BECOME.

THE CHARITY FOR CHILDREN IN CARE AND YOUNG CARE LEAVERS

Submission to Independent Review of Children's Social Care: call for evidence

March 2021

Become is the national charity for children in care and young care leavers. Our vision is that care-experienced people have the same chances as everyone else to live happy, fulfilled lives. Our mission is to help children in care and young care leavers to believe in themselves and to heal, grow and unleash their potential. We work alongside them to make the care system the best it can be.

Response to call for evidence questions

1. In which areas of children's social care do you think there is very robust research and evidence? Please provide this evidence where possible.

Previous review work, particularly that which has engaged with the views and experiences of care-experienced children and young people, provides a solid evidence base on the considerations, challenges and recommendations for providing loving, stable and safe care. This includes but isn't limited to:

- Care Crisis Review
- The Care Inquiry
- Achieving emotional wellbeing for looked after children: A whole system approach
- Blueprint for a Child-centred approach to Children and Young People in Public Care
- Independent Care Review (Scotland)
- Reports from The Care Experienced Conference

The Child Welfare Inequalities Project (CWIP) and subsequent work from CWIP team members makes a strong evidence-led case for establishing inequalities as a core concept in policy and practice, illustrating how rates of child welfare intervention affect children and families differently based on characteristics such as deprivation, ethnicity and location.

2. What do you think are the key findings from this research?

Key findings from previous review work include:

- The 'golden threads' which contribute to positive experiences and outcomes are *relationships* (i.e. how the system promotes and nurtures loving and trusting relationships which go beyond simply a child's time in care), *stability* (i.e. how the system promotes consistent and steady experiences which allow children to heal and thrive), and *voice* (i.e. how the system ensures children's voices are heard and given due weight in decisions made about their lives).
- 'Permanence' is not the same thing for each child and not connected with the setting they live in or their legal status. One route to permanence is not necessarily better than another. There sometimes exists in policy and practice an unhelpful 'hierarchy' in care which assumes certain settings or legal routes are favourable (i.e. see recent government rhetoric around "adoption where possible").
- Approaches must be consistent with the structures and principles that underpin children's rights and particularly those enshrined in the UN Conventions on the Rights of the Child.
- Government cuts to local authority's children's services budgets, in the context of widespread changes to the welfare system and funding for wider public services, has resulted in significant pressure on the ability of local authorities to discharge their statutory duties to children and their families.
- There are large scale inequalities and steep social gradients in child welfare, and the single most significant influence on children's social care intervention is poverty. Currently, children in the most deprived 10% of small neighbourhoods in the UK are over 10 times more likely to be in care or on protection plans than children in the least deprived 10%.

3. In which areas of children's social care do you think there are evidence gaps or conflicting evidence? Please provide this evidence where possible.

Lack of data on adults who have experienced care as children

[Existing annual SSDA903 returns](#) from local authorities do not require information to be shared on care leavers who are supported as former relevant children beyond the age of 21, despite the Children and Social Work Act 2017 extending available statutory support for care leavers until age 25. This disconnect prevents evidencing of the impact of legislative and other changes.

Robust data is not available on key 'outcomes' including homelessness. Often-quoted statistics on the prevalence of homelessness for care leavers are based on very small samples (e.g. [Centrepoint's From Care to Where report](#), [Crisis' Hidden Trust About Homelessness report](#), or [older explorations from academia](#). Similarly, the [evidence around care-experienced people in prison or on probation](#) is poorly understood and existing information is based on small samples from many years ago with non-specific definitions – [see here for additional information](#). This extends too to a lack of detailed qualitative analysis of life after 25 years of age – what care experiences did care leavers in the justice system have, what placements or interactions with professionals etc?

Longer-term impact of recent trends in care (i.e. growing use of semi-independent and independent and out-of-area placements)

The numbers of children living in out-of-area placements, including distant placements, has [soared in recent years](#). Aligned with this problem has been the [explosion in the use on unregulated independent and semi-independent placements](#). Unstable experiences in care and the rising number out-of-area and unregulated placements can be traced to the system's failure to adapt to the changes in who it cares for – [increasingly older children and teenagers](#).

The impact of these very recent trends in care on experiences in and leaving care, and of outcomes for adults who have left care, aren't well understood (i.e. how does experience of semi-independent or independent placements at age 16-17 impact on outcomes and experiences compared to those who have remained in a regulated foster or residential placement until age 18?). Although local authorities are expected to place children according to their individual needs, we do not know enough about the group- or system-level impacts these very recent changes in care have had.

This is particularly relevant in the context of the [government's proposals to further formalise the use of semi-independent and independent placements](#) for 16-17 year olds which will continue to be unable to provide care.

Impact of poverty and deprivation on child welfare intervention

Evidence from the [Child Welfare Inequalities Project](#) and [other academic work](#) suggests that variation in child welfare intervention can be largely – but not entirely – explained by structural factors such as levels of poverty, deprivation and income inequality affecting families in particular areas. This is in conflict with the [National Audit Office's work](#) which claims that deprivation only accounts for 15 per cent of variation in LA Child Protection Plans. [See here for further discussion](#) of this conflicting evidence.

The differences above promote different policy solutions. The latter claims which give more weight to practice variation in driving variation have been favoured in recent years and have primarily driven policy developments focused on [improving social work practice](#) and [rewarding 'innovation' in children's social care](#). This has been at the expense of other work tackling structural disadvantage and the conditions which lead to increased need for social care services.

Sibling separation and contact

Data on the extent of sibling separation both within and outside (i.e. for those in care with siblings who leave care) is patchy. A recent BBC investigation based on over 200 Freedom of Information requests to local authorities revealed that more than 12,000 children in care were not living with at least one of their siblings. In 2015, a report found that 49.5% of sibling groups in local authority care are split up, and only 1% of sibling groups who were all placed together were living in residential care. The most recent data shows that the number of sibling groups not living together remains high, with 450 sibling groups (1,340 individual children) not placed to plan. Given the increasing age profile of children in the care system and resultant additional demand on residential placements – where sibling separation is more common – we need better collection and publication of data around sibling separation to make this a key priority for government and local authorities.

Evidence suggests that older children within care are particularly concerned about seeing their siblings enough, and contact with family or friends is also recorded as the primary reason for over half of episodes of children going missing from foster care. Understanding the numbers of young people who don't regularly see their siblings in care is imperative to driving policy and practice attention towards this issue and respond to what children and young people say.

Intersectionality

There is a lack of disaggregation of the data and/or research targeted at sub-groups within care-experienced population, although some older mostly qualitative work exists exploring the experiences of particular groups (e.g. those who identity as LGBT+). In particular:

- Disability: There is a significant gap in knowledge around mild to moderate learning disabilities and conditions such as autism and dyslexia. There is also very little known about the prevalence of physical disabilities amongst young people in or leaving care. This is despite there being 75 per cent more young people with disabilities in care than those in the general population. Many young people in or leaving care have hearing difficulties or speech and swallowing difficulties, perhaps due to neglect or physical abuse.
- Health: Very little is known about the health conditions of young people in or leaving care and particularly their life-long morbidity indicators. While local authorities are under obligation to arrange a health assessment by the looked after children nurse (forming part of the care plan), this is often completed inconsistently or poorly and there exists little analysis of the implications. The forthcoming survey of the mental health of children looked after should fill a current evidence gap around mental health for children in care and care leavers. There is not enough examination of possible genetic/hereditary conditions, particularly those that are a result of neglect such as foetal alcohol syndrome.
- Young parents: There is a lack of understanding of the experience of young parents or parents-to-be either in care, or for the years after leaving care. There are studies that look at the effectiveness of interventions during pregnancy and immediately afterwards, but these are short term and there is little understanding of what happens when the intervention ends.

Rights and entitlements

The care system has seen welcome development in the scope and depth of the entitlements guaranteed for children in care and care leavers through legislation introduced since the Children Act 1989 (e.g. Setting Up Home Allowance, PA and Pathway Plan extension to 25, HE Bursary etc). However, the extent to which these rights and entitlements are – intentionally or mistakenly – withheld from young people isn't well evidenced or understood. Young people face enormous

challenges simply accessing what they are legally entitled to; supporting action to correct poor practice from professionals working in children's social care is a regular part of Become's advice and support work.

The All-Party Parliamentary Group (APPG) for Looked After Children and Care Leavers explored awareness and receipt of entitlements through its Entitlements Inquiry in 2013 (and a follow-up in 2014). We do not know enough about if and how strengthening and expanding entitlements leads to demonstrable change for young people, or if a disconnect between practice 'on the ground' undermines these efforts. This is particularly important given the recent extension of leaving care support to all care leavers up to age 25 through the Children & Social Work Act 2017.

Education

Existing work around care-experienced learners has focussed on schools and higher education settings, but less well known is how children in care and care leavers progress to and succeed in further education and other non-advanced education, as well as apprenticeships and other technical education or training routes. Ongoing work from the Learning & Work Institute and Neil Harrison at the Rees Centre in Oxford are some of the few exceptions.

Immigration

Recent concerns around the ability of children in care and care leavers to apply for settled status through the EU Settlement Scheme has highlighted the poor existing evidence base on nationality and immigration support practice within the care system. Data is not routinely collected on nationality of children in care and subsequently too little attention is paid to regularising immigration status for children in care, particularly those who were born in the UK themselves but have lacked the documentation, legal advice or financial support to do so earlier and importantly before they turn 18. We do not know how many children in care face additional immigration challenges or how consistent the support they receive from children's services is in navigating these issues. See work from the Refugee and Migrant Children's Consortium, Coram Children's Legal Centre and GMAIU on this in the context of the EUSS.

4. **Do you know of any evidence, analysis or research that challenges current practices in children's social care? Please provide this evidence where possible.**

See responses above.

Contact

For further information, please contact:

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