

## Summary of the All-Party Parliamentary Group for Looked After Children and Care Leavers

Wednesday 26<sup>th</sup> June 2019

6.00pm – 7.30pm

Committee Room 9, House of Commons, Westminster

**Chair:** Steve McCabe MP, Chair of the APPG for Looked After Children and Care Leavers

**Speakers:** Kerry Littleford, Hackney Council; Rachel Sandford and Oliver Hooper, Loughborough University and care-experienced young people from Newham.

**Panel members:** Earl of Listowel; Anne Longfield, Children's Commissioner.

**Topic:** Promoting access to health services and community activities for children in care and care leavers.

### Kerry Littleford

Kerry began by introducing herself as someone with experience of care who now works in a public health role in Hackney. Kerry noted that she first noticed at university how she had missed several opportunities for developing skills which the vast majority of her peers had, such as the ability to swim, to drive and to ride a bike.

*“All of these things move you faster than your feet can. I couldn't move that fast.”*

Kerry spoke of how it always felt too late to learn – she would watch films where people jumped into water and knew it was something she wasn't able to do. Only as an adult has she recently learned to cycle and is currently learning how to drive.

Kerry is currently running an immunisation campaign in Hackney, but highlighted that she was unaware of her own immunisation status. Unfortunately, some of the statistics around immunisations for looked after children are getting worse. Kerry argued they should always be improving.

*“It should always be the aspiration of the local authority to say ‘you're in my care now, you're going to do better than your peers’.”*

Different groups of people experience inequalities in different ways, and young people in care face several additional barriers which prevent them accessing and participating in health services and community activities. Kerry noted that these inequalities not only impact on physical health but affect young people's emotional wellbeing, confidence and their ability to exist socially in the world.

Kerry suggested that local authorities were in a unique position to be able to tackle these barriers through a holistic focus on wellbeing needs, bringing together the different people in a child's life to provide the required support.

### Rachel Sandford, Oliver Hooper and care-experienced young people from Newham

Rachel introduced the work she and others at Loughborough University (and Leeds Beckett University) have been doing exploring care-experienced young people's participation in sport and physical activity. Their research found that young people in care did not feel they had the same access to sport and leisure opportunities as their peers, yet particularly valued these opportunities when they did participate; there are a number of individual physical and mental as well as community benefits to participation in sport or physical activity.

Rachel and her colleague's work demonstrated how access and opportunity varied considerably by context – there are often disparities dependent on the placements which young people find themselves in, and these can change significantly every time they have to move.

After-school sport was identified as a “*missing space*” where many young people in care faced barriers not experienced by their peers. Some children reported feeling concerned about stigma if they were to attend something with their social worker, for example. Relationships were identified as key to positive experiences – both companions to join opportunities with and trusted adults who could support their involvement by taking them to clubs and helping with the purchasing of kit of equipment.

Their research involved creating a series of concept cartoons derived from stories which young people in care had shared with them. Oliver offered one example which illustrated the experience of a young person unable to join her football team's photo due to safeguarding concerns; she felt the decision to allow her to be in the photo or not should have been made by her foster carer rather than her social worker.

Some of the young people from Newham who contributed to the research offered their own views and experiences. One young person noted that their foster parents were really aware of what was available in their local area and helped them get a card for gym access, and urged decision makers in the room to give foster carers the flexibility to do these things. Another said they weren't encouraged to participate in football despite their interest as it was not something which girls in foster care were expected to be doing.

#### Anne Longfield, Children's Commissioner

Commenting on the previous speakers' contributions, Anne highlighted the importance of stability as a cross-cutting theme; stability in terms of placement, school and support from professionals is key to facilitating access to appropriate health services and opportunities for pursuing a healthy lifestyle. It also provides the basis for understanding what's on offer in a particular area.

*“You have to know an area before you can really take advantage of what's around.”*

#### Questions, comments and discussion

The Chair opened up to questions and comments from attendees and contributors on Twitter and by text.

One attendee highlighted that young people often aren't aware that there can be funding available to support them in participating in activities. When they were younger, they always had to consider the costs and financial impact on their foster carers which limited their involvement with different community opportunities.

Eluned Parrott, Director of the Unite Foundation, raised that any policy asks must be sensitive to the different arrangements within each home nation and consider the devolved context.

The Earl of Listowel noted the importance of support for those who are supporting young people; carers and professionals need appropriate training and development. A young person in attendance agreed and suggested that foster carers and social workers should receive training on the importance of being active, particularly the former who are a more consistent presence in young people's lives.

*“Foster carers are with us 24/7. Social workers are maybe there for 10 minutes every six weeks!”*

Attendees heard from a young person who did not receive any help from their foster carers at age 14 with going to the GP or the dentist, noting that teenagers can still feel nervous and apprehensive and may need support from trusted adults.

One attendee highlighted that their local authority provided free leisure passes for looked after children, care leavers, carers and foster carers – see [Fit and Active Barnet passes](#). It was suggested these should be standardised and replicated elsewhere as part of Care Leaver Local Offers. Another attendee noted their local authority provided each young person in their care with a monthly allocation of money which they could use to access arts or leisure opportunities.

Anne Longfield, Children’s Commissioner, suggested that any free passes or opportunities open to young people in care should also allow them to ‘bring a friend’. People often don’t want to do things on their own and need some peer support. It was suggested that all arts centres, leisure centres and services which receive public funding should be issuing free opportunities to young care-experienced people.

Kerry raised the difficulty of providing some specific, direct support for young people in and leaving care whilst not wanting to additionally label or create very visible ‘special treatment’. The Chair, Steve McCabe, raised that young people often reported feeling stigmatised by their peers and others because of their care experience; this is something echoed by school efforts to prevent students on free school meals facing bullying by having systems which do not visibly mark them as different to others.

Attendees heard from one young person who was placed out of borough and therefore found themselves unable to engage with their local resident authority’s health services at no cost, unlike other young people in care in the area. Instead, they were forced to pay for them.

A looked-after children’s nurse offered their views from their professional experience, noting that getting details within the Health Plan is a key mechanism for creating action. Unfortunately, they had seen too many young people sent to the back of waiting lists again and again each time they moved placement.

Kerry spoke about developing a sense of entitlement – that she deserved to have opportunities as much as other people who grew up with a stronger sense of entitlement through their families or backgrounds. Developing confidence is crucial, but another attendee noted that many young people often lack the confidence to return to services which they have had negative experiences with the first time; we need to ensure services work the first time around.

A young person highlighted the importance of physical activity or community activities for many young people in care, particularly in reducing loneliness and social isolation. If people are struggling with their emotional wellbeing and feel confined to their rooms, even a short break playing football might provide the space they need to feel better.

However, one young person pointed out that, whilst participation in activities is often beneficial, young people can feel as though they are pushed into doing things because people think ‘it’s good for them’, and don’t listen to the alternative hobbies or interests which young people articulate. Rachel highlighted the importance of finding things which mattered to each individual child.

*“Identity is often lost when you’re in a system of processes and structures.”*

Attendees heard from a number of young people who commented on the cliff-edge of support when they reach 18; suddenly many find themselves battling to access the same health services or support afforded to them only weeks previously.

*“We’re not adults immediately at 18. We need support up until age 21 or ideally 25.”*

#### Closing remarks

The Chair thanked the speakers, additional panel members and everyone for coming and contributing.

The next meeting date will be confirmed and sent to the APPG mailing list as soon as possible.

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#### **Written comments from care-experienced young people**

As part of the meeting, we asked attending care-experienced young people to answer two short questions to help APPG members, decision makers and others understand the views of children in care and young care leavers. A summary of these responses is included below.

*What have your experiences been like accessing health services (e.g. GP or dental check-ups) and community activities (e.g. sport and leisure facilities)?*

- When moving placements changing my GP took ages to sort out.
- I felt like my foster carers were very aware of what needed to be done in order to help me.
- Experience of accessing the health services was useful. However for community activities wasn't as much as I have always been isolated from it.
- My experience has been good. I've had the support I need from my children's home and health professionals.
- I've accessed all the sports I wanted to and my school is excellent for sports.
- To be healthy I need to learn how to cook and shop.
- Independent support accommodations aren't regulated so depending on the worker depends whether you get help or not, so it means it is pot luck if you get help with this.
- The health passport needs to be better so you know your health from when you were little. I can't remember what happened so I need professionals to remember for me!
- When consulting we have found that the main problem for care leavers is mental health and loneliness. The transition from a care home/foster placement into independent supported accommodation or your own place – it's a massive drop from a family life to being on your own all the time. There needs to be a wellbeing service for children in care and care leavers.
- When moving out of area existing activities and healthcare arrangements don't and can't continue.
- Care-experienced young people often have difficulties with food, diet, healthy eating. I rarely hear of young people being taught about this and instead their food intake is restricted.

*What do you think needs to change?*

- It needs to be easier to change doctors.
- It would be better if social workers made me more aware of what activities were available.
- Communication between social workers, managers and the child in care needs to be clearer and quicker.

- Foster carers need to have more of a say over what a child can do (e.g. sleepovers, sporting activities etc).
- There should be more funding for young people for activities.
- More youth clubs/activities for just children in care.
- A ring-fenced budget for this – e.g. youth workers.
- All young people in care should get a free leisure pass with the local gym ran by the council.
- Training for social workers on how to get young people engaged in sport – maybe put it into the degree?
- The health passport needs to be the same in each council.
- Ofsted should check independent support accommodations. It should not be down to luck!
- A mentor programme.
- Group work where care leavers come together and support each other whilst doing an activity – e.g. gardening, motorbikes (whatever young people are into).
- Discuss with young people what extracurricular things they used to do at home. Acknowledge these things as important parts of young people's lives and if they can't continue, find ways to maintain relationships if possible and/or find suitable alternatives alongside the young person.
- More projects/work like that of the [Green Fingers project](#) (Worcestershire) specifically focusing on how to live a healthy lifestyle.