what services my child need.	215	3.80	1.10		

8. I tell professionals what I think about services being provided to my child.	215	3.90	1.00		
9. I know what services my child needs.	215	4.20	0.80		
10. When necessary, I take the initiative in looking for services for my child and family.	213	4.30	0.90		
11. I have good understanding of the service system that my child is involved in.	215	4.00	1.10		
12. Professionals should ask me what services I want for my child.	215	4.00	1.00		
Service system	209	3.20	0.70	0.854	10
1. I feel I can have a part in improving services in my community.	215	3.10	1.00		
2. I get in touch with my legislators when important bills or issues concerning children are pending.	214	2.70	1.20		
3. I understand how the service system for children is organised.	213	3.20	1.10		
4. I have ideas about the ideal service system for children.	215	3.40	1.10		
5. I help other families get the service they need.	215	3.10	1.20		
6. I believe that other parents and I can have an influence on services for children.	214	3.70	1.00		
7. I tell people in agencies and government how services for children can be improved.	215	2.70	1.10		
8. I know how to get administrations or legislators to listen to me.	214	2.60	1.20		
9. I know what the rights of parents and children are under the special education laws.	214	3.80	1.10		
10. I feel that my knowledge and experience as a parent can be used to improve services for children and families.	212	3.80	3.70		

Categories to yield three subscores, level of parental empowerment low (1–2.4), moderate (2.5–3.4), high (3.5–5).

Table 3. Realisation of parental empowerment according to background factors (n=215).

	Family			p-value	Service situation			Service system	
	n	Mean	SD		Mean	SD	p-value	Mean	SD
Parent background information									
Gender				p=0.154			p=0.212		
Mother	175	4.40	0.40		4.10	0.50		3.20	0.70
Father	36	4.30	0.40		3.90	0.70		3.00	0.90
Other	1	4.60							
total	213	4.40	0.40						

Age				p=0.311			p=0.525		
< 30y	44	4.50	0.10		4.20	0.10		3.20	0.60
31-40y	139	4.40	0.00		4.00	0.10		3.20	0.80
> 41y	32	4.40	0.10		4.10	0.10		3.00	0.70
total	215	4.40	0.00		4.10	0.00		3.20	0.70
Civil status				p=0.929			p=0.681		
Married	132	4.40	0.40		4.10	0.50		3.20	0.10
Common-law Marriage	58	44.0	0.50		4.00	0.70		3.00	0.10
Single Parent, Divorced, Widow	25	4.40	0.30		4.20	0.50		3.40	0.10
TOTAL	215	4.40	0.40		4.10	0.60		3.20	0.70
Family form				p=0.942			p=0.377		
Family with two adults	188	4.40	0.50		4.10	0.60		3.10	0.70
Family with one adult	21	4.40	0.30		4.20	0.40		3.40	0.70
Education				p=0.031			p=0.020		
Basic or Secondary Education	61	4.50	0.30		4.20	0.40		3.20	0.70
Lower College	88	4.50	0.40		4.10	0.60		3.20	0.70
Higher College	64	4.30	0.60		3.90	0.70		3.10	0.80
TOTAL	213	4.40	0.40		4.10	0.60		3.20	0.70
Employment				p=0.672			p=0.652		
Worker	148	4.40	0.50		4.10	0.60		3.20	0.70
Student, Unemployed, Other	67	4.40	0.38		4.10	0.50		3.10	0.70
Number of children				p=0.997			p=0.056		
One child	66	4.40	0.50		3.90	0.60		3.00	0.80
2-3 children	113	4.40	0.40		4.00	0.60		3.20	0.70
4 or more children	214	4.40	0.40		4.30	0.50		3.40	0.80
TOTAL	214	4.40	0.40		4.10	0.60		3.20	0.70
Children with special support needs				p=0.801			p=0.374		
No	174	4.40	0.50		4.00	0.60		3.10	0.70
Yes	40	4.40	0.30		4.10	0.40		3.40	0.80
Number of children with special support needs				p=0.178			p=0.868		
One	32	4.40	0.37		4.10	0.40		3.40	0.80
Two Or More	8	4.50	0.30		4.20	0.50		3.40	0.70
<u>Child background information</u>									

Age Of Childre				p=0.862		p=0.873		
Child 0-1y	53	4.40	0.50		4.00	0.60	3.10	0.70
Child 2-3y	59	4.40	0.50		4.00	0.60	3.10	0.80
Child 4-5	62	4.40	0.40		4.10	0.50	3.20	0.70
Child 6+	33	4.40	0.30		4.10	0.60	3.30	0.90
TOTAL	207	4.40	0.40		4.10	0.60		
Gender of child				p=0.251		p=0.81		
Girl	94	4.50	0.40		4.10	0.60	3.20	0.70
Boy	119	4.40	0.50		4.10	0.60	3.10	0.80
Other	1	3.90	-		4.10	-	3.10	-
TOTAL	214	4.40	0.40		4.10	0.60	3.20	0.70
Day care of child				p=0.776		p=0.052		
Home	23	4.60	0.70		3.80	0.70	3.00	0.60
Part Or Full Day Care	163	4.40	0.40		4.10	0.50	3.20	0.70
Preschool	27	4.40	0.40		4.20	0.60	3.40	0.90
TOTAL	213	4.40	0.40		4.10	0.60	3.70	0.70
Worries about th child				p=0.044		p=0.012		
No	166	4.50	0.50		4.10	0.50	3.20	0.70
Can Not Say	15	4.30	0.40		4.10	0.40	2.90	0.60
Yes	33	4.30	0.40		3.80	0.70	3.00	0.80
TOTAL	214	4.40	0.40		4.10	0.40	3.20	0.70
<u>Current status background</u>								
Worries About Family				p=0.055		p=0.185		
No	150	4.50	0.50		4.10	0.60	3.20	0.80
Can Not Say	21	4.40	0.30		4.19	0.50	3.30	0.60
Yes	43	4.27	0.40		3.90	0.70	3.10	0.80
TOTAL	213	4.40	0.40		4.10	0.60	3.20	0.70
Adequacy of sources of income				p=0.473		p=0.787		
Easy	86	4.50	0.40		4.00	0.60	3.20	0.80
Quite Easy	84	4.40	0.50		4.10	0.60	3.20	0.70
Quite Difficult	29	4.40	0.30		4.10	0.50	3.10	0.80
Difficult	16	4.30	0.50		4.10	0.60	3.20	0.70
TOTAL	215	4.40	0.40		4.10	0.60	3.20	0.70
Everyday functionality				p≤0.001		p≤0.001		
Easy	100	4.60	0.30		4.20	0.46	3.30	0.80
Quite Easy	94	4.30	0.50		4.00	0.58	3.10	0.70
Quite Difficult	18	4.10	0.40		4.20	0.60	3.20	0.80
Very Difficult	2	3.40	0.10		2.00	0.41	2.00	0.80
TOTAL	214	4.40	0.40		4.10	0.57	3.20	0.60

Access to assistance				p=0.006		p=0.079		
Easy Or Very Easy	83	4.50	0.40		4.20	0.52	3.30	0.80
Quite Easy	70	4.40	0.50		4.00	0.58	3.20	0.80
Quite Difficult	32	4.40	0.30		4.00	0.59	3.00	0.70
Difficult Or Very Difficult	30	4.20	0.50		3.90	0.63	3.00	0.70
TOTAL	215	4.40	0.40		4.10	0.57	3.20	0.70
<u>Background information related to the services</u>								
Decision-Making				p=0.149		p=0.028		
Together	164	4.40	0.40		4.10	0.53	3.20	0.70
Family	13	4.60	0.30		4.00	0.55	3.30	0.70
Employees	14	4.20	0.60		3.70	0.84	2.90	0.80
TOTAL	191	4.40	0.40		4.10	0.57	3.20	0.70
Adequacy of access to information				p=0.374		p≤0.001		
Well Enough Or Enough	104	4.50	0.50		4.20	0.60	3.40	0.70
Moderately	79	4.40	0.40		4.00	0.50	3.00	0.70
Quite Insufficiently Or Very Insufficiently	28	4.40	0.40		3.80	0.70	2.80	0.70
TOTAL	211	4.40	0.40		4.10	0.60	3.20	0.70
Impact of families' views				p=0.618		p=0.045		
Well Enough Or Enough	53	4.50	0.60		4.20	0.60	3.50	0.80
Moderately	68	4.40	0.40		4.10	0.40	3.00	0.60
Quite Little Or Very Little	63	4.40	0.40		4.00	0.60	3.10	0.80
Can Not Say	28	4.40	0.40		3.90	0.50	3.10	0.80
TOTAL	212	4.40	0.40		4.10	0.60	3.20	0.70

Discussion Contin.

In our study, having a child with special needs in the family increased the realisation of empowerment at the service system level. This might illustrate that co-operation with professionals and the care pathway is smoother where the relationship with the family centre is based around care for a child with special needs. It has been shown that the symptoms of behavioural disorders in children can be reduced where parents are more empowered and have good access to assistance (Damen et al., 2021). It is important

to note, however, that our study did not assess what type or level of concern about their children parents had.

Families' difficulties in everyday functionality emerged consistently across all levels of parental empowerment, as a factor which decreases its realisation. Moderate or lower-than-average everyday functionality has also been associated with lower realisation of empowerment in earlier studies (Vuorenmaa et al., 2015a, 2015b). Casagrande & Ingersoll (2017) noted, though, that even where empowerment was better

realised, service delivery was nonetheless poor for families with children with autism spectrum disorder. Concrete support may reinforce parental empowerment, thereby enhancing families' well-being and improving their timely access to the required services (Lenz-Becker et al., 2020; Vuorenmaa et al., 2015b).

Parental involvement in professionals' decisions about their children, and families' experience of their views having an association, were both associated with a higher degree of empowerment. Earlier studies have come to the same conclusion (Kerppola et al., 2016; Kerppola et al., 2019; Mercer et al., 2020). Access to relevant individualised information, and having an opportunity to make relevant decisions, support parental empowerment (Kerppola et al., 2019). Parents can provide their peers with support and advice (Mercer et al., 2020).

It would be worth exploring how parents would like to be able to influence their children's care and make relevant decisions. To understand parental empowerment more deeply, whether in the family or the family centre, more qualitative experiential data is needed, from women, men and children themselves.

Limitations: These results should be generalised with caution. The response rate was low, and we cannot know whether all the cover letters were distributed to parents as requested. Respondents were not registered, so reminders to answer the survey could not be sent. During data collection the Covid-19 pandemic caused challenges for family centre managers, who were involved in municipal sector strikes. Although the FES is a reliable instrument and has been validated for use in the Finnish context, some concepts of empowerment may be unclear to respondents. All of this may have affected response rates and the validity of the results.

Conclusions: Parental empowerment is realised quite well in services for families with children provided by family centres. The study has highlighted some needs for further development, to improve services and parental empowerment. Further attention must be paid to supporting the everyday lives of families, including those who have particular concerns and challenges. The

results may be used to inform the future design of inclusive policies and interventions to support the development of services for families with children and family centres, and the well-being of parents.

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