Challenges from the Frontline – Revisited

Supporting families with multiple adversities in Scotland during a time of austerity

September 2020
Susan Galloway

EVERY CHILDHOOD IS WORTH FIGHTING FOR
# Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Foreword</td>
<td>3</td>
</tr>
<tr>
<td>The Promise: a blueprint for intensive family support</td>
<td>4</td>
</tr>
<tr>
<td>Introduction</td>
<td>7</td>
</tr>
<tr>
<td>The policy context</td>
<td>9</td>
</tr>
<tr>
<td>THE IMPACT OF AUSTERITY ON FAMILIES</td>
<td>13</td>
</tr>
<tr>
<td>Destitution</td>
<td>15</td>
</tr>
<tr>
<td>Stress, mental health and family relationships</td>
<td>19</td>
</tr>
<tr>
<td>Isolation and exclusion</td>
<td>20</td>
</tr>
<tr>
<td>Housing insecurity</td>
<td>22</td>
</tr>
<tr>
<td>SEVERITY AND COMPLEXITY OF NEED</td>
<td>26</td>
</tr>
<tr>
<td>Demand for support</td>
<td>27</td>
</tr>
<tr>
<td>Severity of families’ problems</td>
<td>28</td>
</tr>
<tr>
<td>Why are families’ problems more severe than before?</td>
<td>29</td>
</tr>
<tr>
<td>The impact of adversity on children – teachers’ perspectives</td>
<td>33</td>
</tr>
<tr>
<td>THE RESPONSE: SUPPORTING VULNERABLE FAMILIES</td>
<td>37</td>
</tr>
<tr>
<td>Intensive family support services: changes since 2013</td>
<td>38</td>
</tr>
<tr>
<td>Families’ access to help – how has this changed?</td>
<td>43</td>
</tr>
<tr>
<td>Supporting the workforce: ‘Holding the hands of those who hold the hand of the child’</td>
<td>45</td>
</tr>
<tr>
<td>THE SHIFT TOWARDS SCHOOL-BASED SUPPORT</td>
<td>47</td>
</tr>
<tr>
<td>Insights from headteachers</td>
<td>48</td>
</tr>
<tr>
<td>The wider perspective from intensive family support services</td>
<td>52</td>
</tr>
<tr>
<td>The shared vision – what makes the difference?</td>
<td>54</td>
</tr>
<tr>
<td>Conclusions</td>
<td>57</td>
</tr>
<tr>
<td>Appendix</td>
<td>59</td>
</tr>
<tr>
<td>Profile of the intensive family support services</td>
<td>59</td>
</tr>
<tr>
<td>Definitions</td>
<td>62</td>
</tr>
<tr>
<td>Methodology</td>
<td>63</td>
</tr>
</tbody>
</table>

**United Nations Convention on the Rights of the Child – Article 27**

“Every child has the right to a standard of living that is good enough to meet their physical and social needs and support their development. Governments must help families who cannot provide this.”
The Independent Care Review said Scotland must make intensive family support available to all who need it. These research findings show the scale of the challenge in making that a reality, while the often upsetting testimony here underlines why it must be done.

The coronavirus pandemic has raised awareness of social inequality in Scotland and its impact on children. But, of course, what it has revealed is not new: this report describes the destitution, isolation and mental health struggles which existed in Scotland in 2019, before the pandemic hit. This crisis has simply laid bare the extreme inequality in children’s life circumstances.

This follow-up to our 2014 study looks at the impact of six more years of austerity policies on children and families. By tracking services over time, it has found escalating need for help from families struggling with more complex problems, being met by fewer resources than before. It also highlights a situation in which all the different parts of the system can inadvertently work to compound people’s problems, and where lack of money puts people in an especially vulnerable place, exacerbating all the risks.

A decade of austerity had hit children’s services before the pandemic, affecting children’s access to social work and social care services. This research shows that the worsening financial position for local authorities, described by Audit Scotland, is creating situations in which practice in relation to families in need is driven by resources.

Local services are redistributive; help for vulnerable families mitigates social inequality and improves children’s life opportunities. This crisis provides a huge opportunity to make meaningful, sustainable, transformative change. We need to harness the desire to do things differently, to reach out to families with a strengthened social safety net to prevent longer term difficulties developing in children and young people’s lives.

The Independent Care Review’s ‘Promise’ gives us a blueprint for family support and we must deliver on this as a matter of urgency.

Matt Forde
National Head of Service, NSPCC Scotland

Martin Crewe –
Director, Barnardo’s Scotland
Scotland must do all it can to keep children with their families. Whatever issues families face, Scotland must ensure that intensive family support is available, proactive and characterised by the 10 principles of family support: community based; responsive and timely; family assets; empowerment and agency; flexible; holistic and relational; therapeutic; non-stigmatising; persistent and underpinned by children’s rights.

These principles apply to all families that need support to stay together.

If families require intensive support they must get it and not be required to fight for it.

(The Promise, 2020:52, 57–58)
Ten Principles of Intensive Family Support

| **Community Based:** support must be explicitly connected to, or even housed in, locations that work for local families and the community, such as schools, health centres, village halls and sports centres. Communities must have a say in where support is located. |
| **Holistic and Relational:** Interventions must be focused on the wider family context so there are not a multitude of services addressing specific, isolated and individual issues within families. The likelihood of success is based on a relationship of trust between families and workers. |
| **Responsive and Timely:** Intensive family support services must operate outwith a Monday–Friday, 9am–5pm approach and there must be no concept of an ‘out of hours’ service. |
| **Therapeutic:** Scotland must ensure that support to families recognises trauma and works with families to heal. There must be no barrier, be it referral or category, that limits parents and children from having access to mental health support when and if required. |
| **Work with Family Assets:** the orientation of support must look at what is working well for the family taking a strengths-based approach rather than a deficit-based approach that operates from a premise of what is going wrong. |
| **Non-stigmatising:** The basis of all support must be the quality of relationships, not the professionalisation of the workforce. Overly professionalised language stigmatises families and acts as a barrier to engaging and supportive work. |
| **Empowerment and Agency:** If support services are going to succeed families receiving support must be able to choose those people with whom they have a natural connection. Budgets must be responsive to families’ choices. There should be no barriers to families’ wishes being carried out, with members of various services and organisations available as a support team. |
| **Patient and Persistent:** Human change takes time and effort. Scotland must move away from limiting intervention to set periods of time. Scotland must be patient in working with families where there are complex, challenging circumstances. |
| **Flexible:** The needs of each family are different and Scotland must recognise the agency and unique needs of families to ensure that support is tailored and specific. Scotland must think creatively in terms of the support families might need and ensure the workforce is responsive. |
| **Underpinned by Children’s Rights:** Whilst the family must be viewed collectively and not as isolate individuals, support services must be underpinned by the rights of the children they are working with. Children’s rights are the funnel through which every decision and support service is viewed. |

(The Promise, 2020: 52, 57-58)
Introduction

Six years ago, NSPCC Scotland and Barnardo’s Scotland reported on how the challenges of welfare reform and austerity policies were affecting work with vulnerable families in Scotland.¹ Our study was based on interviews conducted in 2013 with staff at fourteen Intensive Family Support Services across central Scotland run by Barnardo’s.

The research found that intensive family support services help children and parents with complex adversities in their lives but who are below the threshold for statutory intervention. By supporting families, these interventions can break the well-established association between childhood experience of multiple adversity and the increased likelihood of negative outcomes continuing throughout their life course.

Back in 2013, there was a shared anxiety amongst services as they anticipated worsening conditions for already disadvantaged families over the next few years. Services well used to poverty described a growth in the level of material need unprecedented in recent decades. They also described how the ‘whole family’ approach of these services, and improvements in practice at a local level as part of GIRFEC implementation, were already being undermined by budget cuts to services in the community – and, in some areas, by procurement policy.

At that time, we pointed optimistically to the opportunities created by recent legislation in the Scottish Parliament – to the first round of Children’s Services plans, the drafting of strategic plans by the new Integrated Joint Boards (IJBs), and the procurement strategies developed under the 2014 Procurement Reform Act.

In 2019, we returned to these same services to see what had changed over the intervening six years.

This report tells what we found about:

• how welfare reform has been affecting the most vulnerable and disadvantaged children and their families;

• how families experiencing persistent poverty as an adversity are affected by the wider landscape of austerity and budget cuts; and

• what has been happening to the face-to-face services which support children and families with the most complex needs.

This time we also explored the types of needs being presented within primary schools, and the support accessible within them, resulting from the introduction in 2015 of Attainment Challenge Funding.

Main Findings

The experiences shared by service managers and headteachers within this report highlight a worsening of circumstances since 2013, for children and families as well as the crucial services that provide care and support to them. Throughout this process we heard first-hand about the harrowing impact of austerity on families and the shift over the last six years from material hardship towards severe destitution. We heard about rising levels and complexity of need, whilst at the same time hearing how services have been stripped back and thresholds for support continue to rise.

Impact of austerity on families

• Poverty remained the core issue being experienced by families, as it was in 2013.
• However, increasingly services were now seeing families experiencing destitution.
• Severe hardship was having a significant impact on parental mental health and family relationships, as well as leading to social isolation and exclusion.
• Housing insecurity was a growing problem in some areas and was adversely affecting children experiencing poverty.
• Overall, services described a situation where all the different parts of the system can inadvertently work to compound people’s problems, and where not having enough money puts people in an especially vulnerable place.

Severity and complexity of need

• Services reported that the families referred to and accepted by them had more complex difficulties and greater needs than was the case in 2013.
• Services felt that cuts to statutory social work, combined with the contraction or closure of community based support for children and families, were having a major effect on intensive family support services.
• Services also attributed the worsened socioeconomic conditions for families to welfare reform, universal credit roll-out, and the sanctions regime, which have led to destitution and the escalation of population-wide mental health problems.
• Services described families in ’dire consequences’, experiencing destitution; no food, no secure housing, no heating, and struggling with mental ill-health – which means parenting is done under chronic stress.

2 The Joseph Rowntree Foundation defines destitution as when individuals or their children have lacked two or more of six essentials over the past month, because they cannot afford them. This includes shelter, food, heating, lighting, clothing and footwear and basic toiletries. https://www.jrf.org.uk/report/ destitution-uk
**Loss of support for vulnerable families**

- Of the fourteen intensive family support services which featured in the 2013 report, six have closed – including those which in 2013 described themselves as being in a relatively secure and even privileged position in terms of their financial stability and strength of relationship with the local authority.

- Outside of the small number of Attainment Challenge authorities, the purchase of family support by individual schools has in places developed in parallel with a loss of access to intensive support services by the wider population of families, as services are cut.

- The original fourteen services covered fourteen local authority areas. In five of those fourteen areas access to intensive family support has either reduced or removed altogether. The local picture varies dependent on what other provision may be offered.

- These are areas where the removal of funding has led to previously mainstream revenue funded services being replaced by either spot purchase by the local authority, or purchasing by individual schools for specific families using Pupil Equity Funding. The impacts of this include:
  
  - support previously accessible to families across the entire local authority area now confined to individual primary schools whose headteachers choose to buy it;
  
  - loss of service or a much more limited service available from a much-reduced local authority in-house service, where services have been ‘taken in-house’;
  
  - withdrawal of service to families with children under 5 years of age.
The policy context

Six years ago, NSPCC Scotland and Barnardo's Scotland report, Challenges from the Frontline, welcomed new legislation as an opportunity to re-shape children's services. Embedding Getting it Right for Every Child (GIRFEC) through integration was a key goal of the Children and Young People (Scotland) and the Public Bodies (Joint Working) Acts of 2014. An assessment of progress in 2018 found that, while there was no clear evidence as yet of better outcomes for children, a strong commitment existed to overcome the challenges to achieving this.²

Little known in 2013, the impact of childhood adversity has since moved centre stage in public policy. Tackling Adverse Childhood Experiences (ACEs) was a prominent theme in the 2018-19 Programme for Government⁴, and due to the ACEs ‘movement’ there is far greater awareness today of the effect chronic negative experiences in childhood can have on children’s longer-term outcomes.⁵

Over the same period, poverty, adversity and complex disadvantage have increased amongst the growing numbers of children affected by austerity policies across the UK. UN Envoy Philip Alston’s 2018 report on poverty in the UK described a “punitive, mean-spirited and often callous” government approach in which the costs of austerity were falling disproportionately on the poor, women and children, ethnic minorities, single parents, asylum seekers and people with disabilities.

Published a year after Alston’s report, the ‘Hard Edges Scotland’ research reminds us of the extent of multiple disadvantage, with nearly one million individuals estimated to experience all three core domains of disadvantage in the course of their adult lives. “Cutting across all of these findings”, it reported, “was the fundamental inability of local and national service systems to address the needs of people who present with a range of complex and interacting needs.”⁶

How do we address these same complex and interacting needs amongst children and young people who need help to remain with their families? This has been the focus of attention within the policy world over the past six years, since the publication of Challenges from the Frontline.

The review of section 12 of the Children and Young People (Scotland) Act 2014, commissioned by the Scottish Government, looked at how best we can support families to prevent children and young people from becoming looked after. It found limited knowledge of the legislative framework, and a lack of clarity about parenting support as a service.

Now, in ‘The Promise’, the report of the Independent Care Review (2016-2019) we have a blueprint for the type of family support which should be available as a right, to all who need it in Scotland. Specifically, it sets out the ten principles on which intensive family support services should be based.\(^8\)

---

\(^7\) https://www.carereview.scot/wp-content/uploads/2020/02/The-Promise.pdf
\(^8\) The ten principles are reproduced on page 5 of this report.
\(^9\) https://www.togetherscotland.org.uk/media/1515/ministercyp_letter_incorporation_040520.pdf
\(^10\) https://www.coventry.ac.uk/research/research-directories/current-projects/2014/child-welfare-inequality-uk/
\(^12\) https://www.nuffieldfoundation.org/project/system-conditions-and-welfare-inequalities-in-childrens-services
\(^13\) https://www.celcis.org/knowledge-bank/search-bank/supporting-families/
That family support is presented as a universal right is significant. It reflects the decision to embed the United Nations Convention on the Rights of the Child (UNCRC) in Scots law, with necessary legislation to be introduced by the Scottish Government in autumn 2020. It also reflects changes since 2013, such as the reframing of social work services as a right, within the group of studies of inequality in children and families’ access to social work services led by Paul Bywaters. Research continues, with the purpose of better understanding the reasons behind welfare inequalities, the different patterns of demand and provision at a local level, and the factors involved in decisions about ‘rationing’ support to families.

Inadequate resources for family support, within a local government landscape starved of funding, were highlighted in submissions to the Independent Care Review, and were a main finding of the Section 12 review. The findings presented in this report provide more detailed evidence of circumstances on the ground across Scotland and adds to this emerging body of evidence.

The Poverty and Inequality Commission recommended the Scottish Government’s Child Poverty Delivery Plan focus on addressing adverse childhood experiences as a route to tackling poverty, by considering how families with complex needs can best be supported to manage and reduce the risks and impacts of child poverty. Challenges from the Frontline (2014) highlighted how intensive family support services perform this important role for families, indeed it is an essential pre-requisite for therapeutic social work with parents and children, to prevent any longer term negative impacts across the life course.

The past few years have seen a debate about poverty as a type of adverse experience, as part of the Adverse Childhood Experiences (ACEs) ‘movement’, and the Scottish Government has worked to mitigate the impact of welfare reform on families with children as part of a multi-pronged strategy to support children in need and care-experienced children.
In 2013 the government policy emphasis was on early intervention, especially in the early years, with funding being directed towards initiatives under the Early Years Framework and those which met the aims of the Early Years Collaborative. It also included the development of a National Parenting Strategy\(^{15}\) (2012) which set out an encouraging approach but which was never evaluated and ultimately seems to have petered out.

The Attainment Challenge, launched in 2015, is the most recent flagship policy. Aimed at closing the educational attainment gap between rich and poor children, it has shifted attention from the early years age group towards primary school aged children. Accompanying this is a refocusing of funding, which in some instances had been used for family support, away from intensive social work interventions and towards schools. Local authorities with the highest levels of deprivation have received Attainment Challenge funding, while headteachers have been allocated budgets based on free school meal eligibility, to spend on procuring support for children to raise attainment.

Our reflections on changes to services since 2013 consider the policy turn towards schools in the intervening years, and the Independent Care Review’s focus on intensive support for families, to enable children and young people to remain at home.
The Care Review has seen that an economy characterised by poverty, precarity and inequality can be a driver of the incidence of the need for care.

When the economy hurts children and adults, and housing and social security systems fail to provide the protection from harm needed to compensate, increased pressures on family life can increase the odds of interacting with the care system.

There must be a significant, ongoing and persistent commitment to ending poverty and mitigating impacts for Scotland’s children, families and communities.

(The Promise, 2020:18)
In 2013, service managers said poverty was at the core of the issues being experienced by families; they feared for their future as welfare reform continued.

In 2019, following the roll out of Universal Credit for all new claims in Scotland, poverty remained the core issue, but it was increasingly commonly about families experiencing destitution. The Joseph Rowntree Foundation defines destitution as when individuals or their children have lacked two or more of six essentials over the past month, because they cannot afford them. This includes shelter, food, heating, lighting, clothing and footwear and basic toiletries. Destitution has grown across the UK in recent years, with more than 1.5 million people pushed into this situation in 2017 alone, compared with 1.2 million in 2015.

The two main effects of destitution that service managers observed concerned mental ill-health and the impact of this on family relationships, and social isolation and exclusion. Services in some areas commented on the growth of housing insecurity and the effects of this on children and young people. These main themes are articulated directly through the words of service managers.

---

16 This was completed in December 2018.
18 bid.
Six years further on, the punitive regime of welfare changes including benefit sanctions and waiting periods has not only exacerbated poverty but created additional problems for people: made it more difficult to keep a tenancy; more difficult for women to leave an abusive relationship; more difficult to care for a child with additional support needs; and more difficult to meet the most basic of children’s needs. However, two thirds of children in poverty in Scotland are in working households and labour market trends are an important part of the picture.\(^20\) Despite record employment levels and low unemployment since 2008, a sharp increase in precarious work has accompanied the drive for a more flexible labour market. One in ten people in Scotland are in insecure work, and pay levels for the lowest paid have been squeezed the most.\(^{21,22}\)

Children’s experiences of destitution were very apparent to service managers:

“…children not having enough food to eat. A lot of children talking about being hungry and on a regular basis. So, particular concerns around school holidays. We have families who often won’t open the door to us at school holidays and I think that’s because they don’t want us to have access to children so we find out what is going on…”

“So, head lice, scabies, that’s significant. And some of that is about children picking it up in school but it’s also about you know, maybe the head lice will have been treated but the bedding won’t have been washed. Maybe they’ve not got a washing machine, or they can’t afford to go down to the launderette, or they’ve not got spare bedding. So that’s significant, we have that on a regular basis.”


“They’re not keeping up with their payment plan and everything spirals out of control. What it hits is the basic level of provision of what children need. So you’ve got children going hungry, parents phoning up saying they don’t have enough to put money in the meters. So apart from, obviously, a lack of being able to access adequate social interaction opportunities, social clubs for the children, they don’t even have the basics very often.”

The benefits system

The inadequate level of benefits and the complexities of a benefits system designed to defeat people were identified as key issues:

“…first and foremost, it is just about daily living conditions and because so many of our families are on Universal Credit, that does not allow them to have a standard of living that meets the needs of those adults and children within the household. It simply does not.”

“It’s the poverty and disadvantage that we see now. It was always there, but it’s certainly exacerbated by the welfare reform over the past few years. We see a lot more in terms of poverty and disadvantage in families. The rise of foodbanks here is massive. Families use them on a regular basis and you can see that, families who come to us and are really struggling.”

“But we definitely see that the level of sanctions is very high because people are not being supported fully very often to understand the processes. They’ve maybe migrated from ESA or Jobseeker’s Allowance to Universal Credit, they’ve not been fully appraised of the process. A lot of it is online, a lot of it is reliant on having a working mobile phone that you can be contacted upon. So, there are a lot of barriers…I think the impact of the system on people’s wellbeing is having a massive impact. So, a lot of our families see it as these huge hurdles that they’ll never be able to overcome.”

Impossible barriers

Service managers described a situation where all the different parts of the system can inadvertently work to compound people’s problems, and where not having money puts people in an especially vulnerable place.

“…also for some folk where addiction is such an issue, how do you persuade someone on that cycle of change to move round the cycle where you’re getting sanctioned, where you’ve got austerity, where you can’t get a house, you know the change cycle, you understand all of that, but how do you get someone on to that cycle when all the other systems are so against them?”

“…so things as simple as getting medical care – they moved the hospital from [place] including the minor injuries unit. Repeatedly we’re told stories, situations where people will not go to hospital after-hours, because they can’t get back. Well there’s a have and have-not story right away. Because you cannot access stuff. What if that’s just an ordinary family trying to get by? Where do they stand? Does that mean to say they can’t get to hospital? Or
they can get an ambulance fine, but what about getting home?"

The school day
Primary headteachers bore witness to children’s lived experiences of poverty. They witnessed children’s hunger and were aware when there was no food at home, or a lack of clothing, and which children were unable to participate in school life. All the schools were taking practical steps to mitigate the effects of poverty on pupils and all underpinned by their relationships with pupils and their families.

“The other day a child was making something. It was like life skills she was doing, and the teacher said to her ‘you could make soup like that for your mum when you go home.’ And the girl said, ‘no I couldn’t, cos we’ve got no money. We can’t do that. My mum had to phone her boyfriend to get money so we could buy a tin of soup.’”

(In a less deprived area) “the difficulty here is that a child stands out. They really stand out. So we have changed our approach to the cost of the school day. We try to make sure that any activities we do in school are financially inclusive. If we do pantomimes that’s all paid for. Christmas parties are all paid for.”

Shame is intrinsic to the experience of poverty, and closely connected to feelings of inadequacy and worthlessness, and to social and psychological pain. 23,24

Headteachers showed great sensitivity to these ‘psycho-social’ aspects of poverty and this informed their efforts to provide practical support in an inclusive and non-stigmatising way.

“But we do see children who at times in the past, more and more children where we offer the clothing bank, more and more children where we’ve had food parcels generated, through a raffle, it’s been identified that this family would be receiving the food parcel, all very discreetly and anonymously, and at Christmas time especially when you know that some children are not going to get what other children have.”

“We do have a Community Fridge in the school so people can come in and get things. That’s supported by [organisation] so if they’ve got any food they get from Tesco’s or other places, they fill the fridge and people can come… we just tweet it… we just say there’s some food, help yourself. The canteen as well. If they’ve got any leftovers they’ll package that up and either leave it if it’s sandwiches and things in the canteen and the kids can come and pick it up. And we just highlight that as well. And we do obviously sometimes have families who are very reluctant, but we also have some children who will come and fill their boots. You know, which is great, you know. We know those families as well, and we’ll say look there’s food there just go and fill your school bag and take it home.”

23 https://www.ids.ac.uk/publications/shame-poverty-and-social-protection/
“We don’t have things like non-uniform day – we did notice that there were a couple of families who didn’t come to school if it was a non-uniform day because they didn’t have any other clothes. We’ve noticed there’s a couple of families who don’t come to Christmas parties because they don’t have clothes. So what we do for those families is we bundle up, cos we’ve got uniform and things, we bundle it up and just put it in the kids schoolbags and just send it home. They don’t say anything about it, they don’t send anything back, they don’t say thank you, but they also don’t say ‘What’re you doing?’, you know, so there’s that, but we know that there’s some families who wouldn’t want you to do that because they’re extremely proud, you know. For instance, Primary 7 hoodies, what we did last year was we got our orders, we’ve got our SIMD profile here, we know children that are in SIMDS 1&2 – we look at those and we can see they’re going to struggle, they’re going to struggle and they’re going to struggle. So we put out the order forms, families order the hoodies, and whoever hasn’t ordered it we [the school] pay. So we make sure that everyone has a hoodie, it’s completely inclusive.”
Service managers described the psychological impact of austerity, the huge financial hardship caused by welfare reform, and a growing level of mental health difficulties, from lower level anxiety and emotional distress to clinical problems. They observed the effects of chronic stress on family relationships and parenting.

“Mental health difficulties seem entrenched within the lives of a lot of young people [parents] that we’re working with...the number of young people we’re working with who are taking medication for mental health issues, I don’t like to say all of them, I’d say 90–95% of young men that we have coming through the service have significant mental health issues. I don’t remember it, certainly, 15 years ago here, 10 years ago. Don’t remember it being as significant. Maybe it is we’re talking about it more, but the numbers are worryingly high. And there is something there about the whole external environment and its impact on individuals. Not seeing the chance of anything getting better:”

“I just think the whole ‘wearing folk down’ business, I think that’s all underestimated, that gap between the have and have nots is getting bigger, and this perception of having an underclass, two different groups, and we’re no helping people get to a place where’s there’s hope.”

“...Universal Credit, it has been the root cause of so many breakdowns and trauma to so many families and children and young people because it causes break ups and fights and arguments and domestic abuse.”

“And the stress on that family, on that relationship is horrendous. It is particularly difficult for the families who are...cos some of them are actually working and not on Universal Credit and even then, they are really struggling. Because it just takes ...I mean two kids shoe sizes change and how do they afford that?”

“One of the biggest issues we’ve noticed is, see within abusive relationships, the payment goes to the one parent and very often it’s being paid into the abusive parent’s account. So, we’ve got mums who the benefit is being paid into the account of the dad who uses that as an increased level of coercion and control over the victim within that relationship.”

“...families who are living with that day in, day out, you must lose your sense of hope, your sense of belief that anything can get better, and that must wear you down. “

Primary school headteachers were also sensitive to family stress and alert to how schools could avoid contributing to this. The cost of the school day was one aspect of this, however one headteacher described how the school had dispensed with formal homework for pupils after primary 3, because of the amount of stress it was causing, and instead set wellbeing activities or enjoyable activities that the whole family could engage in, or provided opportunities for family time.
Isolation and exclusion

One service manager expressed frustration with the lack of understanding of what it is like surviving long term with no money and no wider family resources to draw upon, and of the extreme limitations this places on children’s lives. Services described not just the impact of the combination of poverty, cuts in local services, and increased costs for things like bus fares but the dimensions of rurality, stigma, technology, mental ill-health, and the absence of significant relationships, as well as the pressure on families confined to the home.

“And because of the financial implications, like the financial difficulty – people are not able to go out. Fewer children are playing out like they used to. Everyone is just cooped up together all the time.”

“...the kind of social isolation that goes on for families, some of that is about being stigmatised within their community, some of it is about they can’t get out of the community. You know, they need to get buses here there and everywhere, buses here aren’t great and trains are even less. So, you become even more isolated within your own little bit.”

“Families get stigmatised as being ‘that’s the druggies’, ‘that’s the alcoholic’s, ‘that’s the ones that have got mental health problems’…”

“Poverty of everything in terms of health, education, hope. Just a lot of people feel kind of given up with things and that’s really hard for the kids because they become very isolated very quickly. And if you’ve got a parent who is just not managing because of whatever is going on in their life, the child is the first person to almost become an adult and start taking care of themselves.”

“A lot of young people [parents] coming through with a real lack of family support. Their own support system. You’ve got so many young people coming through the service who don’t really have anybody. Who don’t have friends. And I think it’s just the impact of that on their own mental health, isolation, not feeling connected, in the community... “

“The fact that we are so rural families feel so isolated. You know, and there is one, two buses a day and it goes off at six o’clock. They are stuck in tiny communities and there is nothing there. No libraries. No facilities. No community centres. I think this is no different from any other local authority, the asset transfers that have taken place where they have shut down so many community facilities is ...it would just break your heart because families just don’t have anywhere to go now. “
“And the majority of these folk don’t have access. They don’t have wifi but they are told well you need to go to your local library. A lot of them don’t even know where their local library is. They would feel so intimidated. A lot of their numeracy and literacy skills are so poor that they would never tell anyone ‘well actually I don’t know how to do that’. A lot of people don’t know how to use PCs either.”

“A lot of our children are completely disengaged from education. So, if you think of the outcomes for those children, they couldn’t be any further removed from becoming active participants in their communities. You know, they don’t have the basis to have positive mental wellbeing, positive self-regard. They become very disenfranchised from their schools, from their communities. There’s a lot of tension within families.”

Children’s wellbeing was the focus for primary headteachers. They recognised the constrictive nature of many children’s home and neighbourhood environments and the lack of access to play, in particular. One mentioned the local environment for many of their children was not great; drug dealing, and sometimes risky people hanging about meant it was not always safe for children to go out and play. Some headteachers talked about the effects of these practical constraints on children’s development:

But it’s in the playground that is where we are seeing the sparks. And when I talk about poverty of opportunity and poverty of aspiration that’s where we are seeing it manifest.

“Given this area, and given the circumstances, lots of my kids don’t go outside to play. And when they don’t develop the kind of problem-solving skills and socialisation skills that playing with your pals provides, then you’re not developing those.”

“our cluster had a dialogue about what the greatest needs were and many of our children find it very difficult to self-regulate in the playground. Their social skills are lacking and they have difficulty in understanding play and appropriate play. So we thought the incorporation of a health and wellbeing coach would make a huge benefit for the families and the children to give them the opportunity to experience ways of self-regulating, ways of getting involved in restorative conversations, ways of playing with appropriate resources and supporting one another.”
Housing insecurity

For families experiencing poverty, the shortage of social housing has created a crisis, one which has gathered pace since 2013 due to welfare reform.25

According to the Scottish Government, the increasing unaffordability of private rented housing to low income families “substantially increases their risk of homelessness.” 26 Meanwhile Universal Credit has created a spike in rent arrears, and an increase in debt-related evictions.

These factors are reflected in the growing number of households in temporary homelessness accommodation, currently the highest since the Housing (Scotland) Act took force in 2002. In 2019 almost a third of these (31%) were households with children. Over 7,200 children were living in temporary homeless accommodation across Scotland in September 2019, and households with children wait longer on average than others to be permanently housed.27

The causes of homelessness are complex. In 2019, 1,700 single mothers with children were assessed as homeless in Scotland because of domestic violence or abuse, this constitutes 27% of all single female applicants, illustrating the interconnectedness of adverse childhood experiences.28

Meanwhile, despite mitigating the worst impacts of the UK benefits system, the Scottish Government’s view is that:

“the impact of inadequate support on families in Scotland remains profound and is contributing to children living in overcrowded and poor-quality accommodation, as well as increasing levels of poverty and debt.”29

While the pattern of housing tenure varies across the fourteen local authority areas, many service managers confirmed this picture of housing insecurity and described the negative impact on children within the families they support, including cramped living conditions, and constant changes of address. This was due to an ongoing search for better accommodation, and struggles with maintaining tenancies.

“There is definitely an increase in private lets, so lots of families living in insecure housing arrangements. Families living in overcrowding situations. Children living in, well kinship carers being asked to look after children when they clearly don’t have the space.”

“…there’s lots of private landlords in [local authority], more than there were 5 years ago and they are popping up everywhere, and there’s a lot of the flats that go up for sale. People are buying them, investing in them and opening them up…”

“The private landlords are extremely intimidating and I suppose the accommodation is poor, very poor. Families are often just grateful to have a roof over their head that they will accept almost anything and half the time they are moving into accommodation and the cooker is not working and it is just sitting there obsolete in corner. There are no white goods or it is damp or it is smelly, but families move and move and move and move and they are constantly moving around because a lot of the lets are short lets. And they are constantly looking for something better all the time and who can blame them for moving?”

“More of our families are in private rented flats… the challenge of the numbers of families where their action plans have been around housing and repairs and no access to money for repairs, basic repairs, I’m reminded of a family who didn’t have a flushing toilet…It was a private tenancy and they couldn’t get anything done.”

And if you don’t know where you’re going to be for a period of time…Am I here for a month? Am I here for 2 months? Am I here for 6 months? Am I here for a week? And the impact on kids is that whole unsettledness. You know, what school am I going to go to? Do I need to get a bus from here to there? Will I get a taxi to there? It just goes on really.”

“That debt can be drug-related as well and they won’t be able to escape intimidation or it can simply be that they are fleeing partners as well because certainly with domestic abuse, a lot of the women are moving again and again is because they are trying to get away from partners who are abusive or threatening.”

Services also referred to difficulties with social housing, they talked about families being placed, because of the lack of available options, in council housing which did not meet their needs, for example, in locations which add to their isolation:

“It is just…I mean the council house facilities are just few and far between and the housing that is available the families don’t want because it is very rural and very isolated and we find that our most vulnerable and disadvantaged families are forced to take this accommodation and they can end up away in [name of place] which you might not know but it’s just a row of houses that nobody wants. Nobody wants to live there and they will put a single mum with a baby out there who has got poor mental health. You just think…but she is too frightened or intimidated to say anything, you know, so she will take it.”
“But whether that will transfer into actual positive accommodation, because it’s not just providing a roof over the head, you know, because young people are still living in bed & breakfast accommodation, young people are still being offered B&B accommodation in [name of city miles away], young people are saying ‘I’d rather sleep on the streets, I’d rather sofa surf’ you know. I mean you know it’s not just about, how do you do something that makes it better not worse. How do you keep up with your limited peer group, your support systems, you know you step out into [name of city] what’s going to happen to you there?”

“I think some of the accommodation is not great so where they are being asked to kinda be is in where there are elements of drug dealing or drug misuse. In terms of access to local amenities, it’s not some place folk can call home so in terms of accessing leisure activities or accessing doctors, you know that kind of stuff is hard.”

Services described the consequences of overcrowding or lack of resources to provide a suitable home:

“But yeah lots of families living in private rented, or living with other family members so overcrowding....and actually it’s about ‘who is parenting this child’? Sometimes you know, we’ve been asked to support a parent and assess their parenting but then you know there is someone else who is living in that household and their parenting gives you cause for concern but we’re not being asked to do anything with them.”

“We had another parent whose children had been accommodated, are returning into her care and she was moving into a tenancy with nothing in it...she’s got to evidence that she’s in a position to have her children back, to have them in the home, and cook meals and she’s not able to do that. She’s got like a two-ring hob or a microwave. So yeah, it’s those basics.”
**Strengths and difficulties**

Local authority housing services were also referred to very positively. In one area a strong partnership with housing had been developed since 2013, so that now housing officers attend case conferences and multi-agency child protection meetings. Another referred to the “amazing” advice they are given by a housing service, and a few families who they had watched get into “brilliant houses” after being on the waiting list for a long time.

However, difficulties maintaining tenancies was a universal theme. Although Universal Credit will not achieve full roll out until 2023, welfare reform was still the common thread:

“Many families who use the service are in rent arrears. This is often caused by the benefit sanctions that are placed on them. Considering that many parents struggle with mental health and have clear addiction needs, the demands placed on them [by the benefits system] are really unrealistic and unfair e.g. appointments, applications.”

“You know, very often they’re facing eviction because they’ve not dealt with the process. But I guess it goes back to what I was saying earlier, if your mental health is not great these just become huge, insurmountable hurdles. And one benefit is affecting everything: your child tax credits, your housing, your employment support. So, if you’ve had difficulties in one area it’s going to affect all of your other benefits.”

“Universal Credit, it’s had a massive impact in terms of rent arrears and ...I think has probably increased homelessness. I think what’s happening now is where there are rent arrears... I think it is taking a lot of choice away from people as well because they will just apply for the direct payments and you know that then has an impact on what a family then has left to live on. So, as long as the rent is getting paid we don’t worry about whether there is food on the table.”
The Care Review has not been able to ignore the impact of poverty on families and communities across Scotland. There is significant evidence that social and economic inequalities, particularly poverty and debt, increase the stressors in families and communities. Poverty can make parenting more difficult.

When poverty is combined with other issues such as mental health problems, domestic abuse or substance use, the challenges of parenting can be magnified. Families struggling to cope with poverty, poor housing, substance use and health difficulties may have little capacity to engage with services in order to make changes.

(The Promise, 2020:47)
Demand for support

All the surviving services from 2013 have experienced a steep rise in demand in the intervening years. Four of these have very closed referral systems directed through social work managers. Managers from these services variously described having referrals “coming out [of their] ears”. One had received, in the most recent year, the highest number of referrals since the service opened 21 years previously. Services were aware of wider demand in the community which they could not meet. “If our capacity in terms of funding doesn’t increase we will continue to meet our contract but I know we’ll not be meeting the level of need out there because we’re just being bombarded with referrals that we can’t take.”

They commented that the profile of referrals had also changed over the past six years, involving a higher level of risk. One said half of all its accepted referrals now had statutory involvement, while another said that most were now child protection referrals. “…we got to the point a few months ago where the senior social worker was having to come down to prioritise some of those referrals with us, because those are all families going through statutory proceedings.”

This is within the context of either flatline funding or funding cuts. Services talked about having always found ways to manage, about needing to ‘work smarter’, but they were now saying:

“We are really struggling
Staff have left because they have said, ‘I can’t keep knocking my pan in like this.’”

Most described demand as overwhelming. One service said it could double its current caseload of families if it had the resources. Another said it needed two additional workers to cope with the current level of referrals. The pressure is greatest on those services which cannot have a waiting list because of the high level of risk involved. Those which can, described their triage system, and the methods adopted to support those families assessed as able to wait to receive a service.

One exception to this picture is a service which has been remodelled by social work since 2013, to become a ‘high intensity’ service for a smaller number of families with a reduced caseload per worker, and a no waiting list policy.

Some services related the increased demand to public spending cuts, including cuts to statutory family support services in their local authority area – sometimes resulting in the lack of alternative services – and the under-resourcing of education, meaning that schools struggled to support children with the most challenging behaviours. Other more positive reasons cited included the strength of partnerships with other agencies; the service being well established within GIRFEC pathways; and being a trusted ‘go to’ service.
In 2013, the severity of families’ needs was visibly growing, and in response thresholds for receiving support were increasing. For some services, caseloads were increasingly complex, with a growing number of issues involved.

Six years later services felt that the families referred and accepted by services had more complex difficulties and greater needs than was the case in 2013.

“Although the name on the door of the service remains the same (‘early intervention’) what lies behind it is a service that’s dealing with more risk, higher tariff, more complex situations and being asked to deal with more intensive inputs in families.”

“…we’re working with significantly more families where children are on the [child protection] register or supervision orders. I would say that 50% of cases that every staff member is working with have some kind of statutory involvement. And for some staff members it is all of their cases, depending on what area of the service they work in.”

“I think what we’ve seen is families and young people their circumstances being more complex, and their problems multifaceted even more so, and there’s been more evidence of more trauma, or we’ve seen it more.”

“The profile of the communities is becoming more and more complex and I guess the level of demand is not meeting… there is still a lot of unmet need. Although we’re trying very hard to provide an element of early intervention, because there are so many people in crisis there are people who will fall through the cracks unfortunately in the wider system and then we probably are catching them too late.”

A few services agreed that things are significantly more complex and severe, but wondered whether this perception also reflects a greater awareness and willingness to talk about issues such as mental health, or indeed whether staff have become more skilled in building relationships and trust, so they have a better picture of things that might previously have been ‘hidden’ in families such as historical sexual abuse or domestic abuse. The greater complexity for services means working with families whose difficulties are not only more complex but also well entrenched and who need more intensive work, involving more staff time, and for much longer periods.

“But I think the level of complexity that workers are dealing with in some families can mean that cases can probably be open for significant periods longer than maybe they would have been five years ago, because there’s a number of issues that you’re trying to support families with. Very rarely now will a family be referred in for one issue in terms of ‘it’s just housing’ or ‘it’s just…’ and I think we do still have those short-term pieces of work but probably 80% of the referrals that come in have complex needs.”
Why are families’ problems more severe than before?

Services considered there to be two aspects to escalating need:

- Services are seeing a different cohort of families in 2019 compared to 2013 due to rising thresholds, the main driver for this being cuts and policy decisions within social work;

- The phenomenon of hardened socioeconomic conditions for families with the main driver being welfare reform, universal credit roll-out, and the sanctions regime, which have led to destitution and the escalation of population-wide mental health problems.

A different cohort

The shift away from early intervention in social work funded family support services, observed in 2013 has become formalised. Seven of these services said funders had tightened their eligibility criteria to re-focus service provision, meaning they are dealing with higher levels of risk and more complex cases than six years ago. This contrasts with the newer family support being provided in schools using Attainment Challenge or Pupil Equity Funding.

Services talked about increased ‘gate-keeping’, or more precisely, the rationing of services. In two of the services the social work department is directly involved in prioritising referrals received.

The tightening of referral criteria is not the only factor. One service said that cases referred had become more complex despite their criteria remaining the same. They attributed this to changes in social work policy combined with wider socioeconomic factors.

The impact of cuts, reforms and policy decisions within statutory social work services

Services feel that cuts to statutory social work, combined with the contraction or closure of community-based support for children and families, have had a major effect on intensive family support services. This is of a different order to six years ago, when cuts to statutory social work services did not feature amongst the issues reported by services.

The impact was described as follows:

“When other services are cut, especially statutory services, then the need or thresholds become much higher. So with social work colleagues, the level of what we maybe think is really risky they’re saying ‘well you’re just going to have to manage a bit longer’, so I think there’s more pressure on us to help families who are in a more critical stage of things going wrong.”

“...we have monitoring reviews with the local authority and as their workload has increased and the families that have maybe made the threshold for social work support are less...That's had a knock on effect on the cases that we would then have referred to us.”

“the complexity of the families and young people they're [social work] dealing with becomes the complexity of the families and young people we're dealing with.”

“...we’ve lost the capacity to be preventative as much as I would hope and a lot of services are crisis led”

“...where we might have got involved two or three years ago, we'd probably would be saying there's not enough concern there.”

“...the funding cuts within the local authority has left social work very, very much...the threshold for a social work service is much higher therefore third sector organisations like this is working with very complex issues and risks.”

Services expressed appreciation, as well as support and empathy for colleagues working in statutory social work, and spoke of the close working relationship between them. However, they described a situation involving several inter-linking factors.

Services referred to huge pressure of demand on area social work teams, with fewer social workers on the ground in some areas to deal with this. This environment contributed to sickness absence and staff turnover which affected work with families.

“But I would say that social workers are absolutely flat out. Really. It really is startling.”

“They’re not able to provide what I think they should be able to.”

Services across a range of different authority areas also referred to a change in the role of children and families social work. It was described as ‘crisis-led’, or ‘crisis-management’, with social workers performing a coordination or case management role. As the capacity of statutory social work had contracted, most relationship-based work with families had shifted to non-statutory services.

“I think the biggest change I've observed is around social work, and its ability with the best will in the world to provide any kind of service for families.”

Rationing of support

Many services felt the threshold for statutory social work involvement had increased, and that this explained the corresponding rise in threshold for their own service over the past few years.

“What we see as a child protection issue is often 'no further action-ed' by social work, and that's resource-led, I suspect it is.”

“There’s lots of families who could do with a level of support I think but they’re not at social work level and maybe years ago when there were more social workers around, they could maybe get in at an earlier stage. By the time it gets to social work I think the family could have had a service earlier but they don’t always get it.”
“Yeah, I think most folk would say there has been a shift in thresholds.”

**Kinship Care**

Policy decisions intended to improve outcomes for children and families whilst managing reduced budgets were often badged as service reform or re-design rather than cuts. Services talked specifically about the effects of decisions by authorities to reduce the number of children being looked after and accommodated, through increased use of kinship care, returning children from out of authority placements, and also maintaining children at home for longer.

“The other significant change that has happened in the last twelve months to two years is that we are supporting many more children to return back home after being looked after and accommodated. And this is children who have been out of the house for five, six years. Since they were babies. It becomes quite difficult to support that kind of transition.”

“Kinship placements being considered before other types of placements. So like a child could have three or four kinship placements break down before they actually end up looked after.”

“…what I’ve not seen is an increase in terms of community support, whether it’s intensive or lower level community support.”

“Kinship carers being asked to look after children when they clearly don’t have the space. And we’ve tried to support families. Like for instance we had a child who moved into her grandparents and there was no bedroom for her. So even buying things like a screen so you had the living room but you had a separate, kind of separate bedroom area for this young person. You know living out of bags, all her clothes were in bags so maybe buying a set of drawers. You know, families being asked to do the most ridiculous things. They don’t have the space or the equipment.”

**Worsening socioeconomic conditions**

Services also attribute the greater severity and complexity of families’ needs to worsening economic and social conditions over the past six years, and the emotional and psychological impact of this on individuals. One service said they didn’t think the problems themselves were necessarily more severe, but the capacity of families to deal with things had been undermined by the day-to-day battle for existence. In 2013 services described having to meet basic needs before being able to begin working with families. In 2019 they talked about families in ‘dire consequences’, experiencing destitution; no food, no heating, no secure housing, and struggling with mental ill-health having a significant impact on parenting.
“…welfare reform...there has been huge financial deprivation we’re seeing families going through. Don’t get me wrong, it’s always been significant. I case-worked with families nine years ago, and fifteen years ago at this service, but it seems to be getting worse, it seems to be.”

“I’m not sure if it’s more severe problems, I just think we’re working increasingly with families who are just completely overwhelmed, who just don’t even know where to start.”

“...struggles with mental health are entrenched within the lives of a lot of young people we’re working with...I’d say 90% 95% of young men we have coming through the service have significant mental health issues. I don’t remember it, certainly fifteen years ago, ten years ago. Don’t remember it as being as significant. I think there’s something about the whole external environment and its impact on individuals. Not seeing the chance of anything getting better.”

“So you really feel it biting in all areas, through social work, through the benefits system, through schools and through general service provision.”

A service manager spoke movingly of the situation of many of the young men they encountered:

“They are getting involved with peers, they are not thinking for themselves and they just start down a path and before they know it they are in over their heads and they really struggle to get off that particular road. They really do need help.

Loneliness and isolation.

Poverty.

A lot of them feel like they don’t have a great deal to look forward to.

Their attendance [at school] hasn’t been great so their academic record isn’t great. They don’t hold out much hope for getting a job, a good job or being able to afford anything any time soon.

So, they are kind of looking to escape.

And it’s drinking, it’s drugs and yeah that allows them to escape for short periods but in actual fact it’s really just...

...they are just pulling the earth down on top of themselves. It’s frightening.”
Headteachers talked about the severity and complexity of the problems being presented within their schools. All emphasised the difficulties in generalising about pupils’ experiences but gave examples of the complex difficulties with which they had helped children. Central to this is teachers’ relationships with children and sensitivity to changes in their behaviour.

“... it’s the story of this school, which is on the surface it looks okay if you walk up and down the corridors you’ll see lots of children in their uniforms reasonably well-presented, but the story behind that can often tell a different story. And it’s a small school, so it is, and that helps because I know most of the stories, which means, that definitely helps. We know the children and we can make sure that we do the best we can for them.”

“A lot of our families we kind of get to know that there’s an issue there in the family through the child’s behaviours. The child’s behaviours escalate, or we can tell because of the demeanour of the parent. I’m thinking of one parent in particular who walks past this window and her head was down constantly...”

“I think in terms of the number of children, we are seeing an increase in the number of children who have got barriers to learning. What I’ve observed is that we’ve got many more children who are coming with difficulties of a family-associated nature. So we’ve got children who’ve been brought up in a drugs background or alcohol background or indeed just out-of-work background. So that can demonstrate itself in a variety of different ways.”

“You absolutely can’t take anything that you might assume to be a ‘for granted’ about parenting. You can’t take it for granted here at all. And I can say that, with the greatest of respect to my parent cohort.”

“So sometimes it’s the parenting issues that are the problem, and not a diagnosis. And that’s something quite difficult too.”

Four of the primary schools have nurture rooms, which pupils access for a range of different reasons.

“...the need in the nurture room would range from a child who’s struggling to form relationships, to kids who have had really significant issues at home to do with alcohol abuse, drug abuse, badly-handled parental separation – that’s a big one...”
Suicide or loss of a parent or relative, parental mental health problems or serious illness were also issues raised by headteachers. One talked about the impact of domestic abuse on a child and their mother, providing an insight into the difficult experiences of young children and the role of schools in helping them cope:

“I mean I’ve got [a mother] at the minute, she has to be in school with her child, because her child is so anxious when he knows that he can’t see her, because he doesn’t know if she’s okay. He gets really, really anxious. And on Friday she had been coming into school for a couple of weeks before the holidays. Last week was tricky for her especially because she felt that her relationship was breaking down with him. “

Social work support for families
Where social work was involved with pupils this was for a variety of reasons, often because of family circumstances involving neglect or domestic abuse. These issues were reflected in numbers of children beginning school with poor speech and language and experiencing difficulties self-regulating. One headteacher said:

“I’ve got right now seven children who are listed as looked after, that’s either kinship arrangements or it’s compulsory supervision orders, that’s about to increase I’m going to a Hearing today which is about another two children, and I’ve got a Hearing next week where I’ve got another two who will be going into care.”

“One particular family at this moment of time is struggling through both a social and emotional, possible ADHD and PTSD background as well, for the child, who’s only six, and the child has been through a variety of with parent, foster care, kinship care, and back to parent again. So the impact that’s having on his life, because of the lifestyle and background, has been huge, and he’s now on a part-time timetable because he’s struggling with mainstream.”
Schools’ experiences of engaging with social work

“...a lot of the bureaucracy is frustrating because you’ve got families in crisis, but not yet at tipping point.”

Primary headteachers felt improved multi-agency working had facilitated help for families whose needs were more complex, however persistent problems remained around identifying neglect. They felt this had to do with differences in understanding and interpretation between professionals, as well as to do with thresholds within social work.

“...the silos have been broken down significantly over the last five years I would say, but there needs to be more work done on creating a common understanding of what neglect looks like.”

This testimony concurs with key themes within the wider literature on child neglect and education services, in particular the contested nature of neglect and the difficulties inherent in working across two fields of professional responsibility. These issues were core to the 2012 Review of Child Neglect in Scotland, which examined the extent to which GIRFEC was helping to embed a common multi-agency language for professionals and a shared understanding and improved level of agreement about what type of intervention was needed and when.

Primary headteachers in the most deprived areas articulated the view that there will always be a space between, where a family won’t voluntarily work with a family support service, and when things have not ‘tipped over’ enough for compulsory proceedings by social work. Intensive family support is intended to bridge that gap, but schools are saying that they continue to see children who are falling through.

“...I mean I don’t understand how you can have a child who goes through seven years of primary school with head lice. Why is that okay? Are you telling me that doesn’t affect that child’s mental health?”

“Neglect is probably one of the most frustrating issues for me, because so much of what is neglect is a matter of opinion. I know when things are as stretched as they are resource-wise, whether it’s through a social work setting or in education, it can be difficult to apply the proper resources. But when I’ve got a child who I am screaming is being neglected, and I’ve got other services saying, ‘well mammy’s saying this, and mammy’s doing that, and mammy’s doing the other’, I say, ‘Well, look at the wean.’ And they say, ‘well that’s just what you think.’”

“So neglect for me is a big, big issue. It is that thing where you know that child needs something, and I know that I can’t give it them. And I can’t affect it any more than I have affected it. And that’s the horrendous part of the job.”

“The space that still remains is where you have got families that won’t engage with [the family support worker]; and where social work won’t recognise it as neglect.”

“That, so for me, it’s that area where it’s too severe for our family support worker, or the worker has done everything that they can, because they don’t obviously have statutory powers, but social work don’t want to take it on beyond that.”

“I think it’s very myopic because we’re doing everything we can and then at the last ditch when they’re really, really in crisis there’s nothing”.

“Because very often the biggest barrier to accessing help for children in families, are the families themselves, and the protections that they have in law. Now I don’t know if that’s necessarily a popular view, but it’s that idea of ‘I know that family’s in need. Part of the need is that the parent is not identifying that there is a need, but there’s not enough there for social work to go in there and get compulsorily involved. And the family won’t engage with our family support worker, they won’t engage with any voluntary services. And so those are the barriers.

But I understand the need for the protections. So those are the ones who you have to continuously just chip away at and try to become more creative in how you access support for them or bring them to the point where they’ll access support themselves.”

The 2012 Review of Child Neglect in Scotland identified the need for financial resources to be spread across the spectrum of service provision to facilitate a shift in focus towards earlier intervention. Professional respondents to the Review reported a ‘general unease and some anxiety’ that by the following year there might be a risk of closure or reductions to family support services in their area, and possibly even cuts to statutory social work services through non-filling of posts.33 In 2019, some headteachers perceived resources as an issue in trying to access social work support for families, and drew the parallels with trying to access CAMHS or other community-based mental health or emotional support.

“Probably the only thing I would say is the likes of accessing [local service] or CAMHS. Their waiting list is absolutely HUGE. So if you put a referral in, you don’t do that lightly. You know, you’ll have done all the work, you put it in, and it can be so many months before you get an appointment, that can be very challenging.”

The response: supporting vulnerable families

Services and provision must be designed on the basis of need and with clear data, rather than on acceptance of how the system has always operated.

Scotland must avoid the monetisation of the care of children and prevent the marketisation of care.

There must be strategic, needs-based planning for children so that they are provided with warm, relational, therapeutic, safe, loving environments when they are required.

Scotland must make sure that its most vulnerable children are not profited from.

(The Promise, 2020:111)
In 2019, we found that of the original fourteen intensive family support services, six have closed.

The closures involve a number of services which, in 2013, described themselves as being in a relatively secure and even privileged position in terms of their financial stability and strength of relationship with the local authority.

In some cases, the closures involved local authorities taking services (and funding) in-house to protect their own workforce, or ‘bringing back’ staff previously seconded to third sector services. Although education is a key priority for the Scottish Government, the closures include a service which, for thirty years, had provided holistic family support across all the local authority’s nurseries and schools to help educational attainment. They also include a service which, in 2013, was described by the service manager as, “highly regarded by families, it’s seen as the holy grail to get a place here.”

Of the six services which have closed:

- two have been combined into one completely new, but more limited, service;
- three others have been replaced by new services on a different model;
- One closed when the service was taken in-house.

Of the eight remaining original services:

- two have significantly changed focus since 2013, while;
- six continue with largely the same focus but with changes in terms of eligibility criteria, level of intensity, and strands of service provision;
- One of these six has ‘vastly’ reduced in size, while another has expanded.

“We’ve experienced so much change over the past five years, probably the five years has been probably the most significant in terms of change and trying to... I guess not chase funding, but look at gaps in services and where we could fill those gaps, but then finding that there was no money to do that.”
The financial context for family support

There have been very substantial changes to services for families over the past six years, caused by the severe financial pressures on local authorities.

Audit Scotland warned in 2016 that, to enable social work services to continue to be delivered at the existing level, by 2020 an increase in funding of between 16 – 21% was needed, simply to meet the cost of new policies and legislation along with projected demographic change. Instead, between 2012-13 and 2018-19, local councils experienced a real terms reduction in funding of 7.6%.

Audit Scotland has highlighted the additional severe pressures created by new national policies and legislation, combined with ring-fenced commitments. According to COSLA, ring-fenced commitments continue to grow and now account for 60 per cent of local government revenue expenditure budgets in 2019/20, leaving all other public services to be funded from the remainder. This is the context in which local authorities have been reviewing how, with a reduced budget, they can continue to support the families with the greatest needs - whilst also meeting the requirement to show continued improvement.

Concerns about the impact of funding constraints on social work practice and the pressures placed on frontline staff have been shared by bodies representing both senior social work managers and staff. Such are their concerns for the safety of children, social work staff in one local authority have voted for industrial action to have these addressed.

The impact not just of finances, but broader issues around the purpose and status of social work within the new integrated service landscape have also been raised by social work professionals and academics.

While the Scottish Government has set a target of tackling child poverty by 2030, COSLA has warned that, without adequate funding, local authorities will not be able to realise their role in addressing the causes, while the sustainability of vital services such as breakfast clubs, school holiday activities, and things like temporary homelessness accommodation, which help to alleviate some of the effects of poverty, is already in question.

Insufficient funding and high levels of risk were identified as the main challenges to family support where children are at risk of being looked after, in a 2019 review carried out for the Scottish Government.
Funding for services since 2013

In 2013, most of the services were ‘core’ (revenue) funded by the local authority, either by social work or education, or a combination of both. Just two of the fourteen services did not receive most of their funding through a local authority. In these cases, the service relied upon donations and charitable giving for funding.

Most services had not yet experienced significant cuts to their local authority funding. Standstill funding was the norm and managers referred to increasing pressure on their organisations’ voluntary (charitable) funds. On the surface, it seemed these services were well-placed financially, in large part because of their long established relationships with their respective local authorities. Most services were long standing and had been part of their local communities for between ten and thirty years. In several cases, in a sign of strength, services had been won in tendering processes.

Six years later the financial position had in most cases worsened significantly. In 2019 most areas reported significant cuts in local authority funding having already happened, or being expected imminently. A few services described the impact as ‘drastic’, ‘horrendous’ and ‘significant’. Three had incurred dramatic reductions not just in staff numbers but in multidisciplinary expertise. The impact on staffing resource varied widely across the services, with some reporting a stability in core staffing while others described the non-filling of vacant posts and absence.

“we’ve been told there are significant cuts coming in the next financial year (2020/21). So everything’s up for review across the council just now…”

“So this year, in Feb/March time, [the Council] were recommending that there was a 5-10% cut. That would have been horrendous for a lot of the smaller organisations. We kind of thought 5% we could maybe absorb some place within that but 10% would have meant we would have lost a member of staff, or two members of staff. We couldn’t have sustained that particular level of cut…they still need to save an amount of money so we’re expecting next year (2020/21) we’ll get hit with a pretty big cut.”

The ‘best case’ reported by services was to continue to receive standstill funding, but even in this scenario, uncertainty and insecurity remained and services reported having had to lose posts, move to smaller premises, and stop covering staff absence including maternity leave, while continuing to support the same number of families.

“We haven’t had an increase, in fact we’ve had a decrease, significantly, most years. And the expectation that we will still deliver the same thing.”

“We’ve continued to deliver the numbers that we said we would. And part of that is because you’ve got commitments to young people, part of that’s because it’s the culture we live in – more for less – and you’ve kind of felt that you’re obligated to. You’ve got to ‘work smarter’. You need to do that.”
“...though we do have local authority funding we continue to bring in funding from external sources, but it’s not sustainable in the longer term. And that has an impact, it has a massive impact.”

Where services have been successful in diversifying their funding streams this always involves fixed-term project funding. If this is for a three-year funding term, even if the service evaluates well it is unlikely to be extended. Many of the services referred to new strands of delivery for which funding had been obtained, but which had come and gone since 2013. These included a community integration project for Syrian families, and a domestic abuse service tailored to the needs of young women.

Marketisation of children’s services

In 2013, a minority of local authorities had started to competitively tender for children’s social care contracts. Six years later, tendering has become more widespread and the market approach has developed further in some areas with ‘spot purchasing’ of specific services for targeted groups or individuals replacing core funding by local authority departments. In 2013 the arrival of self-directed support, direct purchase of services by individuals from a personal care budget, was being anticipated by services supporting children and young people with disabilities. This changing model of funding now includes the Scottish Government’s Pupil Equity Fund through which individual headteachers have a budget to purchase services in a market-place. Several of the family support services previously core funded by a local authority department(s) to provide a population-wide service, now rely on contracts with individual schools to do specified pieces of work.

Services described the new culture that has accompanied this further development of a market approach to care and support for vulnerable children and families.

“There’s a shift in the culture, a change in the conversation...in terms of talking about contracts, value for money. ‘How much is that?’, ‘how much of that can I have?’ ‘It is about the negotiating, it is about the lottery, it is about the marketing, it is about the promotion.”

“And that places you in a VERY different relationship with families, when you have to talk to them about money, and it’s not felt you know, my background’s not in finance, I’m a social worker. So it goes against the grain a bit, having to chase money and invoices.”

“We have to record all of our timings for everything, for every part of the pieces of work that we do. So, that took a bit of getting used to.”
All but two service managers said they were spending more time on financial tasks and less on direct support for delivery than they did six years ago. In part, this was due to internal restructuring and a redistribution of responsibilities between regional, service and team managers. However, services dependent on multiple funding streams (thirteen in one case) and those involved in PEF: Pupil Equity Funding and SDS: Self Directed Support reported significantly increased amounts of time spent on administration.

Managing declining budgets/service reform

“...we really had to re-engineer the whole service.”

Local authorities are managing budget cuts (‘efficiencies’) in a variety of ways including bringing services or staff in-house, embarking on ‘shared services’ with neighbouring authorities, and tendering services for the first time or re-tendering. Local authority reviews of family support services had taken place at least once in most areas, often with lengthy timescales, leading to changes in procurement or reform of service delivery.

Some local authorities have worked with third sector partners to redesign services; worked collaboratively to identify needs and encouraged consortia bids from existing service providers; or have asked services to suggest what they can provide based on a funding cut, through redesigning their service. By working closely with third sector organisations councils can draw in additional funding for services through trusts and foundations. These approaches often reflect the difference in relationships at local level between statutory agencies and voluntary organisations, noted six years ago. As the funding for family support has shifted from social work to education, in line with national government policy, local authorities have also adopted different approaches to utilising Attainment Funding.

Added to this is the impact of austerity on charitable income. Most charities have experienced declining income over the ten years of austerity. In 2013 voluntary (charitable) funds provided vital additional support for many services, although there was awareness that this was not sustainable. To varying degrees, the reduction or removal of voluntary funds over the past six years has had an impact on the scale and nature of support available to families. In 2019 one service was dependent on voluntary funds to ‘fill the gap’ as it hung on a thread awaiting the outcome of a service review.
Families’ access to help – how has this changed?

The original fourteen services covered fourteen local authority areas. In five of those fourteen areas access to intensive family support has either been reduced or removed altogether. The local picture varies dependent on what other provision may be offered. These are areas where the removal of funding has led to previously mainstream revenue funded services being replaced by either spot purchase by the local authority, or purchasing by individual schools for specific families using Pupil Equity Funding.

The impacts of this include:

- withdrawal of service to families with children under 5 years of age;
- support previously accessible to families across the entire local authority area now confined to individual primary schools whose headteachers choose to buy it;
- loss of service or a much more limited service available from a much-reduced local authority in-house service, where services have been ‘taken in-house’.

In 2013 many years of standstill budgets were putting pressure on service delivery as services were expected to deliver within budget constraints and in some cases, were expected to have wider reach.

The ongoing pressure to deliver ‘more for less’ is very much evident six years later. In 2019 services in receipt of local authority revenue funding relied upon the dedication of staff ‘working smarter’ to meet families’ needs. However, some consequences were reported:

“We’ve actually had cuts to funding and we’ve lost posts...what we’ve done is that when people left we didn’t fill the posts. But what it means is we didn’t have the same responsiveness to pick up on spot purchase stuff as we might have done, which meant we weren’t as responsive to some of the young people’s needs as we could have been, which we would have been previously, for Sundays or whatever...”
In some services, access has been limited by a policy of rationing, taken by the funder, with a reduction in the numbers of families worked with annually.

Other areas provided positive examples of utilising opportunities to improve access for families:

- by harnessing Attainment Challenge funding at local authority level to provide family support workers in a coordinated way to schools, based on SIMD profile;

- by encouraging collaboration between third sector providers to create a support service available to children and families across the full age spectrum which draws on the strengths and specialisms of each provider.

Intensive family support services can play an important role in mitigating child poverty by reaching out and accessing wider social and economic resources for families. Several services discussed how they were now more constrained in doing this in some of the ways they had been used to. Some services said they no longer have the capacity to be flexible and creative in the way they once were to identify and respond to children’s needs.

They talked about all the ‘extras’ they used to do for their families through spotting opportunities to reach out and work with other third sector and statutory services. These included, for example, providing summer holiday programmes and other experiences, health immunisation of teenagers and accessing adult education for parents. The ability to provide all of these extra things for families, previously a given, was now compromised or lost, due primarily to the redesign of services but also to reduced funding and staffing capacity.

“In the past we had some of our colleagues from community learning and development come along to meet some of our parents to link them with their service. There’s that bit about confident parents, confident children. So the young people we were working with were watching their parents and carers becoming educated, which encouraged them, in turn, to offer themselves in a different way to education.”

Some services talked about how the ‘treats’ had gone; those ‘nice to haves’, such as outings, which previously helped to ‘cement’ the work done with families. All family activities now needed to be cost free. Budgets to provide snacks and meals for families now need to be accessed from external funds.

“That is totally gone, the whole budget for supporting children, to support these experiences is gone. So a real reduction in service for children whose mum or dad has an addiction.”
Supporting the workforce: ‘Holding the hands of those who hold the hand of the child’

There are strong pressures on the ‘core’ supports on which frontline work with children and families depend: that is, case supervision, clinical supervision of staff, professional development and training, including time for team development, as well as administrative support. These all cost money, and this has placed growing pressure upon voluntary funds (charitable income). The closure of one of the original services was attributed to these core costs making the hourly charge uncompetitive in the new market-place, particularly against entrants using business models such as ‘self-managing’ teams.

These pressures are being caused by funding cuts (whether in cash or real terms), by changes in procurement model, and by the availability of voluntary (charitable) funds.

“…because, well, you’ve got to work smarter. You need to do that. But I think we – you get to the point where you can’t do any more. Because you want to deliver a quality service. So I would say that we’re at that level.”

The impact of wider cuts in public services had a direct impact. In particular, property rationalisation by local authorities to save costs had in two cases led to services losing their ‘home’. Third sector services often share premises, so when one loses its funding, others may become ‘homeless’.

Not just cuts, but ‘reform’ of service delivery (bringing services or staff in-house, embarking on ‘shared services’ with neighbouring authorities, and services being tendered for the first time, or re-tendered), caused heightened anxiety, ‘unsettledness’, and insecurity for staff working with families. Since 2013, the staff in one service had been through two redundancy consultations.

“Yes, the threat of the tender has been there for two years, at least. So in some sense it would be better to get it over with for the whole team.”
Services said that they were not always comfortable with the direction of travel, but knew that there was no option:

“...it’s just because – as with all change in all organisations, culturally we knew we had to go with this, because potentially we could lose services. So we had to move with that. But that’s easy to say, it trips off the tongue. But it’s about how are we going to manage change. That’s where we’ve been, it’s been about managing change.”

“...it’s the change to the services, bringing services together... it’s managing all of that as well as changing what we do.”

The impact on staff of working with children and families in dire situations, combined with the work intensification experienced by services was acknowledged:

“There is a sense of hopelessness that if you’re not careful and not managing your team positively, they can become entrenched in the hopelessness of it. And the hopelessness and helplessness go really closely together, and we have to be really careful because we don’t want to tip people into that.”
The shift towards school-based family support

Reflections on this shift are presented from two sources:

- primary headteachers who have experience of family support workers within their schools, within a single local authority committed to investing in health and wellbeing;

- service managers of intensive family support services based in several local authority areas, a number of which have Pupil Equity Funded contracts with schools.
Headteachers were unanimous in their support of school-based provision. The effectiveness of basing family support in schools had been established in the early years of devolution, according to one headteacher:

“It was nailed before I think, years ago, when they looked at Community Schools, and it was almost exactly the same. There was social work identified, you had the family support worker identified, you had [other staff] coming in. So all of those things that were in place then, are in place now. That stopped then because the funding stopped. But we knew that it worked. Now we’ve come full circle, we’ve got different names for different agencies, or whatever, but the same impact is being felt. It is working.”

Another headteacher emphasised the value and effectiveness of school-based family support as one strand of a strategy to improve children’s emotional and mental wellbeing, made possible because of additional funding.

“I became the Headteacher the year the Attainment Challenge was launched, so this is Year 5 for me now. We’ve gone from spending the bulk of every day firefighting, whether that was children fighting, children absconding, children melting down, parents melting down, parents getting arrested for fighting in the playground, I mean all of that and more – I mean I’ve been headbutted, I’ve had to go to hospital, all of these types of things and that’s no longer the profile of this school. That’s not what you see. That’s not what you feel.

And that’s all down, as far as I’m concerned, it’s down to three strategies, three things that we’ve done. All of which have been funded over and above the core funding of the school.

The first one is that we have a play therapist in the school. The second is direct and immediate access to family support. And also I’ve used our PEF money to fund five additional support staff.

So the climate in the school has changed completely. People who come round the school now always note how calm it is. That’s been achieved in three years.”

The foundations for learning

All the headteachers identified their first priority is providing the necessities for children’s wellbeing. Safety, security and consistency were described as the precondition for children being able to access learning. For those children with the most challenging family circumstances this was regarded as the most important thing which school provided in their lives:

“I don’t know if my focus was always on attainment, it was always about having a positive experience of school. And if we can get that, then the opportunity for attainment might come later. But that was always the first thing, safety, and a positive experience of school, for the kids and the parents, because if we can get that then they might engage later on.”
“I’m thinking of a wee one...absolutely bouncing off the walls for the first few weeks but then recognising that it doesn’t actually matter what she does, because it’s a fresh slate every day, and there will be a teacher in front of her smiling, and an Additional Support Needs (ASN) beside her smiling and welcoming her. It’s about the quality and consistency of relationships that you can provide for kids. That’s definitely what makes the biggest difference.”

It is notable that, despite health and wellbeing being a strand of both Curriculum for Excellence and the Attainment Challenge, the evaluation of the Attainment Challenge does not seem to capture the ‘softer’ non-academic indicators of progress for children. For example, improvements in children’s emotional wellbeing and ability to cope, reduction in anxiety, of children being able to remain and to thrive within mainstream education. Two of the schools reported a fall in school exclusions, and referrals to social work. What isn’t measured or measurable tends not to be valued.

“...one student who wasn’t in class, because he just could not manage being in class, he was trashing the classroom constantly, three or four times a day, and having [the family support worker] supporting that family, having play therapy support that family, having CEDAR supporting that family, all of these things and, yeah, if somebody said to me, ‘but he’s still not meeting his benchmarks’ I’d say, ‘but he’s in class.’ So there actually is achievement there, but it’s the soft skills and the soft achievements that aren’t recorded here that make a difference for our families.”

Schools were clear about their role in providing social ‘scaffolding’ for pupils and families. However, they were also clear that headteachers need time and space to do relational work with children and parents. In some schools, this was being achieved by buying in additional teaching and support staff to free up time. Some of that relational work was being delivered by their family support worker, working with parents in school and in the home, in groupwork and one-to-one.

Working together

Services themselves recognised the additional support they offered teachers. The manager of a service which had just begun to work in schools for the first time, funded by PEF, spoke of the importance of the service provided to headteachers, in supporting them with their caring responsibilities for pupils and families:

“...working in partnership with schools has been a real change for us. We’ve worked in partnership with social work for so long and for a short time with health services, but for schools I think it’s been a real eye opener for us in terms of seeing that schools and teaching staff are expected to be everything to everybody now, it’s not just going in and teaching that child, they’re expected to do so much more in terms of caring. It’s be the nurse, be the tutor, be all the things you know you need to do to try to engage families, so ...and often, you know, teachers are so stressed, backed into the wall, so somebody from my staff team coming in they so appreciate that.”

Headteachers were very clear about the value of having intensive therapeutic work with children available within the school including play therapy and nurture work.

“Our biggest changes, our most high tariff kids who’ve become low tariff kids, have been through that therapeutic process [play therapy]. So it’s that safe space to explore your emotions with somebody who’s fully qualified to guide you through.”

One huge positive of providing family support workers within a school means they are part of the school community helping break down the stigma of accessing a service. Headteachers were emphatic about the value to schools; noting that a family support service provides the time for intensive relationship based support.

“So it’s brilliant because it’s outwith school and it’s that contact in the family house, and it’s that one-to-one support for the parent, at home and not in the school, because some parents don’t respond very well to that, because this particular parent I think she’s had problems in the past with authority, so us building that relationship with her was quite hard, but for a family support worker to go out was much easier, because it was on her territory, in her house, and she felt much more relaxed.”
“... it’s given me an opportunity, my family support worker, where I’ve got families where I’m thinking there’s an issue here, to maybe get in the door a wee bit, not in the school, but in the home, and that’s a great way, because a lot of families where there’s trouble you can’t get them into the school. Kind of outreach to that. And that’s been mixed success there, because some of the issues are deep rooted, and there’s mistrust, people just don’t want to engage, you know.”

In schools with the highest proportion of pupils living in the most multiply deprived areas, headteachers could not imagine managing without additional funding for family and other child wellbeing support in the future:

“The answer is categorically ‘no’. Absolutely not. Completely and utterly not. I would not want to be a headteacher now without it. I would take early retirement. I wouldn’t go back to that. The stress was unbearable. Totally, totally unbearable.”

“I actually don’t think we’ll be able to manage without having that resource to support families. We’ll go back to ... when I started here it was me and the headteacher trying to do all of these things. And failing at everything, because you just don’t have the time to do it all.

Children falling through the grate all the time, not having the time to support individuals etc. Now I feel we’re right on track, we’re really supporting our children, there’s still lots of children we need to support, but without that funding we’re going to really, really struggle. And I’m serious when I say that I won’t be here, because I intend to retire before that. Because I think it will be too hard. I think it will be soul destroying, going back to that model, without having that funding.”

“It’s a very responsive service and I will fight tooth and nail for it.”
The wider perspective from intensive family support services

Unequal access to help
Services based in different areas which have moved from being local authority revenue funded to being paid by individual schools through Pupil Equity Funds made a number of observations about the inequity of access to family support services which has arisen because of the new funding system:

“But certainly the 0-3 bit, now we’re not catching them. Which is where we had a lot of referrals previously.”

“I think the difference is that we’re not in as many schools. It’s only those who are buying us in that get any of that. So we’re not influencing on such a wider scale.”

“Now we’re getting maybe one school, maybe two, in a cluster area. Previously we’d have been in and out of most of them, you know, in a year. We definitely aren’t any more.”

“And now we know that headteachers are watching other schools and wishing that they had the amount of PEF that some other schools have got, and then they would have what they used to have.”

“...some schools are doing whole school initiatives whereas other schools don’t have the funding to do that so they’re having to be quite careful with their PEF and think I’m going to buy one day of your time and that’s targeted at this family or this group of children.”

“I think what children get is very different and very dependent on who happens to be at the top of their school and what vision that person has.”

“It’s a bit of a lottery and depending on how much time the headteacher has to investigate some of that, and it’s not always possible. So I definitely think it’s lots more complicated for headteachers, and for us.”

“One of the headteachers, we started off with a one day a week contract, with one of my team, and by Christmas he was saying, ‘I need two days. I can see this is working, I’m dipping in my toe in the water a bit with one day, but can I have two days now?’ So we’re now progressing quite quickly through schools not just in the number of hours that we get, but in the services we’re providing.”

“also from schools we hear in terms of their PEF budgets, although headteachers are able to spend the money on whatever they like, they are having to spend it on teaching staff and support staff. It’s meant that schools who have come to us and we’ve done a wee bit of work for them, have then come back to us to say, ‘we can’t do it any more’.”
Access to services

“We were contacted by a GP who said, “I’ve got a fourteen-year-old and they are really low. Can you work with them? Please can you...they need 1-to-1 help.’

I say, ‘does he go to [name of high school]?’

‘No, he doesn’t.’

Well I’m sorry because I do have a service in [name of high school] and its feeder primary schools’.

‘Could you not make an exception?’

Well, I’m like, ‘no I can’t sorry because my funder wouldn’t be happy and I would love to but I can’t ...’”

Substitution for services lost

There is evidence that in some local authority areas schools are using PEF as a substitute for services which were previously available to them funded by the council. Three of the original fourteen services in this study were established as education-based services, dating from 1998, 2000 and 1987 respectively. All three have closed since 2013 during the time when closing the poverty-related attainment gap became a Scottish Government priority.

One service directly related the increase in demand from primary schools looking to purchase family support to both the loss of home link workers from schools, and the loss of capacity in family support services in the area due to cuts. In other words, schools are seeking to replace the support previously available to them, but lost in the financial squeeze.

“...the thing that schools and social work are both saying is ‘we don’t have anywhere to refer these families to anymore, because the family support service we can refer them to, is full. And there’s waiting lists and whatever.’
Headteachers talked about the kinds of things they believe help children be successful, despite the difficulties in their lives. Service managers described what, in their view, would make the biggest improvement to the lives of their vulnerable families.

What helps children overcome adversities?

Building relationships

For headteachers there were two key themes. First, the quality of relationships: parent-child relationships, teacher-child and teacher-parent relationships, parent-support service relationships, and child-therapist/support worker relationships. They emphasised that building relationships requires resources: in terms of headteacher time, and the added capacity, both in expertise and time, brought by family support workers, nurture workers, play therapists, community learning workers.

“...well it’s relationships isn’t it, its ALL relationships. It’s about the quality of relationships. The consistency of relationships that you can provide for kids. That’s definitely what makes the biggest difference. So that would be universally.”

“I think it back down to relationships and having time to speak to people. I think because we have more staff we can spend time speaking to children and understanding”

“...but that takes building relationships, is the most important thing for us, because you have to build that relationship of trust with parents before they’ll open up to you. And that can take years. That can take years.”

For children and parents who are struggling, it is about being able to give time and attention. Headteachers stressed that they are able to do this only because of the extra funding provided through the Scottish Attainment Challenge and Pupil Equity Funding.

Providing nurture

Second, it is to do with what school can provide children that has nothing to do with immediate academic achievement. The starting point for this, “the first and main priority” as one headteacher put it, is to give children and parents a positive experience of learning and of school. By laying down that foundation, by having a nurturing ethos throughout the whole school, and by giving children opportunities to learn resilience and problem-solving skills, then the door is open for children to be able to benefit from learning in the future, even if they are not achieving at the desired level now.
What do services tell us families experiencing complex adversities need?

Service managers focused on the systemic issues, with the first key theme being resources and investment in children. Not ‘throwing money’ at things, but making long-term consistent investment in children ‘the new status quo’ for society. The main changes that services believe are necessary are summarised here.

“I think, I suppose it’s about the value base and how much we invest in children. If we actually want things to get better we have to invest in it.”

From the perspective of services, the right things need to be funded and the right approach taken to working with families. In their eyes that means being honest and upfront with families about what needs to change and, for those who work directly with families, rolling up their sleeves and helping them to do things, rather than telling them what to do.

“Doing things that give people back a sense of their own self-worth, dignity, community and respect, because people don’t have that or any hope.”

Services were also clear in their view that the existing way of funding intensive family support is not effective: they believe families will benefit from services which have more staff and a more settled workforce that feels secure in its work and valued.

“And probably continuity of services because where there is continuity staff then become very skilled and families benefit from that.”

“So I think a bit of consistency in funding for families, accessibility and flexibility where we go into the family home or the family comes here or we will meet them in the school, that it really is that kind of outreach support as well.”

Services, it was found, believe investment is needed to ensure consistency of availability of a whole range of types of support for families, while also being redesigned to provide greater accessibility.

“So, I think services need to be very flexible so that families can reach and access them.”
Services were found to be strongly in favour of much earlier intervention for families, universal support in infancy and early years, and availability of mental health services at a much younger age:

“Much earlier work alongside parents and working alongside children, looking at building resilience, and managing anxiety and stress”

“...more preventative mental health and wellbeing services would really help... we need to start a lot younger, even from like initial nursery level. I mean it’s good we’re increasing the number of hours children are in nursery if they need it but I think mental health, and the focus on positive wellbeing and mental health, needs to start a lot younger and I think having lost the capacity to be preventive has had a massive impact. So, I think we need to strip it right back and completely look at the balance of where the money goes to and try and intervene a lot earlier.”
In 2014, with the first Children’s Services Plans and Integrated Joint Board strategies still to be written, we concluded that children’s services had to be redesigned in order to address the increasing severity and complexity of need, and to prepare for the widening and deepening of child poverty over the coming years.

Since then, the situation has worsened, with growing need for help by families, struggling with more complex problems, while the financial challenges for local authorities and other public bodies have continued.

We optimistically hoped that the legislative vehicles for change in Scotland – the 2014 Acts introducing improvements for children and young people, health and social care integration and procurement reform – might help bring about transformational change in services for the most vulnerable children.\textsuperscript{44} Within the financial climate of the past six years, it has not been possible for this to happen. However, the impending calamity for families experiencing multiple adversities, anticipated by the services which support them, has arrived.

The provision of family support within primary schools made possible by Attainment Challenge and Pupil Equity Funding has been an important development. These services provide support to children and families across a wide spectrum of type and complexity of need (from level 2 – level 3 of the Hardiker Model).\textsuperscript{45} However, outside of the small number of Attainment Challenge authorities, the purchase of family support by individual schools has, in places, developed in parallel with a loss of access to intensive support services by the wider population of families, as services are cut.

\textsuperscript{44} These were the Children and Young People (Scotland) Act 2014, the Public Bodies (Joint Working) Act 2014 and the Procurement Reform (Scotland) Act 2014.

\textsuperscript{45} See Appendix.
To address the current crisis we believe the following are necessary:

**FAMILY SUPPORT:** current provision of intensive family support is insufficient to meet the scale of need in communities. We need more comprehensive, better resourced provision in local areas. The Scottish Government must financially enable local authorities, Health and Social Care Partnerships, and Integrated Joint Boards to deliver on the Care Review’s recommendations for family support as a matter of urgency.

**FAMILY INCOME:** we are a grossly unequal society. This report has highlighted the struggles and challenges many families in Scotland are facing to provide for their children’s most basic needs. The Scottish Government must articulate a clear vision for family income in Scotland, and set out how – within the current levers available – it will ensure that all families have enough money to live with dignity.

**RIGHTS REQUIRE RESOURCES:** the incorporation of the UNCRC marks a significant milestone in making Scotland the best place to grow up, but it must be adequately resourced. Time and again we have seen that structural and legislative change does not automatically lead to improved outcomes. Without sufficient resource, the status quo remains or, as this report shows, deteriorates. Higher levels of public investment must be shifted towards children and family services. Children and families deserve no less.
Profile of the intensive family support services

In practice in 2013 there was a considerable degree of variation, not only between the services but in the context in which they operate. The same is true six years later.

Variation in the services

The services vary in terms of:

• their origins, length of time in existence, and development;

• the type of services they provide and the age groups of children and young people worked with (and in some cases the age of parents, with some focusing on young parents);

• their focus. These include parental substance misuse, domestic abuse, prevention of exclusion from school/family/community, housing/homelessness, and wider parental support.
However, what all the services have in common is a ‘whole family approach’, and the fact they offer a range of types of support to both parents, carers and children and young people experiencing multiple adversities, which in 2013 were mostly at levels 3-4 within the Hardiker model of prevention (Chart 1).\textsuperscript{46} This is a model which has been influential in the design of children and families support services in the UK.

\textsuperscript{46} https://www.academia.edu/4118557/Families_experiencing_multiple_adversities_a_review_of_the_international_literature
The context in which services operate also varies. This adds considerable complexity and nuance to the findings, an important caveat for generalising from this data. The fourteen areas had varying:

- levels and patterns of need involving concentrated areas of urban and rural deprivation.

- structures for children’s services, and provision of family support to meet the range of needs and different arrangements for working with the third sector. The degree to which authorities provided services in-house or utilised the third sector varied.

- stages of development of GIRFEC implementation as well as different approaches, for example, to multi-agency working in relation to referrals.

- positions in relation to procurement policy. The approach to commissioning and managing services differed, although the direction of travel was towards competitive tendering of children’s social care services.

- local authorities and health boards have taken different approaches to managing funding pressures. At local authority level, there were different experiences of cuts affecting services and policy differences in children services delivery. The impact of this is more complex because it overlaps with decision-making around public service reform.

- Attainment Challenge local authorities have all adopted different approaches to using this funding. Audit Scotland is currently auditing how well Scottish Government, local authorities and others are improving educational outcomes.

- experiences of the UK Government Department for Work and Pensions’ implementation of its welfare reform programme, including benefit sanctions. This appears to vary by local area, so the experience of services is likely to differ in terms of the impact on families.
Definitions

The definitions used here are derived from the review of international literature on families with multiple adversities undertaken as part of the 2013 research project.47

A broad definition of “family” is used, which acknowledges that ‘an inclusive twenty-first century definition of family must go beyond traditional thinking to include people who choose to spend their lives together in a kinship relationship despite the lack of legal sanctions or blood lines’. 48

The definition of ‘multiple adversity’ used reflects the breadth and complexity of types of multiple adversities identified by the literature review in key studies and UK policy documents. There is a plethora of terms linked with the concepts of ‘complex’ and ‘multiple’ needs, used by various disciplines, sometimes specifically, and often interchangeably. Lea’s analysis49 suggests that most definitions include reference to education, crime and health disadvantage, alongside poverty and risky behaviour. Similarly, the range of different adversities used can be grouped under eight broad headings:

- Poverty, debt, financial pressures
- Child abuse/child protection concerns
- Family violence/domestic violence
- Parental illness/disability
- Parental substance misuse
- Parental mental ill-health
- Family separation/bereavement/imprisonment
- Parental offending, anti-social behaviour

---

Methodology

The services

The study replicated the design of the original 2013 research which involved fourteen Intensive Family Support services in a range of locations – including major urban settings, smaller towns and more rural settings – in fourteen local authority areas across Scotland. With the support of Barnardo’s Scotland, contact was made with the extant services from 2013 or, where these no longer existed, with the Barnardo’s services which had taken their place in the area. Semi-structured interviews were conducted with service managers or team leaders in summer 2019. Efforts were made to interview the same staff member as 2013, and where this was not possible due to personnel changes, another appropriate member of staff whose length of service covered the study period (2013 – 2019). In the original study, services were selected for inclusion if they provided intensive support to families at levels 3–4 in the Hardiker model (see Appendix, Chart 1). In other words, if they provided services to children in need in the community, or to children who are already in crisis and require rehabilitation. Some of these children may already be looked after or accommodated.

The interview topics included: developments in the service since 2013; changes to purpose, focus, funding, staffing; financial austerity and direct and indirect impacts; demands on the service, including trends in referrals; capacity issues, and changes in service level agreements; the types of needs presented to the service and the factors driving these; views on how to improve families’ lives and the barriers to this.

Primary schools

In 2019 interviews were also undertaken with primary schools. Primaries rather than secondary schools were selected for interview, because headteachers tend to be more familiar with their families at primary level, and because most Attainment Challenge Funding (ACF) is focused upon primary schools.

A request for schools to participate in the research was approved by the Director of Education of one Attainment Challenge (AC) local authority. The authority was selected on the basis that Barnardo’s Scotland provides education-based services to a range of schools of varying SIMD status across this authority as part of the Health and Wellbeing strand of the AC.
In consultation with the authority and with the involvement of service managers, six primary schools were identified for inclusion based upon the SIMD status of the school. The headteachers were approached for interview. Informed consent was obtained for five interviews, completed in the autumn or winter term of academic year 2019-20.

We explored with the headteachers:

- the most common difficulties their pupils experience in their home life;
- the types of complex difficulties pupils experience at home, including those pupils involved in social work proceedings;
- whether ACF had helped provide support for families;
- the inhibitors and opportunities of the ACF and Pupil Equity Funding (PEF) for schools.

**Ethics**

Ethics approval was obtained from both NSPCC and Barnardo’s Research Ethics Committees. The education component of the study was approved through the research governance process of the local authority concerned.

**Limitations**

The main challenge concerned lack of continuity in either the services or the personnel in place. A majority of the original services were still in existence, although the funding sources and orientation of the services had altered in some cases. In some cases, the team managers/service managers interviewed in 2013 had moved on. Fortunately, many of these staff are still employed by Barnardo’s in different roles and were able to complete any gaps in the history of the service over the intervening period.

Five schools is a small number in the context of the total number of primary schools in Scotland as a whole, and the number within Attainment Challenge local authorities. However, the study does not seek to be representative of all primary schools; it is a small qualitative study which aims to explore the range of experiences within primary schools of supporting children in families experiencing multiple adversities.
The table shows the proportion of pupils in each school who live in areas in the first and second deciles of the Scottish Index of Multiple Deprivation (SIMD). These are amongst the 20% most multiply-deprived local areas in Scotland.

<table>
<thead>
<tr>
<th>School – no. of pupils</th>
<th>Percentage pupils in SIMD 1&amp;2</th>
</tr>
</thead>
<tbody>
<tr>
<td>School 1 – 350</td>
<td>97%</td>
</tr>
<tr>
<td>School 2 – 426</td>
<td>69%</td>
</tr>
<tr>
<td>School 3 – 174</td>
<td>65%</td>
</tr>
<tr>
<td>School 4 – 258</td>
<td>46%</td>
</tr>
<tr>
<td>School 5 – 225</td>
<td>12%</td>
</tr>
</tbody>
</table>

Source: school headteachers

https://simd.scot
Acknowledgements

A special thanks to the dedicated service managers, team leaders and headteachers across Scotland who kindly gave their time to assist with this research.

Thanks to the two anonymous peer reviewers for their valued suggestions.

Much appreciation to Rachel Love and Niamh Mussen of NSPCC Scotland who assisted with data collection, and to Maureen McAteer, Nicki Lawrence and David Ferguson of Barnardo’s Scotland for their advice and support.