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Compulsory Supervision in Scotland: The Unique Case of Children Looked after at Home

*The 'Overseen but often overlooked' study
Some findings*

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Before we start:

- Thanks to the research participants and all who helped us connect with them.
- Thanks to Barnardo's Scotland for providing funding to support this study.
- Thanks to all colleagues who worked on the study.

And a note to acknowledge the issues covered in this study are often highly sensitive for children, young people and families, and for the people who work with them.

Scotland differs from the rest of the UK (and most of the world)

Scotland has a long tradition of its own progressive laws and systems relating to the care, protection, and supervision of children. Most notably, four decades ago, in the wake of the Kilbrandon Report, the children's hearing system was established to be a single system to make decisions about children to commit offences and those who have offences committed against them.



UK-wide child and family initiatives (e.g. Sure Start, Aiming High for Disabled Children) are often implemented very differently in Scotland. And, there is no 'troubled families' initiative in Scotland.

Scottish Children's Hearings System -101 - (typical route)

Anyone (usually social work) with concerns about a child on grounds of care and protection, offending or persistent non-attendance at school can make a referral to a Children's Reporter (~15,000 CYP referred / annum)> The reporter decides if case should go before a hearing (i.e. compulsion is likely to be necessary)> Local authority submits a report based on multiagency input, other reports and representations are prepared as necessary> A Panel of three (trained) lay people conduct the hearing with parents, child, and relevant professionals in attendance, they aim for an 'ethos' that is approachable, constructive, full and frank> Panel decisions are made on the best interests principle> Decisions include compulsory supervision and measures of protection, guidance, treatment, or control> each case returns to a hearing for reviews> If permanence away from home is recommended at any stage (e.g. adoption) the case is finalised at a Sherriff Court.

Being looked after in Scotland

If at the hearing the panel make a **Compulsory Supervision Order (CSO)**, the child becomes 'looked after' and responsibility for their care, protection and control is assumed by their local authority (usually enacted by social work departments).

A child can still be looked after without being required to live with kin, foster or residential carers (i.e. away from home). Indeed, between 1/4 and 1/3 of Scotland's 15,400 looked after children and young people live at home usually with their birth family.

Background and aims of the study

Across the sector colleagues were coming across a) acknowledgement that children on home supervision have different needs to other looked after children, b) concerns that these needs are not met, c) lack of visibility / recognition in policy and practice discourse. But very little research and 'hard' evidence, the exception being education stats that repeatedly showed this group had poorer outcomes than the general population and other looked after children.

We aimed to gather, explore, and extend understanding about the unique issues for children and young people looked after at home in Scotland including outcomes, needs, and service provision.

Outline of methods and reports

Mixed methods included a literature study, national survey of providers (n=66), service profile case studies (n=5), key informant interviews (n=7) and young people's discussion interviews (n=8).

Analysis consisted of descriptive and some inferential quantitative analysis along with thematic qualitative analyses of textual material. The findings were integrated across the study.

The study is reported in four documents available through the CELCIS website: Report 1 looks at existing knowledge, Report 2 outlines the study methods and addresses needs and outcomes, Report 3 covers provision of support and how well this addresses needs, Annex 3 provides further background by outlining the case studies.

Some key findings from literature review

During 40 years just four studies have focused on home supervision, and a small number more include some information or differentiate children looked after at home. Unsurprisingly, all of the main sources acknowledge of gaps in knowledge.

The existing studies suggest that these children's outcomes are poor and their needs can be as great as other looked after children.

A few studies hint that children face some unique challenges on home supervision.

Some studies show that good support or intervention is helpful.

Our new findings about needs

Wide agreement that needs are as great as other looked after children, and often described as severe, multiple, and complex.

The (usual) plethora of structural, familial, and individual issues/problems were listed. Plus some unique issues arising from being looked after at home (continued exposure to a problematic environment, with the additional insecurity of being on compulsory supervision).

Strong recognition that the family is a whole, and that to help children and young people, all family members' needs should be addressed.

Our new findings about the nature of provision

We identified diverse service types that differed on eligibility, targeting, content / focus; geographic coverage; age ranges served; service scale and size).

Reported challenges in working with these children and their families - most could equally be portrayed as barriers to using services.

Reported approaches thought to be effective, eg earlier intervention, identifying / tackling underlying issues rather than quick fixes, working with the whole family, building and maintaining relationships, being flexible, listening to children, sharing information, and diverting resources back to this group.

Many providers noted forthcoming service improvements.

Our new findings on the extent of provision

We could not identify every service provided for children and young people looked after at home in Scotland, nor could we quantify every need of every relevant child or young person.

However, our 'back of the envelope' estimates suggest a large mismatch between need and the provision, e.g. we might have expected to see two or three times the amount of provision than seems to exist.

These were rough calculations, but they are consistent with the expressed views of many participants in this study and in earlier research.

In particular we note that:

- Some providers claim that young people and families often 'resist' or 'avoid' intervention.
- Young people claim that services need to be delivered differently (more flexible, relationship-based and responsive to their views).
- Many service providers also acknowledged that services and support are patchy, insufficient, or inappropriate.
- Several participants provided evidence that resources are diverted away from these children and families, often with other looked after children taking precedence in the battle for scarce resources.

Some conclusions from the study

Home supervision should provide an unparalleled opportunity to support some of our most vulnerable children and families, but this study shows the benefits are often not fully realised. Most often this is because support is not available or resources diverted elsewhere. In addition, the study suggests that where services are available they are not always optimal for this group.

There is a strong case for multi-level and sustained change to systems and service provision. In particular, we suggested change was needed to cultures that enable children and young people to be formally overseen whilst their needs are often overlooked.

The practice and policy response to the study

This study was broadly welcomed and agreed to be fair, although some providers were sensitive to any implication of criticism they felt it unfair to criticise them, given the difficult times they face (e.g. austerity). CELCIS policy colleagues frequently shared and explained our emerging findings to government and senior sources. In this way they were able to use our findings to begin to shape the development of the emerging Children and Young People (Scotland) Act 2014 – this process continues as guidance is produced. After the study, Barnardo's also produced a set of policy recommendations; their strong advocacy undoubtedly gave further force to our findings. Local authorities across Scotland are now working to consider how best to support families, and increasingly recognising the needs of children on home supervision.

So, what's 'troubling' these children and families?

Clearly there are many differences between home supervision in Scotland and the 'troubled family' initiative in England. But, I'd like to consider whether there are some core similarities; for example, the extent to which:

- these families are facing the same complex plethora of problems?
- policies/practice focus on deficits/risks in families not structures?
- there is a demand for big/lasting change with minimal intervention?
- a group of children/families is marked as a lower priority for resource?
- insecurity/anxiety may arise from being in the gaze of social services'?
- there are stigmatising effects of labels 'on supervision' / 'troubled'?
- there is resonance with an older (discredited?) discourse of 'problem families'?

A final critical reflection

Our evidence, and some early evidence from the troubled family initiative, shows that when resources can be made available, some heroic services can deliver (short-term) benefits to individual families; although sadly, it also shows that sufficient resources are often not made available. I worry that this evidence could provide ammunition to those who blame families for their troubles, and enable them to divert resources or resist wider structural change.

Comments, reflections, queries, and requests for more information would be most welcome:

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Limitations of the study

We include views from children and service providers, but others' views are also important (e.g. parents, decision makers and other key stakeholders)

We only cover needs, outcomes, and service provision; but other aspects are important, e.g. decision making processes, lived experiences, diversity dimensions, alternative interventions, and etc.)

We could not follow children and families across time to track their changing outcomes or examine the contribution of other factors.

Our sample sizes and response rates restrict the generalisability of some findings.

Some selected quotes

There seems to be a tacit acceptance that the care system offers 'light touch' interventions to those who are accommodated at home, with progressively more resources and support offered to those who are accommodated elsewhere... This is reflected in a reported loss of early intervention resources. Staff have no doubt that young people who are looked after at home are not a priority for through care and after care services (Service provider).

I think it's universally recognised across the sector, that the outcomes for these young people are particularly poor. And it seems to me that quite often in local authorities, they don't get the priority that others get. So, you know, I think, what would probably be fairer if the whole group were considered as care leavers then an assessment is made of their needs... on what they actually require in terms of support rather than where they've come from (Service provider).

Everybody needs to be a bit more upfront about what they do and don't provide for these young people. I think that local authorities and other providers, are all guilty... they're not even on the radar really... I think that it would help us all to be frank about what the needs are of these young people, what we are actually providing and what we can't provide because there is going to be a massive cost of providing this level of support to these young people (Service provider).

Most workers give up on you...I've had people say to me 'you're never going to change'. The staff [here] actually listen to you, and they don't give up on you. Things changed for me because my worker listened to me and respected me, so I listened too, and respected her. (Young person)

...I like coming to [project] because they were like honest people, if you know what I mean, [they] all work hard and do things and that's the kinda person I want tae be... (Young person)

... not to pressure you intae daeing things... they were helpful, they said that like whatever I needed to do they'd help me tae dae it. (Young Person)

...now that all of the professionals are out of my life I can really get on with my life. I can go look for jobs, I can go to school without having to meet up with people [...] when I started working with them I was only 12/13 and I just did not know what was happening, and I just felt like I just didn't want them in my life, because I just didn't see the point of them... (Young person)

There's other services that I will probably need help with in the future like, em, flats and stuff like that, like housing support kinda stuff like that. (Young person)

... I remember social workers trying to tell a women, you'll need to quit your job because your daughter is unruly and I said, 'she won't get any benefit if you make her quit the job'. (Service provider)

...you are immediately engaging with the family and I think that's a key factor in having success... If you meet with the families, support them and empower the parents we see more positive results with the young people. (Service provider)

I think for a lot of these children their differing outcomes will tie directly to their early years experiences... (Service provider)

Self-harm is one manifestation of this, presenting as a big issue for this group of young people, but not generating a mental health diagnosis. (Service provider)

... [for] some kids sadly the thought of going to a Children's Hearing has no impact on them at all because it's a regular thing for them. Some it does, because there's a big fear that they will be taken away from home. (Service provider)

One of the issues for me in terms of young people is confidentiality. How many people need to know about their lives? How many professionals need to sit and talk about every little row they've had with their mother or father and aggravate that? Or if they've had sex with somebody? (Service provider)

These young people, the money was not an incentive, whereas looked after and accommodated children and young people are 'that's mine', and 'I'm entitled to it', and 'I'm going to get it'. Whereas [young people] looked after at home, I think some were in the dark about it, some of them weren't aware that they had this entitlement.

(Service provider)

We can't give trauma counselling to somebody who doesn't want trauma counselling. We just have to provide and keep them safe in the hope that when they are ready that they will take that service. (Service provider)

If you've got a child who doesn't want to go [to school], they're not going to go, then you're looking at what other options are there for them and you continue to try to work with them. (Service provider)

There were times when one of our helpline workers was on the phone to [young person] in one room, while another was speaking to his mother on another line in the room next door, while a third worker drove to the house to intervene (Service provider).

Children are more likely to become smokers themselves and not be encouraged to quit, often getting cigarettes from smoking parents or siblings. They see the behaviour as normal and do lack aspiration to change behaviour, often having started at a young age (Service provider).