BørneBuddies in Copenhagen

“Every child has the right to...”
A BørneBuddy

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Background

• August 2015 Egmont Foundation: Competition
  Who can come up with an idea that supports families, who experience serious illness and death and helps preventing that their everyday life does not collapse?

• September 2015:
  Institute of Nursing wins 100.000kr to elaborate the idea and develop a full application to the Egmont Foundation.

• May 2016:
  Institute of Nursing receives 3.494.000kr from the Egmont Foundation and contributes with 1.800.000kr.
Background: Serious illness and family life

Children and teen-agers need to talk about their concerns when a near family member is seriously ill but they also need to live as children and teenagers, playing, laughing, playing soccer, shopping with friends, and going to school (Omsorgsmålingen 2013).
Aim

Providing support to healthy children aged 6-15 years, who experience serious illness (life-threatening and/or chronic disabling illness) and/or death in the family in order to create a breathing space for these children as well as provide opportunities of participating in social activities, they otherwise couldn’t participate in, either because of their own caring tasks or due to the caring tasks of the healthy parent.
Target group

- Young cares who provide or intend to provide care, assistance or support to another family member. They carry out, often on a regular basis, significant or substantial caring tasks and assume a level of responsibility that would usually be associated with an adult (Becker 2000: 378).

- The project also includes children who do not necessarily fulfill the formal definition of a young carer, because other adults take responsibility of the caring tasks. These children may experience that the home transforms from a safe haven to something unknown and unsettling in case of serious illness/death in the family and often experience how their concerns are not the first priority.
The Initiative

- Establishing a volunteer corps of students from The Metropolitan University College. The volunteer corps helps enabling everyday life activities during a difficult time, including preparation for school and participation in leisure time activities, such as playing, going for a bicycle ride, searching for Pokémons, making pancakes, or accompanying the child to soccer training.

- A BørneBuddy-course lasts four months, approx. 10 hours per month with the possibility of elongation.

- The initiative is non-therapeutic.
BørneBuddies and supervisors

- The BørneBuddies are each carefully selected through a written application letter and an individual interview with both project managers.

- The BørneBuddies have to present a statement of no previous convictions in respect of children, have no criminal record and covered by the obligation of professional secrecy.

- The BørneBuddies must implement a mandatory preparation course (2 ECTS) regarding: The child’s perspective, legal considerations, bereavement and resilience, the cognitive development and linguistic prerequisites of children – with an emphasis on how to initiate and complete the relationship with the child.

- During the 4 month BørneBuddy-course the BørneBuddies are supervised by a lecturer from the Metropolitan University College. All supervisors have gone through a preparation course delivered by Børn, Unge og Sorg (http://www.bornungesorg.dk/)
How far are we?

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BørneBuddies

- 10 different professions
- 120 contacts from potential volunteers
- A total of 67 have implemented the course.
- All highly motivated and a true pleasure to work with
BørneBuddies – what’s their motivation?

- Want to help
- Improve professional competencies
- Personal Development
- Theory - Practice
- A document statement of participation
- Relates to my education
- Opportunity to gain experience
- Other

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The children

- 42 (-3) are included so far
- Recruitment adapted to suit the families
- Mean age: 9.76 years (6-15 years)
The reason for participation
How is the child doing?

-Hvordan opleves barnets trivsel på nuværende tidspunkt? Vurdering af forældre/pårørende/den person projektleder er i kontakt med (ogen flere kryds)
Quantitative evaluation

Registration of families at visitation

Questionnaire to parents and children at the end of the intervention:
  - Did the BørneBuddy make a difference for the thriving and the everyday life of the child?

Questionnaire to BørneBuddies (volunteers):
  - Pre-questionnaire:  What are your expectations / motivation?
  - After-questionnaire: Did you make a difference for the thriving and the everyday life of the child(ren)?
    What did you learn from being a BørneBuddy?

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Qualitative research

24 families will be recruited.

Variation:
- Ill/dead mother, ill/dead father, or ill/dead sibling
- Age and gender child
- Deadly illness, serious somatic illness, serious chronic illness, serious mental illness, or death
- Family type: single parent, "nuclear family", or children of different marriages
- Social class
Qualitative research

Do BørneBuddies make a difference for the thriving and the everyday life of the children?

The child’s perspective

- Photo-supported individual interview with 24 children before, during and after a BørneBuddy-course (see Epstein et al. 2006; Whiting, L. 2015).

The child perspective

- Semi-structured interview with 24 parents before, during and after a BørneBuddy-course

- Individual interview with the student who has been BørneBuddy in the family (after the BørneBuddies-course has ended)
Did the BB make a difference? (boy 10 years)

Gitte: Did you talk with Sofie (The BB) about Magnus (ill brother) sometimes being irritating?

Albert: No

Gitte: Would you have liked to talk with her about it?

Albert: No – I wouldn’t – I don’t think that it should be about him

Gitte: No no – it should be about you?

Albert: Yes – that was why we had her……….so I could get some freedom

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Did the BB make a difference? (girls 9 and 11 years)

Siljemarie and Luna-Emilia:

*We bake with her, do homework, go for a walk. We talk with her about stuff – how it is ...how it is in school or how mom (chronic ill) is doing.*

*So we make more things with her than we did – do with mom. ‘Cause our mom can’t do that many things.*

*You can tell Jessica (The BB) that you are having a difficult time in school which you can’t tell mom and..... if you are afraid or something.*

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Did the BB make a difference? (mother)

Alexandra:

*Very practical – down to earth - I mean useful in the middle of a crisis. I mean – because sometimes for instance with the Cancer Foundation – we are supposed to sit and talk about how we are doing. Fine! And your relationship with your partner and the illness and all that stuff ….and then you walk away and you are standing in chaos in one way or another – right. Because the chaos – they don’t go into the chaos and – how should I put it – help with it. They don’t do that. You can go there and you can sit and talk. And that’s it. Here (with the BB) somebody is making a concrete difference……Which is what you need. It’s daily life and it’s the financial situation. First then we can talk about how bad we are feeling. I just mean – it’s the basic things – at least that is my experience.*

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Facilities, homepage and video

- https://www.phmetropol.dk/bornebuddies
- https://www.dreambroker.com/channel/avqrsxo0/bw8ln98k

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Literature

- Söderbäck, M., Coyne, I. & Harder, M. 2011, "The Importance of Including both a Child Perspective and the Child's Perspective within Health Care Settings to Provide Truly Child-centered Care", *Journal of Child Health Care* 15(2): 99-106