

**Changing the  
lives of children  
and young people  
across the UK**

**Barnardo's  
Impact Report  
2019**

**Believe in  
children**  
 **Barnardo's**



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# Foreword

**To be a young person today is difficult. To be a young person who has been in care is even more difficult. I don't believe that young people have the life skills to live independently as we're often forced to. From experience I think also a lot of young people struggle to build and make friendships.**

Barnardo's is a place where you are able to voice your mind about your experience and be listened to. Barnardo's staff listened to what I want and my hopes for the future and helped me build towards that. My goal is to work with other care leavers and use my own experiences to support them. I know what it's like to have nothing, and I know what it's like to not feel heard.

Spending time with and listening to young people are two of the most important things to a child growing up. When a young person feels listened to properly they start feeling more confident in speaking up and opening up. It makes the world of difference in a young person's life.

The Barnardo's project I'm involved in has been about building relationships – you feel like you can talk about anything and be yourself. It's a place where people care about you and it's a community.

Barnardo's has given me the opportunities that I wouldn't have had without it. It had opened my eyes and showed me I can do something with my life and I'm worthy and skilled.

*Jo is a young person who has been supported by a Barnardo's leaving care service and has been a member of Triangles, a pilot project which empowers care experienced young people to make transformational changes to the care system in their area.*

## Chief Executive's Statement

In our fifth annual Impact Report, we demonstrate how we are continuing to support vulnerable children and families across the UK. In a climate that remains challenging, both for the young people we support and for charities like ours, I'm pleased that our overall reach remains around 300,000. More importantly, I'm delighted to say that in 2018-19 we delivered a 26% increase in the number of young people we provided direct, individual support (to 84,500).

Thanks to the hard work and expertise of around 8,000 staff and some 20,000 volunteers we are continuing to fulfil the aims of our ambitious 10 Year Corporate Strategy – creating Stronger Families, Safer Childhoods and Positive Futures.

But at Barnardo's, we want to go further. We don't just respond to the challenges faced by children today, we are also preparing for the realities of childhood tomorrow.

That's why we are bolstering Barnardo's digital capability – piloting new approaches to service delivery that integrate technology like apps and messaging services.

As the UK becomes more diverse, some 20% of Barnardo's service users are now from BAME backgrounds. We put equality, diversity and inclusion at the heart of everything we do – to make sure we deliver positive impact for children, regardless of their community or identity.

We are also making strides in our journey to become a truly 'learning organisation'. Last year 85% of eligible Barnardo's staff undertook three or more days of learning, and we are investing in our workforce with programmes for 'emerging leaders' and reciprocal mentoring. We are also in the process of delivering trauma-responsive training to all staff and interested volunteers. In 2019-20 we will bring this learning together into 'The BU' – Barnardo's Corporate University.

Across the UK, children are continuing to face complex challenges. Most notably, there is a growing crisis in children's mental health, rising numbers going into the care system, and a tragic spike in serious youth violence. Barnardo's is continuing to work with national and local partners from all sectors to develop radical new solutions, so we can identify vulnerable children, intervene earlier, and support them to achieve a positive future.

Much of our impact is described in terms of the direct work we deliver through commissioned services. But our learning across the UK has convinced us that the best way to achieve sustainable impact for children and families with increasingly complex needs, is to move beyond traditional transactional relationships and towards transformational 'strategic partnerships'. That's why, using our own voluntary funds, we have joined this year with Leicestershire, Plymouth and Renfrewshire local authorities – and their partners and communities – to model this fundamentally different approach. The early signs from these partnerships are promising, and we are committed to developing them at pace and to applying the learning elsewhere across the UK. This approach challenges all of us to work differently – to look at our practices from the perspective of the children we support; to work with them in designing and delivering services; and to think beyond the limits of our own resource and influence – considering what we can achieve together with partners by embracing 'interdependence'.



**Javed Khan**

# Introduction

**We believe in children – we listen to them, we treat them with respect, and we don't judge them – no matter what.**

**We support vulnerable children in the UK with our services, campaigns, and research.**

**In our 2016-2025 Corporate Strategy, we set out our ambition to build on our achievements.**

...we also need to influence the wider systems around children...

We want to support more vulnerable children and young people than ever before. We want to help them overcome the challenges they face and move towards a brighter, happier future.

But it doesn't end there. We want to prevent the challenges in the first place. By tackling the causes as well as the symptoms, we can create better outcomes for more children.

In 2016, we articulated **three Strategic Aims**:



We committed to investing our voluntary funding<sup>1</sup> into **six priority areas** to help us to grow and build our expertise:

- Early Support
- Family Support Services
- Mental Health
- Child Abuse and Exploitation
- Looked After Children (e.g. fostering and adoption)
- Leaving Care/Accommodation Support.

However, we know that for the most vulnerable children there are often entrenched problems which we cannot fix through working solely with children and their families; we also need to influence the wider systems around children. We have invested in three **Core Priority Programmes** to focus this work:

- Mental Health and Wellbeing
- Child Sexual Abuse
- Children In and Leaving Care.

<sup>1</sup> Our voluntary funding from donations and grants is unrestricted and lets us work towards our own priorities; key areas of need we have identified.

# Reporting our impact

**Measuring the impact of our service delivery helps us to understand the difference we are making to those we support. When we understand what works – and what doesn't work – for who, and in what circumstances, we can have an even greater impact.**

## In measuring our impact, we consider:

- the aims of our work
- the change we want to see
- the services we provide and activities we undertake to achieve these changes
- how we develop solutions in partnership
- the actual change we see – expected and unexpected
- how we have a wider impact through influencing policy and practice.

We also look at what we are learning about our work, and how we can improve our work from this learning.

We seek measurement approaches guided by our core values of participation and inclusivity, which put children and young people at the heart.

Throughout our impact measurement we seek a proportionate approach to assessing the contribution of our efforts to achieve change, with the results informing our work.

We use a range of approaches to understand the differences we make to those we work with. Throughout this report, we detail some of our impact through:

- **Case studies** which detail how our support has made a difference for individual children and young people
- **Tools** we use to measure and report impact across cohorts of children and young people in our services, including standardised validated tools, Triangle Consulting's Outcomes Star, and, Barnardo's Outcomes Framework
- **Independent evaluations** where work is innovative or we think the learning will be of significant value, we often commission independent evaluations of our work.

While this combination of individual stories, outcomes measures, and independent evaluations helps demonstrate our impact across a range of services over 2018-19, our journey to better evidence the impact of what we do is on-going, and we know we still have far to go.

# Our reach in 2018-19

In 2018-19 we directly supported more than **294,300 children, young people, parents and carers**. We also worked with many more through our wider engagement and partnership work.

The number directly supported includes<sup>2</sup>:



Barnardo's experienced growth in the number of service users supported through 'Individual Work' and in 'School-Based Programmes':

**Individual Work:** Increased by 26% (17,400) from 67,000 to 84,500 between 2017-18 and 2018-19.



**School-based Programmes:** Increased by 22% (5,200) from 23,500 service users to 28,700 between 2017-18 and 2018-19.



Barnardo's experienced a decrease in numbers of service users recorded as accessing our **Children's Centres and Family Hubs**. In 2018-19, they supported 181,100 children, parents and carers. This compares to 210,500 children, parents and carers in 2017-18<sup>3</sup>.

In total, we provided support to over:



In addition, there are 14,700 Service Users whose parental status is unknown.

## Characteristics of those we supported in 2018-19

**73%** children

**19%** BAME<sup>4</sup>

**14%** disabled

**12%** looked after children

**6%** care leavers

<sup>2</sup> These figures may not sum to equal the 17-18 and 18-19 service user totals due to rounding

<sup>3</sup> See appendix for details

<sup>4</sup> This includes Black, Asian, Mixed and Other Minority Ethnic Backgrounds.

# 1 Stronger Families

## Early Support

In 2018-19, our Early Support services supported **95,200** people. This included our Children's Centres, which were accessed by **92,000** children, parents and carers. This compares to 143,500 who accessed our Children's Centres in 2017-18.

## Family Support

We provided Family Support services to **120,800** children, young people, parents and carers. This includes support for children with a parent in prison, children with caring responsibilities, children experiencing bereavement, and families with children on the edge of being taken into care. This number includes **89,100** who accessed our Family Hubs.<sup>5</sup>

In total, in 2018-19, our Children's Centres and Family Hubs supported more than **181,100** people; over **120,000** children and over **56,000** parents.

## Mental Health

We supported **40,100** children, young people, parents and carers through our Mental Health services. This includes **28,700** children supported through our school-based programmes, aimed at improving social and emotional learning. This compares to 23,500 in our school-based programmes in 2017-18.

# 2 Safer Childhoods

## Child Abuse and Exploitation

We supported **7,300** people through our Child Abuse and Exploitation services, including:

- **3,500** in our Child Sexual Exploitation (CSE) services
- **2,000** in our Missing services
- **800** in our Female Genital Mutilation (FGM) services
- **600** in our Trafficking services
- **400** in our Harmful Sexual Behaviour services.

## Looked After Children

- Our adoption services placed **125** children with adoptive families
- Our fostering services cared for **857** children.

# 3 Positive Futures

## Leaving Care/ Accommodation Support

We supported **5,000** people in our Leaving Care/ Accommodation Support services. This included:



At the end of 2018-19, we were running over 1,000 services and 705 shops in local communities, with 7,918 employees<sup>6</sup>, and 23,842 volunteers supporting our **vital work.**

<sup>5</sup> Family Hubs are similar to our Children's Centres but work across 0-19 age range

<sup>6</sup> Full time, part time, and 'as and when' staff

**Strategic Aim:**

# **Stronger Families**

**The number of children and young people with mental health and wellbeing issues is reported to be increasing, and many mental health services providing support are struggling with ever increasing referral numbers.**

Children and young people are often being directed towards a medical model, but these services are unable to cope with the demand leading to a 'bottleneck' at the point of access. We believe that shifting to a social model, with a focus on early intervention and prevention, can help to address the current challenges. However, we know that to have a real impact, we need to understand children's experiences across the 'ecological model', looking at how we can support children and young people within their families, schools, communities, as well as the digital world.

We are also working to adopt a trauma-informed lens, developing our awareness of the impact of exposure to traumatic experiences. We recognise the impact that trauma and adverse experiences (such as physical or sexual abuse, neglect, parental incarceration, parental mental illness, parental separation, domestic violence, and alcohol and drug abuse) can have on mental health and wellbeing across the life course. We have significant experience of working in a strengths-based way, and recognise that negative outcomes for children who experience trauma are not inevitable.

**Around**

**1 in eight**



**children and young people aged 5 to 19 have a mental health disorder; increasing as children get older.**

### **One in eighteen**

**2 to 4 year olds** have a mental health disorder<sup>7</sup>:

- Boys are more likely than girls to have a disorder at this age
- Behavioural disorders are most common.

### **One in ten**

**5 to 10 year olds** have a mental health disorder<sup>8</sup>:

- Boys are twice as likely as girls to have a disorder at this age
- Behavioural disorders are most common.

### **One in seven**

**11 to 16 year olds** have a mental health disorder<sup>9</sup>:

- Boys and girls are equally likely to have a disorder at this age
- Emotional disorders are most common.

### **One in six**

**17 to 19 year olds** have a mental health disorder<sup>10</sup>:

- Girls are more than twice as likely as boys to have a disorder at this age
- Emotional disorders, including anxiety and depression, are most common.

<sup>7</sup> NHS Digital (2018) Mental Health of Children and Young People in England, 2017 [Online] Available at <https://digital.nhs.uk/data-and-information/publications/statistical/mental-health-of-children-and-young-people-in-england/2017/2017>

<sup>8</sup> ibid

<sup>9</sup> ibid

<sup>10</sup> ibid

Half of mental health problems appear before the age of 14, with three-quarters of lifetime mental health conditions present by the age of 24.<sup>11</sup> However, it is estimated that around two-thirds (approx. 550,000) of children and young people in England, with a diagnosable mental health condition will not receive treatment by 2020-21.<sup>12</sup>

Some young people may be more likely than their peers to experience poor mental health, including:

- Children with experience of adverse childhood experiences<sup>13</sup>
- Children living in low income families<sup>14</sup>
- Those living with a parent with a mental illness<sup>15</sup>
- Children with a limiting long-term illness, a physical or developmental problem, or a special educational need<sup>16</sup>
- Children in and leaving care<sup>17</sup>
- Young carers<sup>18</sup>
- Children in the youth justice system<sup>19</sup>
- Young people who identify as lesbian, gay, bisexual or trans (LGBT).<sup>20</sup>

There are also children, young people, and families whose needs are not currently well understood. Research commissioned by Barnardo's explored the mental health and wellbeing needs of 'undocumented children' living in London; children who have entered the country illegally, have stayed beyond their permitted period, or are children of irregular migrants (a third-country national who does not, or no longer fulfils, conditions of entry, stay or residence in the UK).<sup>21</sup>



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- 11 Kessler, R. C., Berglund, P., Demler, O., Jin, R., Merikangas, K. R., & Walters, E. E. (2005) Lifetime prevalence and age-of-onset distributions of DSM-IV disorders in the National Comorbidity Survey Replication. *Archives of general psychiatry*, 62(6), 593-602.
- 12 Brennan, S. (2018) YoungMinds response to the consultation on Transforming Children and Young People's Mental Health Provision: A Green Paper [Letter written March 2, 2018 to Rt Hon Jeremy Hunt MP and Rt Hon Damian Hinds MP]. Retrieved from <https://youngminds.org.uk/media/2203/youngminds-consultation-response-to-childrens-mental-health-green-paper.pdf>
- 13 Hughes, K., Ford, K., Davies, A. R., Homolova, L., & Bellis, M. A. (2018) Sources of resilience and their moderating relationships with harms from adverse childhood experiences. Cardiff: Public Health Wales [Online] Available at: [http://www.wales.nhs.uk/sitesplus/documents/888/ACE%20%26%20Resilience%20Report%20%28Eng\\_final%29.pdf](http://www.wales.nhs.uk/sitesplus/documents/888/ACE%20%26%20Resilience%20Report%20%28Eng_final%29.pdf)
- 14 NHS Digital (2018) op cit
- 15 ibid
- 16 ibid
- 17 House of Commons Education Committee (2016) Mental health and wellbeing of looked after children. Fourth report of session 2015-16 [Online] Available at <https://publications.parliament.uk/pa/cm201516/cmselect/cmeduc/481/481.pdf>
- 18 Scottish Government (2017) Young Carers: review of research and data [Online] Available at <https://www.gov.scot/publications/young-carers-review-research-data/pages/4/>
- 19 Centre for Mental Health (2019, June 26) Youth justice [Web page] Available at <https://www.centreformentalhealth.org.uk/youth-justice>
- 20 NHS Digital (2018) op cit
- 21 European Commission (2019, July 12) Irregular migrant [Web page] Available at [https://ec.europa.eu/home-affairs/what-we-do/networks/european\\_migration\\_network/glossary\\_search/irregular-migrant\\_en](https://ec.europa.eu/home-affairs/what-we-do/networks/european_migration_network/glossary_search/irregular-migrant_en)

## Undocumented Children in London and their Emotional Health and Wellbeing

**Research commissioned by Barnardo's<sup>22</sup> highlighted that undocumented children face a range of circumstances that impact on their emotional health and wellbeing.**

Children and their families are often living under the shadow of their immigration status, with a heightened risk of poverty, ill health, and exploitation, and with limited access to services. Many face an uncertain future, unable to make plans, and prevented from achieving their potential.

There are also a range of issues affecting the emotional wellbeing of undocumented children, young people, and families, including past experiences of trauma, separation and loss, and the impact of current issues, including legal status, accommodation and subsistence, health, nutrition and access to food, education, and safety. Young people and parents described how living with uncertainty made it difficult to engage with emotional support, and make plans for their future. Some children and young people also faced exclusion and isolation among their peers, and legal and practical barriers preventing them from accessing support.

Use of social media and digital technology by children and young people has increased over the past decade. While there is evidence of both positive and negative impacts of social media, both parents and young people identify a need for support.

Many face an uncertain future, unable to make plans and prevented from reaching their potential.

<sup>22</sup> Thomas, S., Jolly, A. and Goodson, L. (2018) Undocumented children in London and their emotional health and wellbeing [Manuscript unpublished].

## Digital Technology

**Barnardo's 'Connections: Parenting Infants in a Digital World'<sup>23</sup> research was carried out with parents of infants engaging with Barnardo's services in Northern Ireland, in order to gain an understanding of digital use at home, and explore what influence this may have on interactions between parents and infants.**

The research found that on average households had access to 8.5 digital devices, with 98 per cent having access to the internet.

Two-thirds (61 per cent) of parents felt they used their phone too much at home, and those with high levels of use, were more likely to permit their children to also use devices for longer periods of time. A third (33 per cent) of parents of 0 to 3 year olds felt that their use of digital devices interfered with activities with their child.

The report also found that 16 per cent of 0 to 3 year olds used digital devices, and 14 per cent accessed online games, alone. Some parents identified struggles with enforcing time limits: *"Sometimes it turns into a fight to remove the device when time is up or it's meal time"*. Others were concerned that the time spent on digital technology was causing their child to become distracted from their environmental surroundings.

## Social Media, Young People and Mental Health

**Barnardo's 'Left to their own Devices: Social Media, Young People and Mental Health'<sup>24</sup> report gained insight from 80 practitioners from across more than 30 of our services, in relation to both positive and negative experiences of social media.**

The work was undertaken in response to practitioners increasingly identifying that therapy time is being used to support young people with social media, separate to the initial reason for referral.

Findings showed that support was needed in relation to cyberbullying, exposure to inappropriate content, and security/safety, with experiences often setting a negative tone, causing low-mood and *"very depressive feelings of self-hatred and self-loathing"*, sometimes culminating in online conversations with peers relating to self-harm and suicide.

23 Kernaghan, D. (2018) Connections: Parenting Infants in a digital world [Online] Available at <https://www.barnardos.org.uk/connections-parenting-infants-in-a-digital-world.pdf>

24 Papamichail, M and Sharma, N. (2019) Left to their own devices: Young people, social media and mental health [Online] Available at [https://www.barnardos.org.uk/sites/default/files/uploads/B51140%2020886\\_Social%20media\\_Report\\_Final\\_Lo%20Res.pdf](https://www.barnardos.org.uk/sites/default/files/uploads/B51140%2020886_Social%20media_Report_Final_Lo%20Res.pdf)

## Our objectives for Mental Health and Wellbeing

We want our work to emphasise hope, resilience and recovery.

Our Mental Health and Wellbeing Core Priority Programme aims to:

- Address the underlying determinants of poor mental health
- Build resilience within children and young people
- Provide specialist support
- Support people around the child including families, teachers and frontline practitioners
- Be agents for systems change.

We are also working towards becoming more trauma, adversity, culturally informed and responsive. We will infuse an understanding of developmental and relational trauma throughout all aspects of our work across Barnardo's. We want to show the commitment and leadership required for the necessary cultural and practice changes to take place throughout our systems and processes. We want our work to emphasise hope, resilience and recovery. This approach will enable us to offer safe services that both support recovery and avoid re-traumatising children and young people.

## Our approaches

Our approach is based on understanding the importance of relationships, connections, and community support.

Mental health and wellbeing runs through everything we do. Our services support children affected by almost all the vulnerabilities identified as risk factors for poor mental health and wellbeing.

We support children and families across an ecological model. This means our services support mental health and wellbeing within each of the environments (individual, peers, family, schools, community and digital) that affect how a child grows and develops. Our approach is based on understanding the importance of relationships, connections, and community support.

Our work also focuses on the pathways and structures that interact across the ecological environment, in order to develop a whole system approach with shared responsibility for enhancing mental health and wellbeing across wider society (for example, local authorities, NHS and health services, crime and safety, and education services). By developing strong networks and interactions across the system, support for children and young people is strengthened and reinforced.

Many of our services are already delivering trauma-informed practice, and we want to build on this. It is crucial for this to be much wider than frontline practitioners and training; our ambition to become more adversity, trauma, culturally informed and responsive needs to be sustainable right across the organisation.

We look to embrace and model trauma-informed care based on the following values<sup>25</sup>:



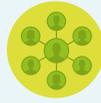
**Multi-layered trust and safety**



**Relationship-focussed**



**Choice, voice and agency**



**Integration and connection**



**Communication, collaboration and transparency**



**Strengths and hope-based**



**Cultural humility and responsiveness**



**A culture of curiosity, reflectiveness, empathy, compassion and understanding**

In 2018-19, Dr Karen Treisman provided trauma informed practice training to 410 leaders across the Barnardo's workforce. A further 150 leaders will be trained in October 2019.

We have developed a trauma-informed practice learning portal, in partnership with Psychotherapy Excellence, for all paid colleagues to access. This will ensure staff have access to information about the impacts of trauma, helping them to provide effective support for children and families.

We are also delivering training for our practitioners and managers to ensure they are looking after their own mental health and wellbeing and are mindful of the context of their work and potential impacts such as vicarious trauma.

## Co-design with children, young people, families and commissioners

### Developing mental health and wellbeing strategic partnerships

We are working with three local authorities and Health and Social Care Trust partners in Renfrewshire (Scotland), North Tyneside (England), and Northern Ireland to strategically transform mental health and wellbeing for children and young people over the next eight years.

The aim of these strategic partnerships is to co-create transformational changes to mental health and wellbeing using an asset based 'service design approach'. The focus is on prevention and early intervention.

Over the last year, we have been undertaking research to inform service design within these partnerships.

We are also delivering training for our practitioners and managers to ensure they are looking after their own mental health and wellbeing...

<sup>25</sup> Treisman, K (2018). *Becoming a more adversity, culturally & trauma-informed, infused, & responsive organisation*. Winston Churchill Report.

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## Our partnership is supporting the development of a strong ethos and commitment to genuine systems transformation.

Co-production and co-design with children, young people, and families is central to this approach.

In Renfrewshire, young people attended a series of workshops to explore what works well in relation to support received directly from mental health services. Factors they identified as important included:

- Having the same trusted person over a long period
- Regular and consistent appointments e.g. same day and time
- Services that enable continued access to support after discharge.

They also identified important areas of focus, including:

- Locally based activities and services
- Safe spaces that are welcoming and cosy, that have established boundaries, and clear privacy rules
- Advice and support with money, benefits and housing
- Support with healthy and safe use of social media
- Support with travel, and accessing services and activities outside of their local area.

Following further workshops with key stakeholders, including children, young people and families, Renfrewshire strategic partnership will be exploring the re-design of pre-CAMHS support for 5 to 16 year olds, developing a new model of service delivery focused on prevention, intervention, and provision of information and/or intervention to children and young people. The Scottish Government has formed part of the key stakeholder group in Renfrewshire due to a keen interest in the development of the strategic partnership.

The Northern Ireland strategic partnership is focusing on infant mental health (aged 0 to 2 years). *The Attachment Bonding Communication Parent Infant Partnership (ABCPiP)* brings together staff from across the community, statutory, and voluntary sector, recognising a whole systems response is required to protect and promote healthy early relationships.

To date the strategic partnership has:

- identified key stakeholders and their roles in supporting the ABCPiP partnership
- delivered training (Five to Thrive, Baby massage/Yoga and Community Resilience Model) to build capacity in the local workforce
- identified how implementation drivers can support changes to be sustained longer-term.

In North Tyneside, the strategic partnership is building on foundations already established by North Tyneside Council, Education, and NHS partners who started working together strategically as part of the mental health and wellbeing strand of their Children and Young People Transformation Plan. This is based on building a resilience/early intervention and prevention model.

Our partnership is supporting the development of a strong ethos and commitment to genuine systems transformation. To date, we have:

- Funded a school-based survey on mental health and emotional wellbeing, to explore need in-depth
- Undertaken a series of stakeholder workshops, involving young people, parents, strategic leads, practitioners, and elected members, including wide representation across both statutory and voluntary sectors.

We are now exploring insights gathered from the workshops and school survey to identify key priority areas for exploration.

All three partnerships will be evaluated by the Mental Health Foundation and University of Strathclyde, to help us understand the value of this partnership approach.

## Outcomes

We have an impact through our partnership work, specialist services, targeted support, and universal programmes for children, young people, and families.

### Partnership work

#### Big Manchester

Big Manchester is a partnership of five voluntary sector agencies<sup>26</sup> in Manchester, offering unique, holistic, and personalised, strengths-based support to vulnerable families with children of primary school age who are affected by complex issues including domestic abuse, substance abuse and/or parental mental ill health.

The service model aims to transform families' lives in the long-term by engaging with parents and children, assessing their needs and risks, and supporting them to make long-lasting change. The emphasis of the work is to support parents in their understanding of how their children are being impacted by their experiences, and what needs to change. Parents and their keyworker work together to establish a family care plan, tailored to assessed need and risk factors. Big Manchester works intensively with families over a 4-6 month period, followed by on-going opportunities to access regular groups, family activities, and volunteering opportunities.

Key features of Big Manchester include:

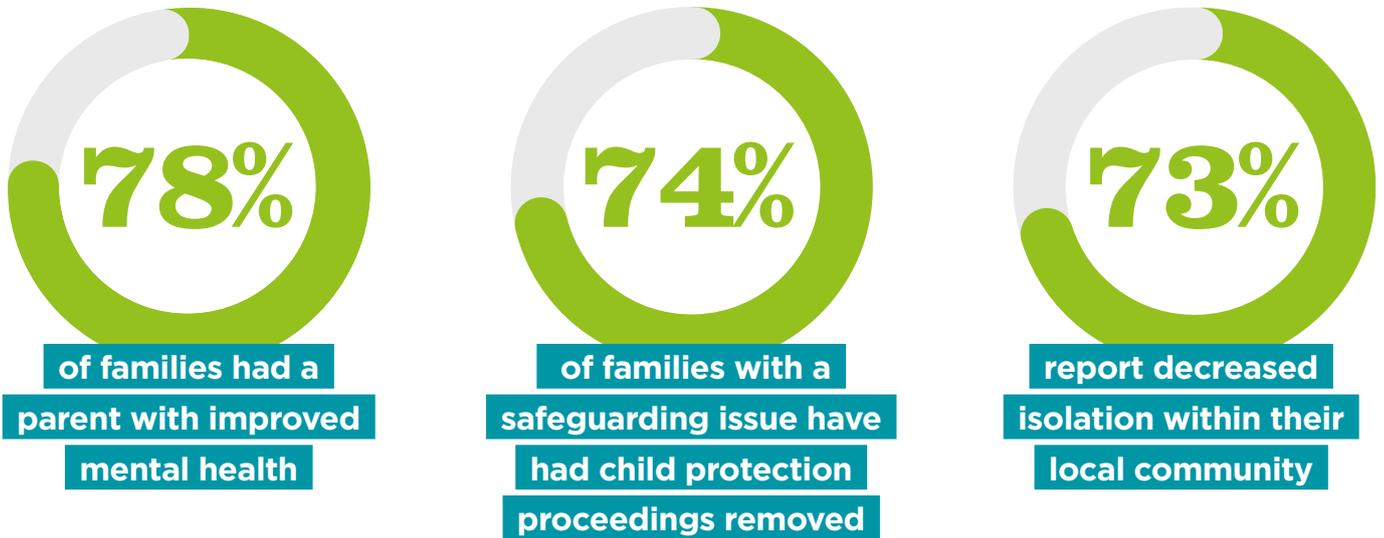
- Holistic family focus
- Therapeutic focus on children and parents in the context of the family
- Keyworker role – key skills to work with adverse childhood experiences and other factors that affect family functioning.

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**Big Manchester works intensively with families over a 4-6 month period, followed by on-going opportunities to access regular groups, family activities, and volunteering opportunities.**

<sup>26</sup> Barnardo's, Manchester Mind, The Pankhurst Centre (Incorporating Manchester Women's Aid), Change Grow Live (Eclipse), and Home-Start Manchester.

Data collected by the partnership shows key improvements in outcomes for children and young people across a range of domains, including safeguarding, mental health, domestic violence, school attendance, and resilience. The 2018 impact report for Big Manchester<sup>27</sup> showed that, using the sample of 40 families:



The report showed that this has resulted in happier families with improved relationships and parenting, and better social and living circumstances.

The report also showed that the Big Manchester partnership led to system-wide impacts, including:

**Reduction in demand on children's services,**

courts, drug and alcohol services, domestic violence services, and community support services

**Improvement in school-family relationships,**

including improved attendance and attainment

**Improvement in parental capacity to volunteer,**

attend educational courses, and/or take up employment

“A strength of Big Manchester is the therapeutic model for children. On the back of austerity, interventions that focus on children but deliver whole family support are becoming rarer and rarer. The need for that kind of model is higher than ever.” (Local Authority)

“My kids had seen violence in my ex-partner's new relationships and were under the highest social services order. I'd done everything I could – social services, family one-to-ones, courses and courses and courses – and now have custody. Big Manchester have helped my kids to deal with what they've seen so that they've been helped with the trauma. That was what I wanted so that later in life they will be less affected.” (Parent)

“We see a real difference in children, especially their confidence and self-esteem.”

(Primary School Teacher)

“I developed postnatal psychosis after the birth of my second child. I had severe anxiety, gained a lot of weight and lost all my hair from the stress. I was a very sociable and out-going person, with a good job, very energetic and on the go. Big Manchester have been a real god send; for the longest time I felt completely overwhelmed like I was lost at sea struggling against the tides and drowning. They have been a much needed lifeline, their support has helped pull me to a point where I've managed to take back some control, helping me find a realistic starting point and gain a foothold on the road to my recovery.”

(Parent)

Big Manchester will continue to build on this proven expertise in addressing adverse childhood experiences and supporting families, and widen its sphere of influence. The report has provided learning which we will use to develop internal systems and sustainability.

### **Barnardo's ACE Coordinator Service, Early Action Together (EAT) Programme**

The EAT Programme is a partnership between the Welsh police forces, Public Health Wales, the Youth Justice Board, Barnardo's Cymru, and the NSPCC. Launched in 2018-19, with Transforming Policing and Criminal Justice in Wales, the programme aims to take an ACE (Adverse Childhood Experiences) informed and public health approach, in order to enable early intervention and root cause prevention. Barnardo's role is to deliver the ACE Coordinator Service, with staff embedded in all police force areas. The ACE Coordinators deliver the 'Adverse Childhood Experience and Trauma Informed Multi-agency Early Action Together' (ACE TIME) training, to frontline police officers to facilitate a culture shift in responses to vulnerability. The ACE Coordinators follow up the training with station presence, workshops, and consultation, to embed the learning. Through their discussions with officers, the ACE Coordinators provide support on implementing the model and signposting advice.

The feedback has been extremely positive, and indicates that the key messages of the ACE TIME training are being delivered, and increased knowledge is influencing practice.

Across the whole programme, joint responses to vulnerability between police and partners are being tested, with improved understanding of safeguarding thresholds and simplified pathways into early intervention hubs which are already showing signs of early success. These 'Early Help' systems are designed to ensure that no matter what the need of a vulnerable person, if they come into contact with the police, they receive the right support at the right time.

The service has found that increasing awareness and understanding of trauma, early intervention and prevention models, is already having a positive impact with officers reporting changes in practice, Children's Services feeding back on improved Police Public Protection Notices, and more appropriate referrals to preventative services. Barnardo's is also supporting the implementation of these approaches in prisons in Wales.

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**The feedback has been extremely positive, and indicates that the key messages of the ACE TIME training are being delivered, and increased knowledge is influencing practice.**

# Case Study: Ethan



“

Barnardo's gentle persistence and the range of activities Ethan was introduced to made all the difference.”

### Specialist Support

**Ethan had just finished the first year of his A-levels and was enjoying a family holiday in Menorca when, having wandered off on his own, he began hallucinating. He became obsessed with the colours red and blue and couldn't recognise members of his family. He had no idea what was reality and what wasn't.**

Within a few hours he had gone from a fun-loving teenager with a passion for sport to a very scared young man. *“It was petrifying,”* said Ethan. *“I just had to rely on the people around me to get me to a safe place. Even on the plane I didn't know what was going on. When we landed my parents took me straight to hospital where they diagnosed my psychosis and I spent some time in hospital where I was treated well and made friends.”*

Ethan was discharged into the care of a community psychiatric nurse and, having turned 18, was transferred into adult services. But he became more aggressive and short tempered following changes to his drug treatment. He was also struggling with his IT course which he wasn't enjoying and then he went on to have another episode.

Headroom provided weekly cognitive behaviour therapy, and although Ethan found talking about feelings difficult at first he started recognising the benefits of the coping strategies he was introduced to.

Headroom is an innovative partnership between Barnardo's Cymru and Cardiff and Vale University Health Board for young people in Cardiff and the Vale of Glamorgan who have experienced their first episode of psychosis.

The service provides specialist assessment including high-intensity interventions such as cognitive behavioural therapy, family intervention, low-intensity interventions, and goals orientated support through Barnardo's project workers. Community support workers work alongside mental health professionals helping young people rebuild their confidence and access social activities, education and employment.

Barnardo's also provided a support worker to help Ethan rebuild his confidence and get him back into the community. Ethan's dad Neil said: *“She helped him to get out of the house again, walk the dog, catch a bus, go to a café to improve his social skills and she got him onto courses run by the Prince's Trust which were really good for his confidence.”* Ethan said: *“They gave me the confidence to know I could manage”.*

Ethan's dad Neil said: *“Barnardo's gentle persistence and the range of activities Ethan was introduced to made all the difference. It is wonderful to see the difference in him.”*

## Targeted Support

### Plymouth Children's Centre

Plymouth Children's Centre has supported more than 5,000 children and their families during 2018-19. Of these, 957 received enhanced services including one-to-one support, targeted groups, and Early Help reviews. Typically, these families are experiencing poor mental health, domestic abuse, social isolation, and unemployment. We provide tailored and long-term support, and often signpost families to additional support options, including domestic abuse services, social care, and mental health services.

**Figure 1.0** shows Family Star Plus data for Plymouth Children's Centre.<sup>28</sup>

Family Star Plus is used to help identify aspects where families can be supported to achieve positive change. Figure 1.0 shows change in Star readings from the outset to end of support from the Children's Centre.

### Brent Children's Centres

In 2018-19, just under 12,000 children and 16,000 parents attended our Children's Centres in Brent. These provide support to children, young people, and families in relation to mental health and wellbeing, parenting and family support, family and community resilience, and child development and learning.

Every year, parental feedback is collated. The 2018-19 report<sup>29</sup> was undertaken by George Partnership Ltd, setting out the impacts, satisfaction, and experience of 1,791 parents, carers, and childminders who provided feedback.

Overall, 95 per cent of respondents said they were satisfied with the Children's Centres.

The two main motivations for parents/carers accessing Brent Children's Centres has been consistent for the past eight years:

- To give my child/children opportunities to play and socialise with other child/children (77 per cent)
- To give my child/children opportunities to improve their development (61 per cent).

27 per cent of parents/carers also reported 'can get information, advice and services for my child/children and family in one place' as a main motivation for accessing Children's Centres.

**Plymouth Children's Centre has supported more than**

**5,000 children**

**and their families**

**during 2018-19**

**In 2018-19, just under**

**12,000 children**

**and 16,000**

**parents**

**attended our Children's Centres in Brent**

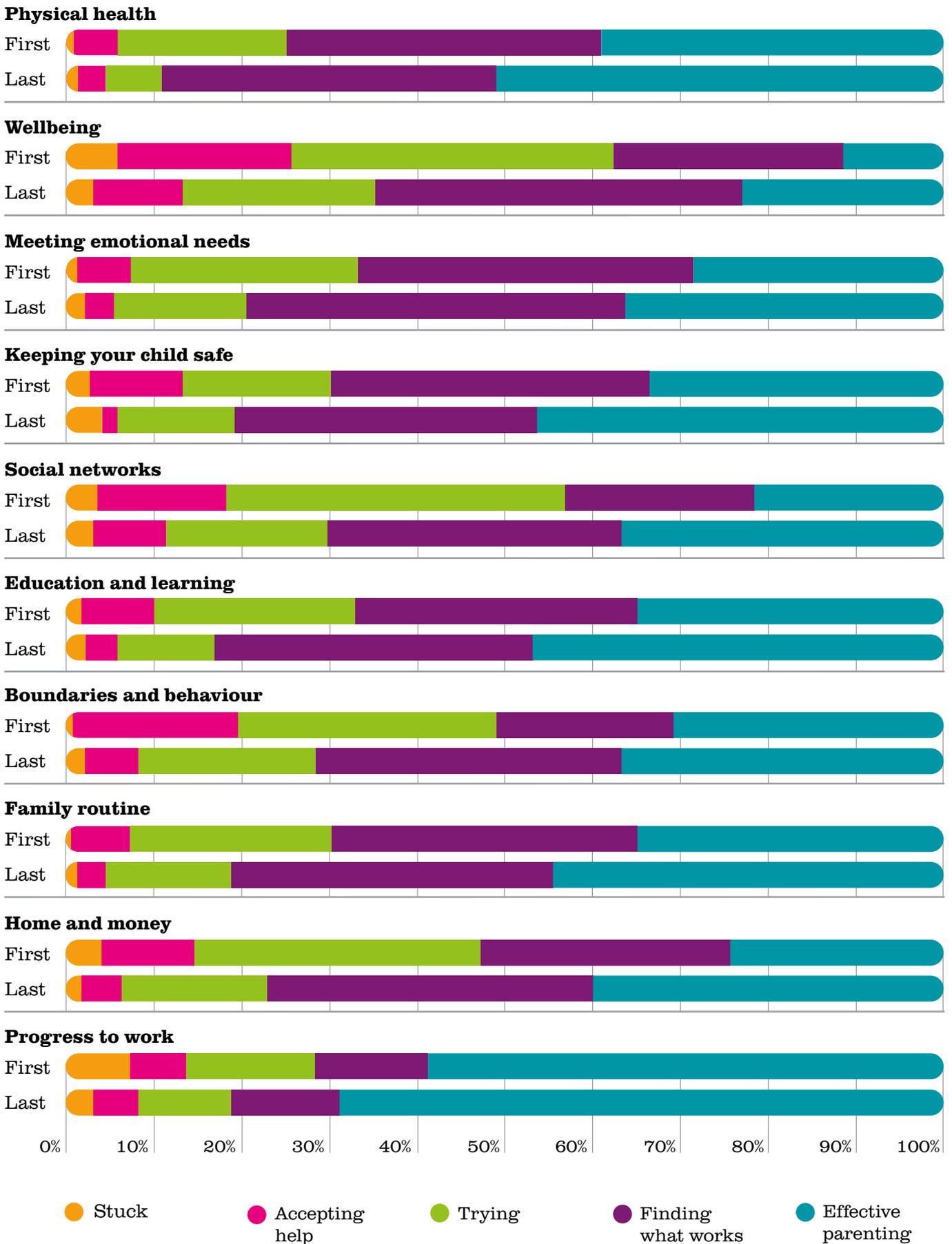


**77 per cent accessed Brent Children's Centres to give their child/children opportunities to play and socialise with other children**

<sup>28</sup> Outcomes Star is a tool for supporting and measuring change when working with people. Family Star Plus is a version that is suited to working with families, see [https://www.staronline.org.uk/star\\_mock\\_homepage.asp?section=832](https://www.staronline.org.uk/star_mock_homepage.asp?section=832)

<sup>29</sup> George Partnership Ltd (2019) *Barnardo's Annual Report 2018 Parent satisfaction & impact of children's centres in the London borough of Brent*

**Figure 1.0:** Outcomes for families supported by Plymouth Children’s Centre, 2018-19



## Brent Children's Centres

### In relation to health and wellbeing:



**99 per cent** reported positive impacts for themselves and their children after taking up **health and wellbeing** support at the centres



**52 per cent of parents/carers**, and **48 per cent of children** and young people, reported improvements in their **emotional health**



**43 per cent of children** and young people, and **29 per cent of parents/carers**, reported **healthier eating and drinking**



**36 per cent of parents/carers** are **exercising more**, along with **23 per cent of children** and young people.

### In relation to positive parenting:



**77 per cent** of parents/carers have taken up support that **builds parenting skills and confidence**



**96 per cent** are accessing support that helps identify **positive impacts** for themselves and for their children.

Key benefits reported as a result of accessing support via Brent Children's Centres included:

**"I can better manage my child's behaviour"** (42 per cent)

**"Feel safe at the children's centre"** (41 per cent)

**"I have learned new skills to support my child's safety"** (40 per cent)

### In relation to child and adult learning:

**89 per cent**

of parents/carers reported that their family were accessing child and/or adult learning opportunities.

Of these, **100 per cent** noted positive impacts for themselves and 99 per cent noted positive impacts for their children.

### In relation to family and community resilience:

**77 per cent**

of parents/carers reported taking up support that helps build family and community resilience, with households where no adult is in paid work.

Parents commented:

**"(The) children's centre is the best place for my daughter to learn and develop new skills. They supported me in my English language and managing my daughter's behaviour."**

**"It's a good place to go for babies to play, learn and share different experiences as parents talk."**

Main impacts reported included:

**"Feeling part of the children's centre community"** (77 per cent)

**"Developing more positive relationships"** (49 per cent)

**In 2018-19  
Barnardo's PATHS®  
co-ordinators  
supported**

**102 schools and**

**14 pre-schools**

**in delivering the  
programme**

## Universal Programmes

### PATHS® (Promoting Alternative Thinking Strategies)

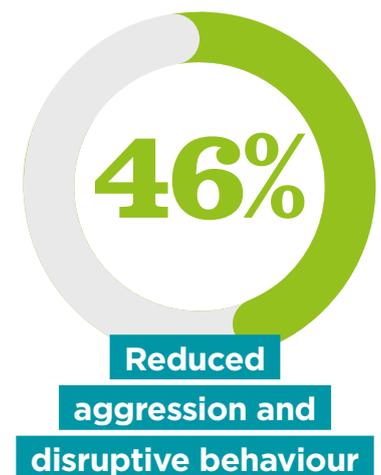
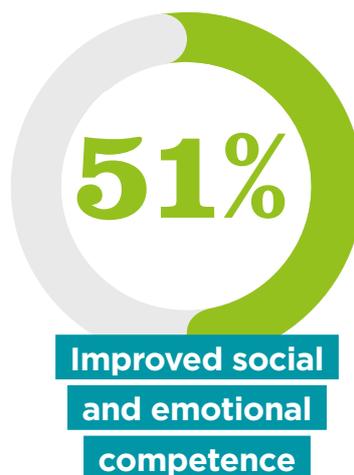
*The PATHS® Programme for Schools* is a whole school curriculum designed to support the mental health and wellbeing of children in primary school. The programme aims to improve emotional understanding, self-control, social problem-solving, peer relations, and self-esteem. During regular taught lessons, pupils engage in a range of activities aimed at improving their social and emotional competence and reducing aggressive behaviours. Teachers also receive PATHS® training and coaching support to help them embed mental health and wellbeing across the school.

In 2018-19 Barnardo's PATHS® co-ordinators supported 102 schools and 14 pre-schools in delivering the programme. In the 2018-19 academic year, Barnardo's reached over 25,000 pupils, with training also delivered to:

- 1,199 teachers
- 539 non-teaching staff
- 659 parents.

43 of these settings (29 schools and 14 pre-schools) received funding as part of Barnardo's Mental Health and Wellbeing Core Priority Programme.

In 2018, the PATHS® programme completed a four year roll out of the programme in 40 schools across Northern Ireland. Over the four years of implementation support, the programme had the following impact:





Also in 2018-19, we have begun to pilot the PATHS® coaching model in pre-school settings in Bridgend, Wales, with the aim of rolling this out more widely if successful. This has been funded by our Mental Health and Wellbeing Core Priority Programme. Feedback from the pre-schools include:

“The introduction of PATHS® is already proving successful. Most of our children are non-speaking or have very limited vocabulary and therefore express their feelings physically. PATHS® is nurturing our children in a direction that they are already beginning to understand that emotions change, what emotions are and how different some behaviours make us feel.”

“We have been taking part in the PATHS® self-control unit for the past month and are starting to see a difference in the children’s behaviour. At PATHS® circle time several children are able to discuss their feelings and emotions and are able to recognise pictures of people displaying various emotions.”

## Influencing wider policy and practice

### Digital Technology, Social Media and Mental Health

In response to a variety of parliamentary inquiries and government consultations across the UK in relation to the impact of social media, digital technology, and the mental health and wellbeing of children and young people, we undertook research to explore these topics more in-depth in order to understand the experiences of practitioners, children and families.

The findings from our research '*Connections: Parenting Infants in a Digital World*'<sup>30</sup> are being used to expand our knowledge about parenting in the digital world and inform service delivery and policy development; to contribute to the conversations about parenting today. The report makes recommendations across evidence, policy, workforce and service development, within the context of the Infant Mental Health Framework for Northern Ireland, as well as awareness-raising initiatives for parents and providers. Engagement was undertaken with all main political parties in Northern Ireland on key issues arising from the report, as well as other key stakeholders, including the Department of Education, the Education Authority and Libraries Northern Ireland, the Department of Health, Public Health Agency and the Chief Medical Officer, with a view to ensuring this discussion continues so that policymakers and service providers deliver consistent messaging to support parents, and so that parents can make decisions about digital use at home based on the best available evidence.

Our 'Left to their own Devices: Social Media, Young People and Mental Health' report made a series of recommendations to government and policymakers in relation to increasing the safety and security of children and young people accessing social media, and provided guidance on safe and healthy use of social media. The report also called for more research to improve knowledge and understanding of the impact of social media on mental health and wellbeing. The report was presented at Barnardo's annual lecture, by the Rt Hon Matt Hancock, Secretary of State for Health and Social Care.

### Parliamentary Inquiries, Reviews and Government Consultations

In England, we submitted evidence to support a number of parliamentary inquiries, including:

- **Public Accounts Committee - Transforming children's services**  
We highlighted that government should use the Spending

The report also called for more research to improve knowledge and understanding of the impact of social media on mental health and wellbeing.

Review to address the funding gap in children's services, with a particular focus on early intervention and prevention. We also highlighted that local authorities should be encouraged and incentivised to develop place-based multi-agency approaches to commissioning, with longer term cycles, shared budgets, and targets shared by multiple partners.

- **The All-party parliamentary group (APPG) on the impact of social media on young people's mental health – Inquiry into managing the impact of social media on young people's mental health and wellbeing** We emphasised both the positive and negative impacts of social media on the mental health of children and young people. Our calls included: the introduction of a statutory code of practice for all social media sites and an independent watchdog to hold them account; better training for all professionals working with children (ensuring that the integrated nature of the offline/online world is recognised); and, urging the government to carry out further research into education for young people in relation to age appropriate digital resilience.
- **The Housing, Communities and Local Government Inquiry into the funding and provision of local authorities' children's services** Our key recommendations included: that government should develop a long-term cross-departmental vision for children and young people, focused on prevention and early intervention; that the long-delayed consultation on Children's Centres should be reinstated, but with a broader remit to consider all 0-19/25 universal and targeted prevention and early intervention delivery models, including Family Hubs.
- **APPG on Financial Education for Young People Inquiry – the importance of financial education for children in care** Our recommendations included ensuring that Personal Advisers have smaller caseloads to give them more time to focus on the necessary preparations for independent living.

Javed Khan, CEO, also presented oral evidence to the Health and Social Care committee's inquiry into the First 1,000 Days of Life. The Health and Social Care Select Committee published their report<sup>31</sup> from the inquiry on the first 1,000 days – we called on government to set out a long-term strategy, with cross party agreement, setting out a strong commitment to improving early intervention. We made clear that Ministers should use the opportunity of the spending review expected in 2019/2020 to help local areas invest in high quality, multi-agency services.

In Wales, we have submitted evidence to National Assembly for Wales inquiries, reviews, and consultations, including:

- Welsh Government consultation on the Loneliness and Isolation Strategy
- Written and oral evidence to the Health, Social Care and Sport Committee on the impact, on carers, of the Social Services and Wellbeing (Wales) Act 2014.

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We called on government to set out a long-term strategy, with cross party agreement, setting out a strong commitment to improving early intervention.

31 Health and Social Care Committee (2019) First 1,000 days of life. [Online] Available at <https://publications.parliament.uk/pa/cm201719/cmselect/cmhealth/1496/1496.pdf>

One of our representatives put her first speech on mental health and emotional wellbeing on Twitter, where it received a swathe of positive responses...

In Scotland, we gave evidence to the Health and Sport Committee's session on the Year of the Young People, with regards to children and young people's mental health.

### Wider Influencing

We influenced the Scottish Government to:

- include a key measure on health and wellbeing in their framework to track the attainment gap
- allocate resources to fund the rollout of the Scottish Trauma Framework.

### Rejected Referrals to CAMHS – Scotland

Our 'Audit of rejected referrals to Child and Adolescent Mental Health Services in Scotland: Experiences of Barnardo's Scotland staff working in children's services'<sup>32</sup>, report called for clearly understood and consistent referral criteria for CAMHS; clarification of the role, scope and remit of specialist CAMHS; and, development of an alternative service to CAMHS for children experiencing distress. This report comes on the back of our successful call to the Scottish Government to review rejected referrals to CAMHS – the report has been influential in continuing to shape the agenda in Scotland around children and young people's mental health – particularly the work of the Children and Young People's Mental Health Task Force.

### Welsh Youth Parliament

2018 saw the establishment of the Welsh Youth Parliament (WYP). Barnardo's Cymru was successful in our application to become a Partner Organisation, responsible for the election and support of two members of the WYP. An internal election was organised and candidates put themselves forward, recording their campaign speeches for their electorate. Barnardo's Cymru service users also put themselves forward for their local constituency elections in some areas. Two candidates were elected, and we were invited to put forward a third representative in order to ensure all WYP seats were filled. One of our representatives put her first speech on mental health and emotional wellbeing on Twitter, where it received a swathe of positive responses, including from the First Minister, the Deputy Minister for Health and Social Care, and Helen Mary Jones Plaid Cymru Regional Member for Wales and the South West.

The WYP sat for the first time at the end of February 2019, and decided on work priorities for the two-year term:

**Mental health and emotional wellbeing**

**Littering and plastic waste**

**Homelessness**

32 Wray, N. (2018) Audit of rejected referrals to Child and Adolescent Mental Health Services in Scotland: Experiences of Barnardo's Scotland staff working in children's services [Online] Available at <https://www.barnardos.org.uk/report-rejected-referrals-camhs-services-scotland.pdf>

## Wider learning about achieving Stronger Families

**Our wider work aiming to achieve stronger families includes our services in education, and support for young carers.**

### High Close School

High Close is a co-educational, non-maintained, day and residential special school in Wokingham, Berkshire, administered by Barnardo's. Our pupils, aged between 7 and 18, come from a wide geographical area covering over 20 local authorities. The school has two SEN designations from the Department for Education, one for social, emotional and mental health (SEMH) needs, and the other, speech, language and communication needs. All our young people have a special educational needs statement, or an education, health and care plan for complex needs which may relate to learning, behaviour, conforming to expectations or a range of other conditions like ADHD, Attachment disorder, Autism, Specific Learning Difficulties, Tourette's syndrome, Speech and Language difficulties or a combination of one or more of these.

Recognising the needs of the young people at High Close, two staff trained during the course of 2017-18 to become Attachment Aware and Trauma Informed specialists and they now lead the staff on embedding trauma responsive working across campus. Four years ago, the school took the step to move to Therapeutic Crisis Intervention (TCI) as the 'behaviour support' system for the school. The focus of TCI is de-escalation and giving young people tools and strategies which allow them to develop emotional self-regulation skills. The positive impact on young people is significant and has meant that we have been able to substantially reduce Restrictive Physical Interventions.

The performance of the Year 11 cohort 2018-19 was the best ever. Once all qualifications taken were considered, they performed in line with national averages. For pupils with complex SEMH needs from a special school, this is a significant achievement. All the young people from Year 11 also secured the qualifications they needed to move on to their chosen further education courses.

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All the young people from Year 11 also secured the qualifications they needed to move on to their chosen further education courses.

**In 2018-19,  
Barnardo's Young  
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and parents**

## Young Carers

In 2018-19, Barnardo's Young Carer services provided support to almost 3,300 children and parents. Working with both the child and family, our services aim to support young people and reduce the impact of their caring role.

Referrals come from schools, parents, social care, health and other agencies, or directly from young people themselves. Services ensure all young carers are offered an assessment of their needs, which informs the development of individual support plans. Services adopt a whole family approach, referring to other agencies as necessary, to ensure the best outcome.

Our Action with Young Carers Wirral service supports young people up to age 19. We provide an assessment which helps young people and their families to think about things that would make a difference to their daily lives. Feedback from young carers shows that caring often affects:

### **Physical health, mental health and emotional wellbeing, making young carers feel:**

- Anxious
- Worried
- Tired because they are not getting enough sleep
- Worn out with aches and pains.

### **School and college work through:**

- Feeling stressed
- Not having enough time to do homework
- Being bullied
- Not being able to concentrate due to worry or being tired
- Not being able to participate in after school clubs and activities
- Not being able to go on school trips.

### **Social life, as:**

- Having time with friends is difficult
- There is not enough time to themselves to do things they enjoy.

### **Feelings of loneliness:**

- Thinking they are the only one in this situation and no one understands
- Not knowing who to trust or turn to.

The following case study demonstrates how the Action with Young Carers Wirral team provided support to one family.



**Case Study:**  
**Keira  
and  
Katie**

**Keira (11) and her sister Katie (6) recently returned to live with their mum following a period of separation due to mum's history of poor mental health as a result of her medication, which caused periods of depression, anxiety and panic attacks, and strained relationships with the children.**

“

Mum's manic depression can last from a few hours to a few months and she never knows when or is unaware of any triggers. She gets annoyed easily and shouts at us, or she is very sad and cries a lot. We have to cope during this, looking after mum and looking after ourselves. I worry about mum so I don't want to go out with friends”.

Keira and Katie helped care for their mum but they found it difficult to manage both school and caring, so frequently missed school as a result. They were both often in trouble for poor attendance and failure to complete homework, and didn't have a trusted adult at school that they can talk to. Katie found it difficult to mix socially with her peers. She said that she was worried about her mum, and so did not go outside of the home or attend any school clubs or activities. *“I quite like making mum cups of tea and sitting with her to keep her company”*. The family do not receive any help from local support services.

Due to the girls continuing poor attendance, their school alerted Barnardo's Action with Young Carers Wirral team, who provided a holistic approach to supporting Keira and Katie by:

- Providing one-to-one support, building relationships and talking to the girls about their mums' illness and their worries and concerns
- Directly liaising with school to make them aware of the girls' caring role, provide a trusted adult for them to talk to, refer them to school-based counselling, refer them to 'The Girls Project' to help build self-confidence, self-esteem and social skills
- Supporting the girls to access their local youth zone and arts centre to engage in activities with their peers and build friendships, and spend more time away from the home and caring responsibilities
- Working in partnership with social care to provide support for mum to reduce the amount of care Keira and Katie are providing
- Encouraging and supporting mum to attend local support networks
- Supporting mum with TAF (team around the family) meetings and helping her access mental health support
- Referring the family to local health and wellbeing support services e.g. fire service for house checks and provision of furniture for their home.

Mum has now been supported to change her medication which has improved her moods and enabled her to communicate more effectively with Keira and Katie. Both girls are much happier now mum is feeling better and feel more confident going out into their local community and leaving her. *“I am in a much better place now. We have been able to go out as a family and enjoy ourselves”*.

Mum has also received support at home which has reduced the amount of care she needs from Keira and Katie. Both girls are now attending school full time and have not missed any days. Keira is feeling less stressed and isn't as worried about mum now she is engaging with support networks. *“I have a better understanding of mum's illness. I don't worry about her as much now. I am able to go out and spend time with friends”*.

BAME young carers were identified as a specific vulnerable group in our recent research report.

## Black, Asian and Minority

### Ethnic (BAME) young carers

**Our research, 'Caring Alone: Why Black, Asian and Minority Ethnic (BAME) young carers continue to struggle to access support'<sup>33</sup> explored the key issues faced by young carers from BAME communities in accessing support services to gain insight into what measures can be adopted to ensure that BAME young carers have better access to support. The research found that:**

- The concept of a young carer is unfamiliar to many BAME communities, as helping family and extended family is something that is expected, and often the impact on a child is not realised or understood
- BAME families often do not want agencies involved, due to a deep mistrust of social services or authorities, and a fear of their families being split up
- There is stigma within many BAME communities in acknowledging mental health and disability issues, and in seeking support.

BAME families are more likely than other families to be impacted by other inequalities and adversities such as mental health issues, poverty and domestic abuse, putting an additional strain on young carers within these households.

The report outlined that BAME young carers and their families have unique vulnerabilities which agencies can struggle to understand, in order to mitigate their impact. As young carers are 1.5 times more likely to be from these communities, and twice as likely to not have English as their first language, it is clear that more work needs to be done in order to break down barriers, reduce the stigma felt in asking for help, and overcome the imbedded fear of agency involvement within these communities. The report made a series of recommendations to government, health commissioners, and providers, to do more to reduce the burden of care on young people, and ensure services are accessible and visible, and work to overcome language and cultural barriers that may lead to BAME families not seeking support.



**young carers are**

**1.5 times more likely**

**to be from these [BAME] communities, and twice as likely to not have English as their first language**

<sup>33</sup> James, E. (2019) Caring Alone: Why Black, Asian and Minority Ethnic young carers continue to struggle to access support [Online] Available at [https://www.barnardos.org.uk/caring\\_alone\\_report.pdf](https://www.barnardos.org.uk/caring_alone_report.pdf)

A high proportion of children accessing our young carers services in 2018-19 experienced an improvement in their outcomes, particularly in relation to:

### Reduction in levels of risk/harm

**99 per cent**

of young carers identifying this as an outcome experienced an improvement in their (pre and post support) scores (n=101)

### Increased resilience

**75 per cent**

of young carers identifying this as an outcome experienced an improvement in their (pre and post support) scores (n=357)

### Reduced impact of caring

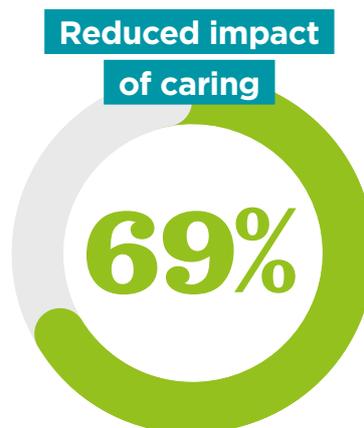
**65 per cent**

of young carers identifying this as an outcome experienced an improvement in their (pre and post support) scores (n=631)

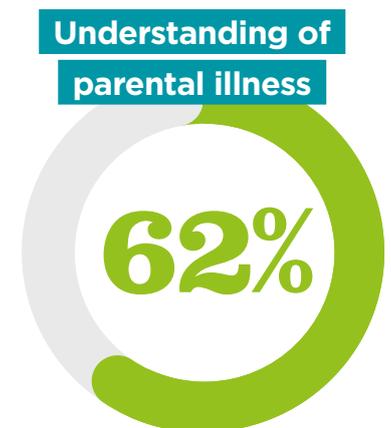
Outcomes for Black, Asian and Minority ethnic (BAME) young carers saw particular improvements in:



experienced improvements (n=56)



experienced improvements (n=89)



experienced improvements (n=55)

Strategic Aim:

# Safer Childhoods

## We believe every child should live safe from harm.

## Evidence shows, for example, that ‘resilience’ and ‘recovery’ are possible for victims and survivors of childhood sexual abuse.

Our Safer Childhoods work spans a range of services focused on keeping children and young people safe from harm, and supporting those who do experience it.

In 2018-19, we have continued to prioritise our work around child exploitation and abuse.

We remain committed to tackling all forms of childhood abuse and exploitation, and ensuring that all children and young people impacted receive the highest quality support. We also support children and young people who display abusive or exploitative behaviours towards others. These children have often experienced neglect and abuse themselves and require safeguarding and support.

Abuse or exploitation during childhood can have wide-ranging and serious consequences<sup>34</sup> that can endure throughout adult life.<sup>35</sup> The harm caused by childhood abuse or exploitation can also have adverse effects on the families of victims and survivors,<sup>36</sup> and for wider society.<sup>37</sup>

Sustained adverse outcomes from childhood abuse or exploitation are not, however, inevitable. Evidence shows, for example, that ‘resilience’ and ‘recovery’ are possible for victims and survivors of childhood sexual abuse. Receipt of effective support services and positive and sensitive responses from family, friends, and professionals following disclosure have been identified as protective factors which can decrease likelihood of sustained adverse outcomes.<sup>38</sup>

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- 34 Sexual abuse during childhood is associated with an increased risk of adverse outcomes in almost every sphere of victims and survivors’ lives – impacting on physical and mental health, education, employment, financial stability, relationships, parenting, future re-victimisation, propensity to offend, and development of harmful externalising behaviours.
- 35 One In Four (2015) Survivors’ voices: breaking the silence on living with the impact of child sexual abuse in the family environment [Online] Available at [http://www.oneinfour.org.uk/wp-content/uploads/2015/11/Survivors\\_Voices\\_Report\\_November\\_2015-2.pdf](http://www.oneinfour.org.uk/wp-content/uploads/2015/11/Survivors_Voices_Report_November_2015-2.pdf)
- 36 C.f. Quadara, A., Stathopoulos, M., and Carson, R. (2016) Family Relationships and the Disclosure of Institutional Child Sexual Abuse [Online] Available at <https://www.childabuseroyalcommission.gov.au/sites/default/files/file-list/Research%20Report%20-%20Family%20relationships%20and%20the%20disclosure%20of%20institutional%20child%20sexual%20abuse%20-%20Treatment%20and%20support%20needs.pdf>; Clevenger, S. (2016) Mothers of Sexual Assault Victims: How women do mother after their child has been sexually assaulted. *Feminist Criminology*, 11(3): 227-252; Stewart, C. C. (2012) Beyond the Call: Mothers of Children with Developmental Disabilities Responding to Sexual Abuse. *Journal of Child Sexual Abuse*, 21(6):701-727; van Toledo, A., and Seymour, F. (2013) Interventions for caregivers of children who disclose sexual abuse: A review. *Clinical Psychology Review*, 33(6):772-781; Breckenridge, J., and Flax, G. (2016) Service and support needs of specific population groups that have experienced child sexual abuse: Report for the Royal Commission into Institutional Responses to Child Sexual Abuse [Online] Available at <https://www.childabuseroyalcommission.gov.au/sites/default/files/file-list/Research%20Report%20-%20Service%20and%20support%20needs%20of%20specific%20population%20groups%20-%20Treatment%20and%20support%20needs.pdf> ;
- 37 C.f. Saied-Tessier, A. (2014) Estimating the costs of child sexual abuse in the UK. London: NSPCC.
- 38 Fisher, C., Goldsmith, A., Hurcombe, R. and Soares, C. (2017) The impacts of child sexual abuse: A rapid evidence assessment [Online] Available at <https://www.iicsa.org.uk/key-documents/1534/view/iicsa-impacts-child-sexual-abuse-rapid-evidence-assessment-full-report-english.pdf>

While many children affected by childhood abuse and exploitation will remain 'under the radar', and the limitations of available data on childhood abuse and exploitation should be borne in mind, estimates can help provide an indication of the scale and nature of some of the risks and harms children face:

### Over half a million children

are considered to be so vulnerable that the **state has to step in**<sup>39</sup>

### 670,000 children

in England are considered to be growing up in '**high risk**' family situations<sup>40</sup>

### Over 45,000 children

aged 10-18 are identified as being a **member of a gang**<sup>41</sup>

### Over a thousand

new child **victims of slavery** are reported each year<sup>42</sup>

### 15% of girls and 5% of boys

in the UK are reported to have experienced some form of **sexual abuse before the age of 16**<sup>43</sup>

### Children with a disability

are **three times more likely to be sexually abused** than children without a disability<sup>44</sup>

### 28 police forces

in England and Wales (65%) report **exploitation** of children, with 18 forces (42%) reporting evidence of children moving drugs/money around on behalf of drug lines.<sup>45</sup>

...many of the children and young people we work with who have been impacted by sexual abuse are likely to have experienced a range of additional adverse childhood experiences...

39 Children's Commissioner for England (2017) On measuring the number of vulnerable children in England [Online] Available at <https://www.childrenscommissioner.gov.uk/wp-content/uploads/2017/07/CCO-On-vulnerability-Overveiw-2.pdf>

40 Ibid

41 Ibid

42 Ibid

43 Karsna, K. and Kelly, L. (2018) Measuring the scale and changing nature of child sexual abuse and child sexual exploitation – Scoping report [Online] Available at <https://www.csacentre.org.uk/csa-centre-prod/assets/File/CSA%20Scale%20and%20Nature%20full%20report%202018.pdf>

44 Jones, L., Bellis, M. A., Wood, S., Hughes, K., McCoy, E., Eckley, L., Bates, G., Mikton, C., Shakespeare, T. & Officer, A. (2012). Prevalence and risk of violence against children with disabilities: a systematic review and meta-analysis of observational studies. *The Lancet* 2012, 380:899-907.

45 National Crime Agency (2017) County lines violence, exploitation and drug supply 2017 [Online] Available at <https://nationalcrimeagency.gov.uk/who-we-are/publications/234-county-lines-violence-exploitation-drug-supply-2017/file>

While we have continued to focus our work on supporting children and young people affected by sexual abuse, we recognise that sexual abuse rarely occurs in a silo; many of the children and young people we work with who have been impacted by sexual abuse are likely to have experienced a range of additional adverse childhood experiences, and have experienced other associated forms of exploitation and trauma.

For example, analysis of data from referrals to our child sexual exploitation and harmful sexual behaviour services in Wales, over the period 1999-2019 (n=1,583), shows that among those under 12 years of age at referral to Barnardo's:



In this data, we only began to separate domestic violence from emotional abuse and neglect in 2004. Thus, the incidence of domestic violence in the lives of children and young people referred is higher (78 per cent) than that represented in these figures.

Overall, 68 per cent of those referred (69 per cent of under 12s) were known by agencies to have engaged in previous concerning sexual behaviour, and 36 per cent were recorded as having a learning difficulty.

We know that to be effective in our Safer Childhoods work, we therefore need to focus on responding effectively to the whole range of threats children and young people face, such as sexual abuse, trafficking, gangs, and online abuse and exploitation. We also recognise the need to address significant risks such as domestic abuse and child neglect.

In order to achieve our vision for children to live safer childhoods, we need to work with all parts of 'the system'. In addition to supporting children and young people directly, therefore, we often work in partnership with families, carers, and other voluntary sector and statutory sector organisations, in order to promote joined-up responses and strong support networks.



**68 per cent**  
were known by agencies to have engaged in previous concerning sexual behaviour

## Our objectives for Child Sexual Abuse (CSA)

The overarching objectives for our child abuse and exploitation work are to:

**Improve disruption and prevention** of abuse and exploitation

**Improve identification of children and young people** impacted by abuse or exploitation

**Improve outcomes for children and young people** impacted by these harms

## Our approaches

In 2018-19 we have continued to deliver a range of services for children and young people impacted by abuse and exploitation. We continue to learn and build upon the most effective ways of addressing issues children and young people face.

In addition to our direct service provision, in 2018-19, building on learning from our practice and the developing research evidence base we have begun to develop new assessment, intervention, and outcomes approaches, and have further invested in our frontline workforce.

- We have funded work to co-design a complex abuse risk framework that works with the multiple family, wider community, and online risks that children are forced to navigate. The framework focuses on tackling sources of harm in order to build protective structures for children, so they can operate within their daily lives in safe environments. We have engaged a range of multiagency partners in two development sites, in Scotland and England. We are currently engaging children and families in a range of participatory activities. Taken alongside the views of practitioners and other professionals, and the research evidence base<sup>46</sup>, the insights from this work will help inform design of a new framework. As we develop our learning on complex abuse and risk assessment, we are withdrawing our current Sexual Exploitation Risk Assessment Framework (SERAF) tool from use within the organisation.

**The framework focuses on tackling sources of harm in order to**

**build protective**

**structures for**

**children,**

**so they can operate within their daily lives in safe environments.**

<sup>46</sup> C.f. Brown, S., Brady, G., Franklin, A. and Crookes, R. (2017)

The use of tools and checklists to assess risk of child sexual exploitation – An exploration study [Online] Available at <https://www.csacentre.org.uk/research-publications/cse-risk-tools/>; Research in Practice (2017) Working Effectively to Address Child Sexual Exploitation: an evidence scope [Online] Available at <https://www.rip.org.uk/resources/publications/evidence-scopes/working-effectively-to-address-child-sexual-exploitation-evidence-scope-2017->

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This new approach to assessment and understanding risk will help services reframe and adopt a wider range of contextual safeguarding approaches...

Our aim is to develop an assessment approach which:

- places children's lived experiences at the centre
- reduces the contextual risks children face, whether within their family or in wider communities
- improves identification of children who are often out of 'professional sight'
- ensures all children are better safeguarded and not worked with in silos.

This new approach to assessment and understanding risk will help services reframe and adopt a wider range of contextual safeguarding approaches, looking beyond the child and family, and engaging schools and wider community responses.

- We have reviewed the educational sessions we deliver in schools. As part of this work, drawing on the research evidence base<sup>47</sup> and our service delivery experience, we have reviewed our organisational approach to how we deliver schools work, and have developed a tool that enables staff to approach all socio-educative work in a trauma informed way. Operationally, this has resulted in a change of the resources we use, the support we offer schools, and the way we work alongside children in education settings.

Our new positioning on socio-educative approaches has been adopted by NWG and NSPCC, and a number of local authorities in England are promoting the use of our checklist. We are also working with the Home Office and Ofsted, to ensure our learning informs their work on socio-educative approaches and extra-familial exploitation.

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<sup>47</sup> Eaton, J. (2018) 'Can I tell you what it feels like?': Exploring the harm caused by CSE films Available at <https://www.victimfocus.org.uk/campaigns>

# Case Study: **Andrew**

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Andrew is now back in education and employment, and working to build his future.



**Andrew was part of a group of young people aged 13-15 frequenting an address at which they would consume alcohol and listen to loud music, resulting in disputes with neighbours. Complaints about anti-social behaviour at the property had been made to the police.**

A neighbour had shared with police that several young people would visit the address, and that on each occasion, the occupier would leave in a taxi, returning with bags of alcohol, and that young people would often be seen leaving the address under the influence of substances.

The occupier of the address was a 34 year old woman. Intelligence gathered by Barnardo's suggested that young people may be being sexually exploited at the address.

Given the concerns identified, Barnardo's attempted to progress child protection processes. However, despite other agencies being aware of the concerns, no further action was taken. Reasons cited included: there was no disclosure of sexual activity from any young person, and, Andrew was three weeks from his 16th birthday.

Andrew moved in to live at the address, with the 34 year old woman. Barnardo's became involved in supporting both Andrew and his mum.

Andrew's mum was supported to implement strategies that would allow her to maintain a relationship with him. Andrew's Barnardo's worker helped him to explore the nature of the relationship he had with the 34 year old woman. Through this support, Andrew gained an understanding of grooming, manipulation, coercive control, and child sexual exploitation, and gradually realised he was being controlled and manipulated by the woman.

Andrew went on to disclose a 'sexual relationship' with the woman, stating that this started once he had turned 16. Barnardo's shared this information with police and social work. However, as Andrew disclosed that the relationship started once he had turned 16, there was again no further action. This outcome impacted on Andrew's mental wellbeing; he broke down, and required psychiatric care.

Through the support he received from Barnardo's, Andrew now understands that what happened to him was sexual abuse. Barnardo's supported Andrew to work on the impact of some of this.

Andrew is now back in education and employment, and working to build his future. He has a positive relationship with his mum, has reconnected with some friends, and is positive about his future.

## Criminal Exploitation

We have seen a change in the commissioning landscape this past 12 months, with a refocusing of resource from child sexual exploitation, to wider forms of extra-familial exploitation, including criminal exploitation.

Our expansive learning about what is effective in relation to child sexual exploitation has elements that are transferrable to other forms of exploitation. However, working with criminal exploitation also requires its own specialist approaches which we have been developing across the organisation with practitioners, children, and external experts.

We recognise there is a danger that the specialist approaches which have been effective in identifying and disrupting sexual exploitation and familial child sexual abuse may be diluted if the sector doesn't continue to keep a specific focus on the needs of these children while also grappling with other forms of exploitation.

## Co-design with children, young people, families and commissioners

In 2018-19, our Child Sexual Abuse Core Priority Programme has focused primarily on investing resources into ten practice development projects to tackle key knowledge and best practice gaps, including:

### Identifying and supporting

those children who are most marginalised and not accessing services

### Developing new approaches

to prevention and intervention at the earliest stage

### Evaluating children's recovery journeys

and developing approaches to impact on lifelong outcomes

Our work is designed to amplify children's voices, and work alongside them to develop peer-led models of support and intervention. Early findings have identified the key barriers to adults identifying and effectively supporting children who are experiencing sexual harm and emotional distress, and we have begun to work alongside children, parents, and professionals to develop new approaches that recognise harm early, and provide timely and inclusive responses to safeguarding children and helping them on their recovery journey.

Co-design principles are at the heart of our abuse and exploitation development work. Our focus is on meaningful engagement of children who have experienced abuse or exploitation, and who are the most marginalised.

**Boys 2 started  
life as a**

**one-year research**

**project,**

**funded by the  
Home Office  
in 2017.**

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**A key focus of  
phase two has  
been to work  
alongside boys  
and young men  
to co-produce  
a training  
package...**

Across our CSA work, we are also working with a range of experts including speech and language therapists, clinical psychologists, and academics, to co-produce alongside children and young people.

Over 2018-19, an early pilot of the practice development approach, Boys 2, has started to embed early development work to make widespread sector changes.

Boys 2 started life as a one-year research project, funded by the Home Office in 2017. The purpose of the project was to work alongside boys and young men impacted by childhood sexual exploitation, in order to improve identification of, and assessment and intervention with, this largely hidden group.

In year one, alongside boys and young men, we developed assessment and intervention resources for frontline professionals to support boys and young men to cope and recover from childhood sexual exploitation.

Phase two of the research is funded by our Child Sexual Abuse Core Priority Programme, and has focused upon furthering our understanding of the key areas identified in year one, by engaging with a wider group of boys and young men across more regions and nations.

The findings continue to grow, and we are now beginning to consider what the findings may mean for our work with boys and young men, as well as our work with girls and young women impacted by sexual abuse.

A key focus of phase two has been to work alongside boys and young men to co-produce a training package that focuses on quantitative research findings, as well as approaches to support recovery from childhood sexual exploitation.

In 2018-19, alongside Barnardo's workers, the boys and young men have helped develop a half-day event for professionals. The boys made suggestions about what training for professionals should include, based on their knowledge and expertise of various forms of exploitation and abuse, and the kinds of care and support they feel has been most helpful to them on their recovery journeys, where multiple abuse has often featured.

The findings from the Boys 2 work have been used to inform Scottish and Welsh Government responses to supporting recovery of boys and young men impacted by sexual abuse.

## Boys 2

“It wasn’t just sexual exploitation for me, I had to deal with other stuff too. I was homeless and coped any way I could. I thought it was what I had to do to survive and quickly found myself being pulled into other types of exploitation, you know, criminal stuff. I would like to help other people know what helped me get out of that life and what helps me stay out of it too.”

Matt, a young man involved with Boys 2, aged 25

“It’s not just what you do, it’s how you do it, if you don’t get that right we probably won’t work with you.”

Reuben, a young man involved with Boys 2, aged 18

“Over the past year we have been to loads of places with Boys 2. When I first started Boys 2 I was extremely nervous to do anything or talk to anyone but the Boys 2 team have totally changed my life. I don’t get nervous anymore, I can talk to anyone. When I first started presenting I could only say one or two sentences. A year later I had two full speeches and sometimes now I think about adding on top of my speeches... Maybe this year I will!”

Jitan, a young man involved with Boys 2

“I’ve enjoyed so many of the experiences I’ve had with Boys 2 research, but the one that stands out the most is when I went to Parliament. I had the opportunity to speak in front of the Home Secretary, and had a selfie with him. We’ve been given some really good feedback from our presentations, people have been really interested. I’ve been told that what we say in our presentations is exactly what professionals need to hear. Hearing from people who have been through the experiences seems to add real value to the messages being given, especially around how to engage boys and young men, and how to work with them effectively.”

Leeroy, a young man involved with Boys 2

“It has been a personal pleasure to work with the boys and young men, and see their growth and development along this journey. Their insight into what works in responding to CSA, across all its domains, never ceases to amaze us. We have learned so much from working with our boys and young men and look forward to learning from our experts by experience across phase three.”

Barnardo’s worker,  
Boys 2 research team

“The Boys 2 project is amazing. For me it has provided an opportunity to build my skillset in public speaking, delivering workshops, assisting in facilitating research and developing training.

It has been a real pleasure to have been able to attend the conferences and it has been amazing fun to travel all across the UK, especially the upcoming opportunity to go to Belfast for the NOTA conference. A great benefit of this has also been forming friendships with others who have that shared insight into that past experience. It has also been an amazing opportunity for me to transform an experience of something that was a traumatic time into something positive, by improving the experience of future boys by assisting professionals through the workbook we put together and research to explain a better way of working with them to improve their lives. Personally the project has also given me hope that we can help prevent the same mistakes that were made with boys and young men like me in the past. The feedback we have received has been amazing and it is obvious that people recognise a need for the workbook and further evidence informed guidance and resources. I hope we will have an opportunity to continue to help change the professional and social narrative for boys in regards to CSE. Whilst the project has been a great success, without further development and continuing pressure, I worry that we could lose the progress we’ve made. The project so far has gained momentum but societal and professional norms (about gender vulnerability and the accusatory profiling that occurs) may hinder the progress that’s truly needed.”

Joe, a young man involved with Boys 2

We will pursue similar widespread sector outcomes across other practice development project sites in the forthcoming year, increasing our understanding and approaches to supporting children:

- under ten years who are impacted by sexual abuse
- subject to sexual harm in online settings
- experiencing multiple forms of exploitation (sexual and criminal) through organised groups or peers
- with harmful sexual or exploitative behaviours to other children
- who have relocated within the Syrian resettlement programme in Northern Ireland, who face multiple harms and trauma
- from black and minority ethnic communities, whose needs in relation to sexual harm have often been unmet.

# Outcomes

**Figure 2.0** Outcomes achieved by those supported through our CSE direct support services in 2018-19.<sup>48</sup>



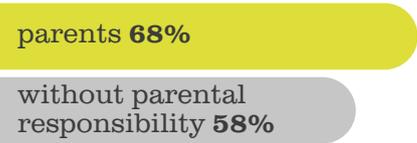
The outcome scores indicate that the biggest changes are in:

- improved 'recovery' from sexual abuse
- improved mental health and wellbeing.

**We were particularly successful at:**

## supporting improved mental health and wellbeing among parents we support

(68 per cent of parents reported improved mental health and wellbeing, compared with 58 per cent of those without parental responsibility).



## improving parent/carer-child relationships among females we support

(55 per cent of females experienced improved parent/carer-child relationships, compared with 37 per cent of males supported).



<sup>48</sup> This is based on outcomes within Barnardo's Outcomes Monitoring Framework. These outcomes are often requested by service commissioners, so a number of our CSE direct support services assess them

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These figures demonstrate the real complexity of our work; many of those we support present with complex needs in addition to sexual harm, and have histories of additional adversity.

These figures demonstrate the real complexity of our work; many of those we support present with complex needs in addition to sexual harm, and have histories of additional adversity. It should also be noted that it is also common for children and young people to underestimate their risk and levels of challenge in initial outcomes measure reporting, as they may not fully understand the extent of their risk. In many cases, as awareness of a child's situation improves through engagement with our workers, and as more information about their situation is disclosed, it may appear that their scores are worsening, or that they have not changed. This does not necessarily indicate a lack of successful work, but instead may be a reflection of initially suppressed scores.

As we trial new ways of working, we refine our approaches, and improve our learning; we cannot – and do not – expect a 100% success rate in everything we do. This is why we continue to work to develop our approaches to supporting children and young people impacted by exploitation and abuse, and building capacity within wider systems.

The data also reflect the fact that many of these outcome domains are impacted by wider systems and processes outwith the control of children and young people, or Barnardo's alone.

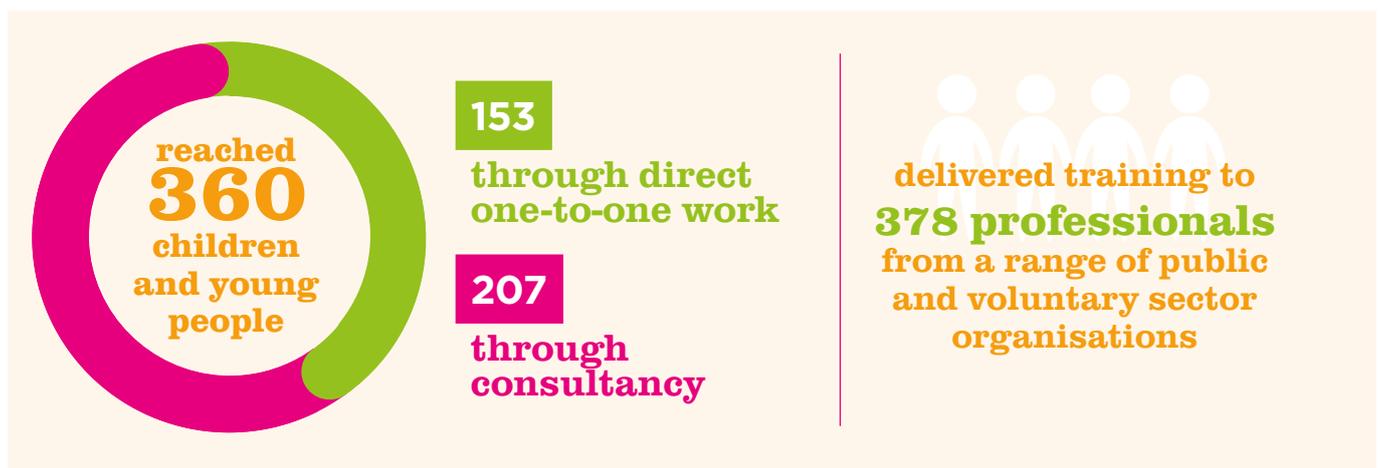
The limitations of our outcomes framework are why we continue to work towards developing improved, more meaningful, approaches to capturing the impact of our work.

## RISE, Scotland

Our *Reducing the Impact of Sexual Exploitation (RISE)* project is a two year pilot running in Aberdeen and Dundee. The overall aim of *RISE* is to identify, protect and support children and young people who have experienced or are considered to be at risk of CSE, and to prevent CSE by disrupting perpetration. This is achieved through: training and consultation; direct work with children and families; and, improving intelligence sharing.

An independent implementation evaluation of *RISE*<sup>49</sup> by University of Stirling researchers reported that the model is highly effective, having “*demonstrated significant impact in terms of raising awareness, transforming practice, and impacting policy, as well as providing a highly valued service for children and young people, and an effective role in facilitating information sharing*”, concluding that “[T]his suggests good value for investment, underscoring the model’s potential for replication and translation”.

In the 15 month period under review for the evaluation<sup>50</sup>, *RISE*:



Outcome assessments, as presented in the evaluation report, suggest that for a third of children, young people and parents/carers worked with, outcomes improve; a negative outcome reading was recorded in one case.

The evaluation also found:

- A central success of *RISE* is improving multi-agency coordination – which is identified in wider research evidence as a key element in supporting children and young people who have experienced, or are considered at risk of, CSE<sup>51</sup>

49 Callaghan, J. E.M., Beetham, T. and Rigby, P. (2018) The “Reducing the Impact of Sexual Exploitation” (RISE) Project: An Implementation evaluation. Stirling: University of Stirling, Centre for Child Wellbeing and Protection

50 March 2017-May 2018

51 C.f. Berelowitz, S., Clifton, J., Firmin, C., Gulyurtlu, S. and Edwards, C. (2013) “If only someone had listened”: Office of the Children’s Commissioner Inquiry into child sexual exploitation in gangs and groups. Final report. London: Office of the Children’s Commissioner; Cockbain, E. (2013). Grooming and the ‘Asian sex gang predator’: the construction of a racial crime threat. *Race & Class*, 54(4): 22-32; Jago, S., Arocha, L., Brodie I., Melrose, M., Pearce, J. and Warrington, C. (2011) What’s going on to safeguard children and young people from sexual exploitation? How local partnerships respond to child sexual exploitation. Luton: University of Bedfordshire.

For the relatively inexpensive investment in a small number of specialist staff, high impact can be achieved...

- *RISE* is viewed by professionals as having transformed practice and service landscapes, and resulted in more trauma-aware practice, and trauma-sensitive systems – the training, support, and consultation with professionals has built awareness, knowledge, and skills, and facilitated a transformation in culture and systems, and helped build capacity to improve responses to CSE, across a wide range of organisations.
- Stakeholder professionals indicate that there is evidence *RISE* has supported more effective disruption of perpetration. Components viewed as key to the success of the model include:
  - the location of Barnardo’s workers within police buildings, but separate from police services
  - the expertise of Barnardo’s workers
  - buy-in from key stakeholders
  - the role of *RISE* in improving multiagency collaboration and information sharing.

A small number of stakeholders expressed concern that:

- the operating model – of a single individual located in, but not embedded within, an organisation – might result in *RISE* workers being ‘too’ independent, potentially becoming consequently insufficiently supported, and thus, isolated
- the model of a single Barnardo’s worker ‘piloted in’ may ultimately be unsustainable, without local authority buy-in.

The evaluation indicates the *RISE* model is highly translatable, concluding that “*For the relatively inexpensive investment in a small number of specialist staff, high impact can be achieved, with evidence of transformation of individual professionals’ attitudes, transformed practice and transformed organisations and systems*”.

Funding from the People’s Postcode Lottery has been secured to extend the delivery of *RISE* beyond the initial two year pilot, and it is intended that the service will be further refined and developed, and implemented more widely.

## ReachOut, Rotherham

*ReachOut* is a preventative CSE project established in 2016 through a partnership funding agreement between Barnardo's, the KPMG Foundation, Department for Education, Communities and Local Government and Rotherham Metropolitan Borough Council (RMBC).

*ReachOut* comprises three main strands of work, underpinned by a strong ethos of partnership working: outreach work to raise awareness and provide support to children and young people in their communities; healthy relationship education in schools and other settings; and, direct support for children identified as being at risk of CSE.

Between 1 January 2016 and 31 December 2018, *ReachOut* has:

### Reached over 10,000 people

across Rotherham with information about CSE prevention

### Received a total of 336 referrals

for one-to-one direct work with children and young people

### Engaged with every secondary school in Rotherham,

and had some engagement with around half of all primary schools

Referrals for direct work are frequently triggered by concerns about young people's safety online. However, the vast majority of young people referred have experienced a range of underlying issues that might heighten their potential vulnerability to CSE, including family difficulties, mental health issues, prior abuse, and, problematic peer relationships.

An independent evaluation of *ReachOut*<sup>52</sup> found the direct support provided has successfully raised children and young people's awareness, confidence, and, self-esteem. All young people interviewed were able to give clear and specific accounts of the CSE-related knowledge and understanding they had gained. For most young people, it was the relationship with a specific worker and the practical, reliable, holistic support they had received that had made the greatest impression on them. Teachers, parents, foster carers, and social workers also recognised the significance of these relationships in boosting young people's confidence and aspirations.

**“The main reasons she came for – to talk about CSE and that – were dealt with in the first few weeks but she didn't just bugger off then; she stayed to support me with other stuff over my parents... [my Barnardo's worker] didn't butt in and talk over me, She didn't say ‘you can't’ all the time. I've been told by social workers: ‘Because of the childhood you've had you're going to turn out like this unless you do this’. [My Barnardo's worker] didn't do that, she didn't say I was going to become something or other because of what had happened to me.”**

Young person supported by *ReachOut*

**ReachOut's collaborative approach has been identified as making a valuable contribution to re-building a culture of trust in Rotherham**

52 Mc Neish, D., Scott, S., Lloyd, S. and Pearce, J. (2019) Barnardo's ReachOut – Final Evaluation Report [Online] Available at <https://www.dmss.co.uk/pdfs/reachout-evaluation-report-year-3-20-feb.pdf>

*ReachOut*  
has engaged  
thousands  
of people  
through  
outreach  
work

Parents and foster carers also valued their own relationships with *ReachOut* workers, and felt the support they had received themselves had been crucial in changing young people's trajectories.

**“Working with [my Barnardo’s worker] has helped us communicate where we used to just argue. Now if we row we know how to handle it... It’s changed the way we see each other, we have become friends. I know when to be there for her and when to leave things... I’ve learnt strategies... We needed someone neutral and from outside... it has made family life so much easier.”**

Parent supported by *ReachOut*

Feedback collected from over 1,000 school pupils and 50 school staff indicates that *ReachOut*'s work in schools achieves its learning outcomes for a high proportion of participants. The work is positively received by young people, with the evaluation finding evidence that it has contributed to increased knowledge and understanding among young people. Further, school staff agree that: sessions are well planned and organised; materials are appropriate for age and stage of children; workers interact well with children; and, content is relevant to all children involved in the sessions.

*ReachOut* has engaged thousands of people through outreach work, with one of its most sustained outreach initiatives being with the Roma community; work which successfully demonstrates the benefits of long-term, community-based work, and the relationships which ensue.

The evaluation concludes that:

- Alongside the effort of many other agencies, *ReachOut*'s collaborative approach has been identified as making a valuable contribution to re-building a culture of trust in Rotherham
- *ReachOut* demonstrates that effective intervention with vulnerable young people depends primarily on building warm, respectful relationships based on listening, understanding, appreciating and believing in them
- The three stranded approach<sup>53</sup> of *ReachOut* is an effective strategy, which along with careful consideration of potential contextual differences, could be applied elsewhere
- *ReachOut* has been effective with CSE prevention for several reasons: the skills of its staff, the quality of its resources, the efficacy of its partnerships, and the 'fit' between what it can offer and what young people considered vulnerable to CSE need.

While it is impossible to know what exactly has been prevented from occurring by *ReachOut*'s interventions, the evaluation concludes that “*given the immediately risky situations that had prompted some referrals, it is likely that sexual abuse and exploitation may well have been the outcome without it. There have been very few cases in which concerns have escalated during ReachOut's involvement with a young person. Where statutory services have been involved at the point of referral, concerns around CSE have usually been reduced following ReachOut's work, and in some instances, cases have been stepped down or closed*”.

## Influencing wider policy and practice

Throughout 2018-19, drawing on our service delivery experience and wider learning, we have continued to provide evidence to government inquiries and consultations around a number of key areas. This has included:

- Contributing to government consultations and guidance on relationships and sex education
- Giving oral evidence to the UK Home Affairs Select Committee on Modern Slavery
- Responding to the UK Home Affairs Select Committee inquiry into Serious Violence.

**Victim's Strategy** – In England, the Victim's Strategy was published in September 2018 and it was announced that a consultation would take place on the Criminal Injuries Compensation Scheme (CICS). The terms of reference for the CICS included two specific areas we had lobbied on – 'minor convictions' and 'consent in fact'. In January 2019 the Victim's Commissioner published a report on the scheme, and noted Barnardo's contribution.

**Public Understanding of CSE research** – In March 2019, we published research into public understanding of CSE in Scotland<sup>54</sup>. The study identified inconsistencies in how the public understands, and can therefore respond to, the issue. The survey was the first of its kind in Scotland, raising important questions about how awareness raising work is conducted, and how communities can be supported to take ownership of the issue. Alongside the Scottish Government, we are looking to this research to help focus further research around public understanding, and provide insight around targeted messaging for particular groups in society, or about particular aspects of child sexual exploitation.

The survey was the first of its kind in Scotland, raising important questions about how awareness raising work is conducted, and how communities can be supported to take ownership of the issue.

Less than half of respondents consider child sexual exploitation to be a 'very' or 'fairly' significant issue in their local area.

More than a quarter of people said they 'don't know' to what extent child sexual exploitation is an issue in their local area.

These results did not consistently differ in relation to where in Scotland a respondent was from. Thus, a person's view of how significant child sexual exploitation is in their local area

does not appear to be connected to particular aspects of their local area, but rather, there is a general trend across the population to view child sexual exploitation as 'happening elsewhere'.

This is consistent with previous research suggesting an overarching public narrative of viewing child sexual abuse as being 'other' and happening elsewhere. This narrative may hinder people from playing a full role in the prevention of abuse.

54 Friskney, R. (2019) Public understanding of child sexual exploitation [Online] Available at [https://www.celcis.org/files/7015/5290/8378/FINAL\\_PDF\\_Barnardos\\_Scotland\\_-\\_Public\\_Understanding\\_of\\_CSE\\_in\\_Scotland.pdf](https://www.celcis.org/files/7015/5290/8378/FINAL_PDF_Barnardos_Scotland_-_Public_Understanding_of_CSE_in_Scotland.pdf)

## Key findings

**Public understanding of child sexual exploitation is complex** – different concepts appear salient in different contexts, sometimes in contradictory ways.

**Men appear less engaged with the topic** of child sexual exploitation than women.

While people acknowledge in general that child sexual exploitation is an issue, **people are less likely to think that it is an issue in their local area** – most likely reflecting a public narrative of child sexual exploitation as ‘other’ rather than something we can all play a role in preventing.

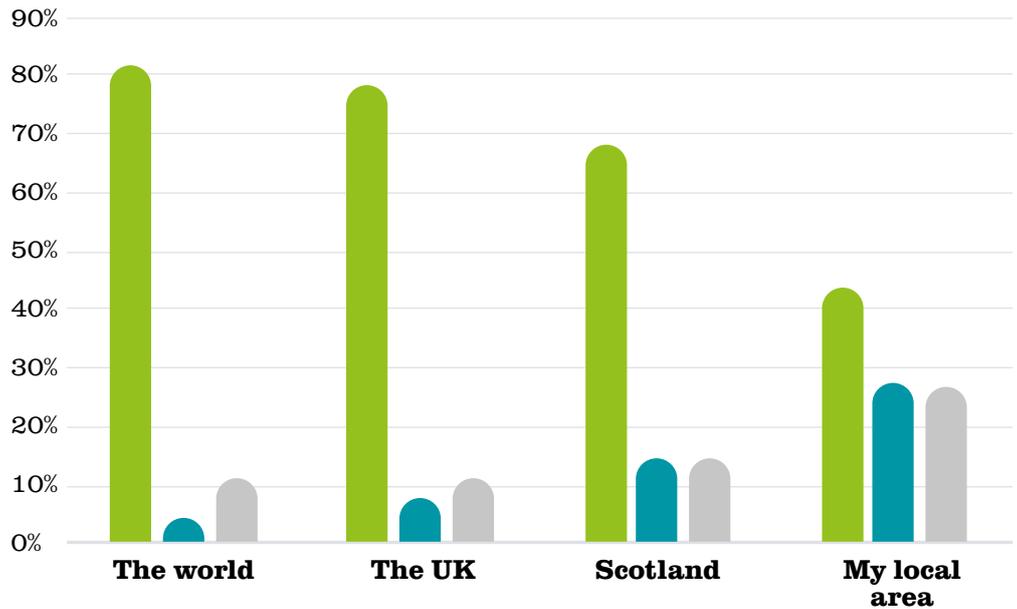
There are **particular messages about child sexual exploitation that do not appear well embedded in public understanding**, including that older children (16-17 year olds) can be affected, and that children can display sexually exploitative behaviours towards other children.

**Figure 3.0:** Perception of how significant child sexual exploitation is in different places

**To what extent is child sexual exploitation a significant issue in...**

n=1,007

- Very/fairly significant
- Not very/not at all significant
- Don't know



### The Centre of expertise on child sexual abuse (CSA Centre)

The CSA Centre comprises a multi-disciplinary team funded by the Home Office, and hosted by Barnardo's. Work in 2018-19 has included:

**‘Improving the understanding of the scale and nature of child sexual abuse’<sup>55</sup>** – This update of the 2017 report provides a national account of what we do and don't know about CSA from available data, concluding that decisions about preventing, disrupting, and responding to CSA are being made with poor quality and old data.

Better decisions and effective targeting of responses to protect children requires better data.

**Data collection template** – Development and testing of a core set of data fields designed to improve quality and consistency of local service data, in order to improve local understanding of CSA. In 2019-20 the findings from these pilots will be published, alongside the data collection template and guidance on use.

**Building evaluation capacity across the sector** – Understanding of effective approaches to intervention and recovery for children at risk of, or affected by, sexual abuse remains a gap in the knowledge base. Work has included:

- funding 17 providers to improve their capacity to assess and evidence service effectiveness
- a workshop sharing key elements of monitoring and evaluation good practice
- publication of *'Measuring your effectiveness: A practical guide for services working with children and young people affected by sexual abuse'*<sup>56</sup>.

**Improving practitioner access to evidence** – In order to build confidence in the workforce, the CSA Centre improve access to evidence, and support practitioners to embed this within their practice.

Work has included:

- publication of 'key messages from research' papers:
  - Children and young people who display harmful sexual behaviour<sup>57</sup>
  - Institutional child sexual abuse<sup>58</sup>
  - Intra-familial child sexual abuse<sup>59</sup>.
- a 'Leading Practice' pilot training programme, supporting social workers in three local authorities to embed evidence in practice
- delivery of training, key note speeches, and workshops to around 1,300 professionals social work, law enforcement, education, health, and policy professionals.

**Better decisions and effective targeting of responses to protect children requires**

**better data**

**Funding 17 providers to improve their capacity**



56 Parkinson, D & Sullivan, R. (2019) Measuring your effectiveness: A practical guide for services working with children and young people affected by sexual abuse [Online] Available at <https://www.csacentre.org.uk/research-publications/effectiveness/monitoring-and-evaluation-guide-e-version/>

57 McNeish, D & Scott, S (2018a) Key messages from research on children and young people who display harmful sexual behaviour <https://www.csacentre.org.uk/research-publications/key-messages/harmful-sexual-behaviour/#downloads>

58 McNeish, D. & Scott, S (2018b) Key messages from research on institutional child sexual abuse [Online] Available at [https://www.csacentre.org.uk/index.cfm/\\_api/render/file/?method=inline&fileID=76F5DAC4-FD0B-4803-8DE4B5968E3088FE](https://www.csacentre.org.uk/index.cfm/_api/render/file/?method=inline&fileID=76F5DAC4-FD0B-4803-8DE4B5968E3088FE)

59 McNeish, D. & Scott, S. (2018c) Key messages from research on intra-familial child sexual abuse [Online] Available at [https://www.csacentre.org.uk/index.cfm/\\_api/render/file/?method=inline&fileID=C22751A4-ABA9-47FE-A78E33DAA3FD25E5](https://www.csacentre.org.uk/index.cfm/_api/render/file/?method=inline&fileID=C22751A4-ABA9-47FE-A78E33DAA3FD25E5)

## Wider learning on achieving Safer Childhoods

**Our wider work on achieving safer childhoods includes our participation and advocacy services, domestic abuse services, our trafficking and female genital mutilation services, and work on serious youth violence and enforced criminality of children.**

We have held a series of meetings in parliament aimed at highlighting the need to consider the underlying causes behind the recent reported increase in knife crime by young people...

Barnardo's, alongside Redthreads, provide the co-secretariat for the All-party parliamentary group on Knife Crime. We have held a series of meetings in parliament aimed at highlighting the need to consider the underlying causes behind the recent reported increase in knife crime by young people<sup>60</sup>, and what can be done to promote a whole system approach to dealing with the problem, taking into consideration the role of different services in helping prevent knife crime, and how to effectively work with young people impacted by it. Meetings have included discussions on a range of topics including social media, school exclusions, and the role of health services to help tackle knife crime. As part of our work we also asked young people their views about what should be done to prevent knife crime and a specific report detailing young people's proposals was published by the All-party parliamentary group in summer 2019<sup>61</sup>. Young people's proposals included ensuring there are more options for young people; ensuring schools are well placed to support young people at risk of involvement in knife crime; and, ensuring that those excluded from education have a safe space to go. Barnardo's will continue to work with the All-party Group on the issue of knife crime in 2019-20, as we continue to highlight the importance of the UK Government providing a comprehensive multi-agency response to tackling this issue.

**All Wales Safeguarding Guidance and Protocols** – During 2018-19, we have continued to support the development of Welsh Safeguarding Procedures, and the associated Practice Guides for children in specific circumstances. Barnardo's Cymru has been represented on Welsh Government co-ordinated task and finish groups working in the following areas:

- Statutory guidance and protocols in relation to CSE – which references our 2016 research report<sup>62</sup> on supporting boys and young men affected by sexual exploitation in Wales

60 Youth Justice Board report 4,500 knife and offence weapon offences committed by children aged 10-17 in 2017-18, a 7% increase on the previous year. Youth Justice Board and Ministry of Justice (2019) Youth Justice Statistics 2017/18: England and Wales [Online] Available at: [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/774866/youth\\_justice\\_statistics\\_bulletin\\_2017\\_2018.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/774866/youth_justice_statistics_bulletin_2017_2018.pdf)

61 All-Party Parliamentary Group on Knife Crime (March 2019). "THERE IS NO PROTECTION ON THE STREETS, NONE." Young people's perspectives on knife crime [Online]. Pp1-16. Available at: <https://www.barnardos.org.uk/sites/default/files/uploads/APPG%20on%20Knife%20Crime%20-%20Young%20people%27s%20perspectives%20May%202019.pdf>

62 Thomas, M. and Speyer, E. (2016) 'I never spoke about it' Supporting sexually exploited boys and young men in Wales [Online] Available at [https://www.basw.co.uk/system/files/resources/17595\\_bs\\_i\\_never\\_spoke\\_about\\_it\\_cse\\_report\\_e\\_0.pdf](https://www.basw.co.uk/system/files/resources/17595_bs_i_never_spoke_about_it_cse_report_e_0.pdf)

- Practice Guidance in relation to safeguarding children considered at risk of abuse through: Harmful Sexual Behaviour; Going Missing; Child Sexual Abuse; Domestic Abuse; Neglect; Female Genital Mutilation; Trafficked Children; Online Abuse; Criminal Exploitation; Cultural and Religious Belief; and, Being Unaccompanied and Asylum Seeking Children.

A series of consultations with young people accessing services were carried out as part of the review. Working alongside NSPCC, we were commissioned by the Welsh Government to work together to deliver the consultation with service users in relation to HSB. Young people supported by our *Better Futures* service were consulted in relation to guidance on HSB, and on CSE.

**Domestic Abuse Bill** – In January 2019, the UK Government published a draft Domestic Abuse Bill, consultation response, and, associated regulations. Following the consultation and initial response from a number of organisations, including Barnardo's, the Government have made changes to the Bill. These include a focus on children within the statutory guidance around the definition of domestic abuse. Our concerns around young people in abusive relationships not being included in the consultation have been accepted, as have our concerns around criminalising young people who have exhibited domestic abuse. The response also acknowledges our concerns over the family court process and protection of children, particularly around court decisions. We will continue to work with the UK Government, and other key partners, as the Bill progresses through parliament, in order to ensure children subjected to domestic abuse are protected and supported.

**Personal and Social Education Review** – in January 2019, The Scottish Government published a review of Personal and Social Education (PSE) which featured commentary from Barnardo's Scotland on the adoption of a whole school approach to reducing sexual abuse, which looks at school policies, the practice of staff, and the content of lessons.

**Relationships and Sex Education** – In February 2019, the Westminster Government published guidance on Health, Relationships and Sex Education in English schools. The guidance reflects a number of our recommendations, including a strong focus on online safety. We raised concerns with the UK Government that the guidance does not include teaching about female genital mutilation (FGM) or lesbian, gay, bisexual, transgender, queer or questioning (LGBTQ) issues in primary school.

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Our concerns  
around  
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## Independent Guardian Service, Northern Ireland

In Northern Ireland, our Independent Guardian Service supports children and young people who have been trafficked and/or separated<sup>63</sup>.

In 2018-19, the service has supported 52 children and young people.

Separated children can be extremely vulnerable. The majority of children and young people the Independent Guardian Service work with have been subject to incredibly traumatic experiences, at times not realising they have been exploited. Some children find it extremely difficult to talk about the circumstances that led to them seeking asylum, are extremely distrustful of adults or those in authority, and present with symptoms of emotional and/or psychological ill health.

We provide support and assistance to aid children to understand what they have been through, and help prevent them from being exploited further. Many of the children we support have been controlled under threat to either them or their families, and many do not fully understand the asylum process. This can be a result of a variety of factors, including intellectual capacity, lack of education, memory issues, trauma impacts, culture, and/or language barriers.

- **We have successfully advocated for, and gained agreement that, the Home Office interview room used for minors will be improved to become much more child-friendly.** We continue to advocate and work on the fulfilment of this agreement.
- **We have built relationships with statutory social workers** and, where necessary, challenged decisions in order to ensure the needs of unaccompanied asylum seeking children are more fully understood, and their needs met.

By ensuring that children are much better prepared for asylum interviews, we have prevented children from having to enter long appeals processes (often drawn out over many years), as well as removed the threat of deportation and removal.

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63 The Independent Guardian Service supports children up to the age of 18, or, with their consent, up to the age of 21.

## The National FGM Centre

The National FGM Centre (NFGMC) is a partnership between Barnardo's and the Local Government Association (LGA). Established in 2015 to help end new cases of female genital mutilation (FGM) in England by 2030, in 2017, its remit was extended to include harmful practices of child abuse linked to faith or belief, and breast flattening or ironing.

The Centre aims to:

- **Prevent** new cases by building effective strategies for the identification and support of at risk children, and by creating changes in community attitudes and behaviour
- **Protect** children through proactive safeguarding and effective prosecution
- **Support** those who have been affected by FGM, child abuse linked to faith or belief and breast flattening, by providing holistic support for survivors
- **Partner** with stakeholders to deliver solutions, bring together experience and learning on what works for tackling FGM, child abuse linked to faith or belief, and breast flattening.

The NFGMC model combines specialist social work input and direct work with children and families where there is a safeguarding concern; community outreach; a knowledge hub for national sharing of learning; professional development and training; and, conferences and workshops.

Referrals to NFGMC have more than doubled compared with 2017-18<sup>64</sup>. More than 87% of service users (parents and children) referred to the Centre in 2018-19 were from ethnic minority communities, and from 60 different countries of origin. Since the Centre's brief has expanded to include child abuse linked to faith or belief, there have been more referrals where boys were the main subject of the referral.

NFGMC work in 2018-19 has included:

- Extension of social work services from **three to eight local authorities**<sup>65</sup>
- Involvement in **86 specialist social work cases**, including 51 Section 17 ('child in need') assessments<sup>66</sup> involving 70 girls, and 19 Section 47 enquiries<sup>67</sup> about 43 girls
- Providing a **community impact report to the sentencing judge** in the case of the first ever person convicted for FGM in the UK
- **Collaborating with community organisations** to deliver community events in relation to topics such as FGM, Breast Flattening and Abuse Linked to Faith and Belief, attracting attendance of women from a range of counties such as Eritrea, Sudan, Egypt, Iran, India, Indonesia and Djibouti, and Iraq

**87 per cent**  
of service users  
(parents and  
children) referred to  
the FGM Centre in  
2018-19 were from  
ethnic minority  
communities,  
and from  
60 different  
countries of  
origin



**Extension of social  
work services from  
three to eight local  
authorities**

**86**  
specialist  
social work  
cases

64 This is at least in part due a reflection of the increase in the number of staff at the Centre, and the increased number of local authorities worked with.

65 Essex, Hertfordshire, Thurrock, Redbridge, Brent, Harrow, Staffordshire, Stoke on Trent

66 Section 17 of the Children Act 1989 imposes a general duty on local authorities to safeguard and promote the welfare of 'children in need' in their area

67 Section 47 of the Children Act 1989 requires investigation by local authorities where there is 'reasonable cause' to suspect that a child who lives, or is found, in their area is suffering, or is likely to suffer, significant harm.

- Provision of training to 2,263 staff across England, Wales, Scotland and Northern Ireland – with additional 2,149 professionals being reached through conference presentations by NFGMC staff.

As a national centre with international aspirations, the NFGMC has a wide digital reach. Over 2018-19, the NFGMC website ([www.nationalfgmcentre.org.uk](http://www.nationalfgmcentre.org.uk)) had 52,756 page views, from 18,868 users across 135 countries, with 75% of users from the UK. The Knowledge Hub component of the NFGMC is becoming an integral 'go-to' source of information.

### Analysis: Care applications

At the end of Child in Need assessments in England in 2017-18, there were 940 instances of FGM identified, and 1,630 instances of child abuse linked to faith or belief.

If the relationship between the numbers of Section 47 enquiries and the number of care applications is calculated, it is possible to estimate the expected number of care applications which would be dealt with when the NFGMC's social workers handle Section 47 enquiries.

In England, in 2018, there were 166.9 Section 47 enquiries per 10,000 child population and 12.2 Care applications per 10,000 child population<sup>68</sup>.

Using this data and the number of Section 47 enquiries/number of girls involved in Section 47 enquiries we can calculate that we would expect between one and two girls to be subject to care applications. **None of the Section 47 cases the NFGMC have worked with have resulted in girls going into care.** It is not possible to draw conclusions on the basis of one year of data, but we will continue to monitor this work and see if there are any emerging patterns over time.

68 DfE (2019) Local authority interactive tool. User guide accessible at: [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/822110/LAIT\\_user\\_guide\\_2019.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/822110/LAIT_user_guide_2019.pdf)

### Analysis: Preventative cost savings

In 2018-19, analysis was undertaken to *explore the estimated savings to the state that arise as a result of the Centre's work to prevent new cases of FGM*.

The study looked at three categories of cost saving<sup>69</sup>:

- Savings to the **health service** arising as a consequence of post-FGM physical and mental health support *not* being required (because the Centre has prevented FGM from occurring), across two sub-categories:
  - Cases where an FGM Protection Order (FGMPO) was put in place
  - Cases where there wasn't an FGMPO, but where the Centre believes there was a genuine risk of FGM occurring in the absence of their work. This includes, for example, siblings of the girls to which an FGMPO relates.
- Savings to **local authorities** as a result of children *not* being taken into care following FGM
- Savings to the **legal system** as a consequence of FGM-related court proceedings *not* occurring.

It is important to recognise that this approach unavoidably has its limitations. Of course, the preventative work of the Centre could (and almost certainly will) have longer-term benefits for the women concerned, but those benefits cannot be quantified here.

Using a cost-calculator which takes all these factors into account, **the total cost-savings derived from the social work element only of the work undertaken by the National FGM Centre in 2018-19 is estimated to be approximately £530,000.**

**Total cost-savings from social work undertaken by the National FGM Centre in 2018-19**

**£530,000**

### Influencing policy and practice

In 2018-19 NFGMC participated in a range of policy and practice work, and were members of a range of groups. This has included:

- Home Office Female Genital Mutilation Stakeholder Group
- Home Office Voluntary, Community and Social Enterprise (VCSE) Strategic Forum
- Operation Limelight: Metropolitan Police and Border Force events at Heathrow and Birmingham airports
- National Working Group on Child Abuse Linked to Faith or Belief (CALFB)
- NHS England National FGM Stakeholder Group
- End FGM European Network
- Meetings with Crown Prosecution Service; Home Office Immigration and Enforcement; and, Ministry of Justice
- Provision of evidence to parliamentary Committee meetings and All-party parliamentary groups on Safeguarding in Faith Settings and FGM
- Forced marriage mandatory reporting consultation response
- Scottish consultation on legislative changes relating to harmful practices.

NFGMC work is currently being evaluated by the University of Bedfordshire, with an evaluation report expected in autumn 2019.



**Strategic Aim:**

# **Positive Futures**

**Official statistics suggest that the leading reason for children going into care is abuse and neglect. The majority are placed with foster parents, while a small proportion, are placed in residential care or with relatives under 'kinship care' agreements.<sup>70</sup>**

Recent research shows that children in care can have good experiences and overall positive outcomes (e.g. in education, social, physical and sexual health)<sup>71</sup>. When the right support from carers, social workers, and support services is provided, children in care can thrive, despite a difficult beginning.

However, official data<sup>72,73</sup> continues to show that, overall, care leavers are still much less likely than their non-care experienced peers to be in education, employment or training, more likely to be involved in the youth justice system, experience mental health and emotional challenges, or experience homelessness and social isolation.<sup>74</sup>

Every year, around 10,000 young people leave the care system, and in total, there are over 40,000 care leavers aged 17-21 in the UK.<sup>75</sup>

We know that the experience of leaving care can be a really difficult transition, one where *“some move on successfully, others merely ‘get by’ and some face considerable struggles”*<sup>76</sup>. Poor transitions can also potentially undermine any positive impacts that being in care has brought.<sup>77</sup>

Available support often falls short of preparing and supporting care leavers throughout the transition and onwards. As such, many feel ill-prepared and struggle with the realities of life beyond the care system.

Research suggests there are additional challenges for other marginalised groups of care leavers including refugees/ unaccompanied asylum seeking children, black and other minority ethnic care leavers, and those with physical or learning disabilities.<sup>78</sup>



**Every year, around 10,000 young people leave the care system**

**There are over 40,000 care leavers aged 17-21 in the UK**

70 Department for Education (2018) Children looked after in England including adoption: 2017 to 2018. Main report [Online] Available at [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/757922/Children\\_looked\\_after\\_in\\_England\\_2018\\_Text\\_revised.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/757922/Children_looked_after_in_England_2018_Text_revised.pdf)

71 C.f. Burch, K., Daru, J. and Taylor, V. (2018) Analysis of outcomes for children and young people 4 to 5 years after a final Care Order, report number 29/2018 [Online] Available at: <https://gov.wales/statistics-and-research/analysis-outcomes-children-young-people-4-5-years-after-final-care-order/?lang=en>; Children's Commissioner for England (2015) State of the Nation: Report 1 Children in Care and Care Leavers Survey. [Online] Available at [https://www.childrenscommissioner.gov.uk/wp-content/uploads/2017/06/Care-monitor-v12\\_1.pdf](https://www.childrenscommissioner.gov.uk/wp-content/uploads/2017/06/Care-monitor-v12_1.pdf)

72 Department for Education (2018) op cit

73 The term 'care leaver' is a legal term that has a strict definition (concerning the length of time a person is looked after for and their age), and those who meet the criteria are eligible to support from their Local Authority up to the age of 25 (The Children and Social Work Act 2017 introduced a new duty on local authorities, to provide support through a Personal Advisor, to all care leavers up to age 25, if they want this.) The statistics therefore mask the higher number of 'care experienced' young people who do not meet the strict criteria, but who have been in the care system at some point in their lives and who might benefit from extended support.

74 C.f. NAO (2015) Care leavers' transitions to adulthood. [Online] Available at <https://www.nao.org.uk/wp-content/uploads/2015/07/Care-leavers-transition-to-adulthood.pdf>; Baker, C. (2017) Care leavers' views on their transition to adulthood: a rapid review of the evidence. [Online] Available at <https://coramvoice.org.uk/sites/default/files/999-CV-Care-Leaver-Rapid-Review-10%20%28004%29.pdf>; Who Cares? Scotland (2016) Outcomes for care experienced children and young people. [Online] Available at [http://www.parliament.scot/General%20Documents/CEYP\\_outcomes\\_06.16.pdf](http://www.parliament.scot/General%20Documents/CEYP_outcomes_06.16.pdf)

75 Department for Education (2018) op cit

76 Baker C (2017) *Care leaver transitions: Strategic Briefing*. Dartington: Research in Practice.

77 ibid

78 Stein, M. (2006). Research review: Young people leaving care. *Child & family social work*, 11(3):273-279.

It is important to recognise that – at all ages – there is diversity in the experiences of children and young people going through the care system. Some enter early while others come into care later. In addition, some children experience stable placements, while others may move multiple times and experience inconsistency in support. Care leavers are also not a homogenous group; and *“becoming ‘looked after’ is just one aspect of a complex identity and experience”*.<sup>79</sup> Many care leavers will thrive in whatever they choose to do; as parents, as students at college, or in their career.

In 2018-19 we worked with 7,700 children in care and 3,500 care leavers, across our services.

- 24 per cent of children in care, and 27 per cent of care leavers we supported were recorded as having a disability
- 38 per cent of the female care leavers and 10 per cent of the male care leavers we supported were young parents.

Given our extensive experience of working with children, young people, and families, we believe Barnardo's has the expertise and resources to make the care journey better. That is why we have chosen 'Care Journeys' as a priority area; focusing on improving the lives of children in and leaving care.



**38 per cent of the female care leavers and 10 per cent of the male care leavers we supported were young parents**

**In 2018-19 we worked with:**

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**24 per cent**  
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**3,500**  
care  
leavers

**27 per cent**  
of care leavers we supported were recorded as having a disability

## Our objectives for Children In and Leaving Care

Barnardo's plans to transform the care journey so that young people who have been in care get the love and support they need to thrive.

We recognise that there is room for improvement at each stage of the care journey. One of our key priorities is to reduce the gap between the proportion of care-experienced and non-care experienced young people in employment, education or training. Doing this means making substantial changes, for example to the number and quality of opportunities available to care leavers, and requires us to work at a strategic level with local authorities.

However, we know that being in employment, education or training may not be a priority for some care leavers. We want to tailor support to the immediate needs *and* long-term aspirations of each individual. Our package of provision therefore also includes support around housing, mental health and wellbeing, linking with other services, and support for young parents.

Up to 2025, we will work hard to improve the care journey at a systems-level, while continuing to deliver effective and person-centred services. The voice and experiences of young people in and leaving care remain at the centre of what we do.

## Our approaches

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Our network of advocates helps ensure children in care are aware of their rights and entitlements...

We have services throughout the UK supporting care experienced young people.

Our support for young people leaving care includes services such as: help with accommodation; mental health and wellbeing support; and employment, training and skills. We help care leavers make the transition from care to living on their own, or in supported living.

In addition to our highly-regarded fostering and adoption services, we also have a network of Independent Visitors who volunteer to be there as a constant support to children in care, and can help them get involved in activities they enjoy, encourage them to pursue their goals, or just be there to listen and provide advice. Additionally, our network of advocates helps ensure children in care are aware of their rights and entitlements, and hold other professionals in the child protection system to account.

# Case Study: Adoption

A couple, Sally and Mark, contacted Barnardo's about becoming foster carers as they felt the organisation would be more receptive to looking beyond their deaf status. In response, Barnardo's accessed an independent social worker (ISW) who was also deaf and interpreters throughout the assessment period. Barnardo's then funded a Deaf Parenting Training course.

A local authority expressed an interest for a child called Samantha. The couple and Barnardo's attended a Child Appreciation Day with an interpreter. Samantha was placed with Sally and Mark and the ISW remained involved throughout.

Prior to the placement, Samantha was felt to have learning difficulties and might never be able to walk. At the last review meeting, Samantha had developed speech, is walking, and was developing well beyond expectations.

Samantha has benefitted by being with a couple who are deaf, as they were able to quickly recognise her body language. Samantha is said to be bi-lingual (British Sign Language and English). Later on, reports were sent to court and an adoption order was granted. A Celebration Hearing was held with an interpreter.

Sally and Mark reported that they have always felt supported by Barnardo's, and feel that the organisation has looked beyond their deafness.





## Case Study: Fostering

Sue and John have been foster carers for Barnardo's East Midlands Fostering service for 14 years. They also have a son who they adopted at the age of 11 and who is now in his 30s. During their time as foster parents, Sue and John have cared for three children and young people on a full time basis, as well as providing short break support for two other young people. When Sue and John take a foster placement they make a long-term commitment to the children.

Sue and John find ways to help children learn to trust them, feel safe, and know they are loved, valued, and cared for. Alongside this, Sue and John value and accept the children's history and birth families; they promote and support contact both practically and emotionally. Mark first met Sue and John just before Christmas 2005, at the age of 10, a meeting he fondly remembers.

Mark had been having a tough time – separated from his sisters and birth parents and with a string of broken down foster placements – he wasn't sure what to expect from the meeting. For the first year of his placement with Sue and John, Mark would take a very heavy rucksack to school, it contained all of his 'precious things'. He took them with him in case someone came to collect him from school and move him to another foster home; the day he left the rucksack at home was a real breakthrough.

Mark still lives with Sue and John now, who he calls Mum and Dad, and is a very much loved and important member of the family. Outdoors-loving Mark recalls many expeditions exploring the nearby area and indulging in his obsession with frogs, spending hours building dens in the garden, and digging huge holes in the sand during beach holidays.

Mark is now 24 years old, working, and remains very much part of the family. He says he has enjoyed a wonderful childhood as part of Sue and John's family and can't imagine life any other way. Mark supports other children placed with Sue and John, acting as a role model and mentor.

## Co-design with children, young people, families and commissioners

### Strategic partnerships

We are working with two local authorities in England, Plymouth and Brent, to strategically transform the care journey experience for children in and leaving care up to 2025. Over the last year we have been undertaking discovery research to inform an innovative service design process. The aim of the strategic partnerships are to co-create transformational changes to care journeys so that children and young people with care experience have the same, if not better, outcomes, as non-care experienced peers. Using this approach we focus on gaining a deep understanding of the problem before thinking about designing solutions. As much as possible, we will pilot different initiatives to test and learn what works in the local context, while keeping young people at the heart of everything we do. We are focusing on 'positive destinations' as a key outcome for care experienced young people, which includes sustaining engagement in employment, education or training, raising a family, or any other activity where a young person is using their time meaningfully, and is looking forward to the future. Care experienced young people are not a homogenous group, so what success means will be different for each individual. We recognise that there are barriers and enablers to reaching 'positive destinations' at many levels, with enablers including supporting local employers, and ensuring children in care have stable care journeys. This is why we are taking a partnership approach, recognising the range of roles that different stakeholders can play in improving young people's lives.

The Tavistock Institute will be evaluating our Care Journey strategic partnerships, to help us understand the value of this partnership approach.

Barnardo's has also partnered with Leicestershire County Council to co-design local social care services for children, young people, and families in Leicestershire, with a focus on providing support to young people on the edge of care, and for those placed in care. By working in partnership, we aim to enhance these critical areas of our work. The 'innovation partnership', of up to ten years, covers the whole system, from the point of entry into children's services through to leaving care, supporting services to deliver the best outcomes for children and young people, and to manage demand.

The partnership is being evaluated by the Institute of Applied Social Research (IASR) at the University of Bedfordshire.

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Using this approach we focus on gaining a deep understanding of the problem before thinking about designing solutions.

## Triangles – putting experts by experience at the heart of creating change

Barnardo's recognises that care experienced young people have invaluable expertise and knowledge about the care system. A priority for our 'care journeys' work is to empower our experts to speak up about their experiences and be supported to make transformational changes to the care system.

We created a programme we called 'Triangles' to give experts the skills and platform they need to instigate changes to the care system. In the pilot year, 2018-19, eight 'Triangles' from across England and Scotland came together, each made up of two young people with care experience ('experts'), and one practitioner ('worker') who they have a good relationship with.

Triangles set and worked towards 'missions' to create transformational changes in their local areas, supported by personal missions around self-development. The ambition is to identify and invest in those missions that can evidence their potential to create sustainable, meaningful change to the care system, resulting in better outcomes for care experienced young people. This pilot year has focused on selecting, refining, and working on care journey missions.

The group came together for a series of residentials, to work on a range of skills and to create and share their action plans for change. As a result, the **outcomes young people reported experiencing** were:

### **A sense of common purpose,**

being with a group of young people who have had similar experiences and are equally passionate about changing the system

### **Having a space for challenging, and learning about themselves**

and others; overcoming fears, and feeling the support of the group around them, proving that they can overcome challenges that at first seemed impossible

### **Developing stronger relationships with their workers,**

which has changed the way their needs are understood and supported outside Triangles

### **A meaningful use of time**

– for some experts the residentials provide relief from routine and gave them something to look forward to

“I come on this course because I was fed up of waking up to fall back asleep every day, so I thought this was a chance to do something new...On the last residential I had things, like personal things that happened, and I felt like I didn't want to come back to this one...but...being here now, I'm happy I came. It's been a different experience to last time and it's been an even better experience. I've made four new friends since I've been here – that I didn't even know existed – so that's made me happier. I've managed to get someone to come out of their comfort zone and actually be better in himself so he feels like he actually has a friend now as well and obviously I've added him on Facebook. I feel much more of a better person because I've actually gone and done something and I've stuck to it...I've actually stuck to it thick and thin”

(Expert, 22 years old)

### Progress on missions

Since launching the programme in November 2018, Triangles have:

- Begun working with a charity in Manchester to form an emotional health and wellbeing group for care leavers
- Gathered research on the need for an app with information on activities for care leavers in Bristol, in order to reduce loneliness and isolation
- Put forward a case for free bus travel for care leavers to the Lead Member for Children and Wellbeing in Cornwall Council, opening up job and learning opportunities

- Provided training to welfare officers, tutors and the head of Sandwell College, offered drop-in sessions for care leavers to help with entitlements, emotional support and a safe space. This Triangle is developing a model and rolling this out to more education providers in their area
- Designing a mental health resource for experts in Lancashire with self-care tips, signposting and a game created to support conversations about mental health.

Young people have been supported to complete personal missions, such as:



**Getting apprenticeships**, jobs, and securing places on training programmes



**Volunteering with local charities**, including Barnardo's



**Recording podcasts and writing blogs** to raise awareness about their experiences and issues they care about



**Securing funding for driving lessons** and campaigning for them to be part of local offers to care leavers, in all areas



**Giving evidence to an All-party parliamentary group** on financial education for care leavers



**Speaking at the House of Lords about their journey**, the support they got from Barnardo's and the Triangles project



**Gaining a place as a judge** for the next Community Cares National Social Worker of the Year Awards.

**Experts and workers identified that time, funding, and the right relationships were key to the success of their missions.**

### Key learning

This pilot year has acted as an incubator phase for supporting promising missions for transformational change, and empowering experts to achieve their missions.

Experts and workers identified that time, funding, and the right relationships were key to the success of their missions. Some expressed anxiety about completing often complex missions by the end of the year. As a result, we are developing ways of supporting experts past the 12 month mark.

Not all experts were ready to start working on their missions when they came on board; some faced significant challenges that either disrupted their attendance at residentials, or affected their ability to commit time to working on their missions. This has been a key consideration for the design of Triangles year two.

We had set out to work on three missions; a personal mission for every expert, a care journey mission for every Triangle, and a programme-wide mission to shape Barnardo's offer to the Care Leaver Covenant. The limitations on time became evident and taking feedback on board, the focus was kept primarily on local and personal missions.

### Next steps

Triangles has begun recruiting for its second year, with experts from the pilot year signing up to be involved in the design and delivery of programme, as well as registering to be volunteers for Barnardo's.

We will support those missions that show greatest evidence of potential to transform the care system in a local area, and aim to capture what has changed and how, so we can roll out the most promising missions more widely.

We are continuing to support experts on their personal missions through Triangles Tracks, offering five pathways to participation, depending on what the expert feels is right for them.

Experts and workers shaped this pilot year. Supporting them in this way has sharpened our learning about what changes are needed in the care system. We will continue to test new ways of working with experts to achieve transformational and meaningful change.

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## Lincolnshire Care Leavers – Listening to young people

### **Barnardo's provides support to care leavers aged 18-25 years old in Lincolnshire, although some of these young people are in placements as far away as Somerset, London and Merthyr Tydfil.**

We offer support to care leavers depending on what their level of need is. Most often, we visit young people, talk about their hopes for the future, and plan how we can get there together. We offer practical advice and guidance around housing and tenancy support skills, helping young people navigate often complex rules and regulations around their accommodation.

Our 'supported lodgings' provision<sup>80</sup> gives young people the opportunity to develop independence skills whilst living in a home environment. Advice and guidance is offered in relation to cooking, undertaking household tasks and maintaining their education or employment.

Leaving Care Workers continue to help young people access careers advice, information and guidance via colleges and universities. Specialist workers offer bespoke support to young people in attaining qualifications, offering advice on money management (e.g. setting up savings accounts and troubleshooting tax issues), applying for grants and bursaries, and most importantly providing praise and encouragement and celebrating young people's successes.

We work alongside colleagues in the Local Authority's Participation Team to capture the

views and experiences of children and young people in care and care leavers. We do this through regular meetings, events and awards. For example, regional meetings (called V4C) are held and every quarter a regional meeting is convened (called 'The Big Conversation'). We also co-facilitate an annual awards event in June called the F.A.B Awards. The service contributes to a stakeholder engagement group and every quarter we produce information called 'You Said We Did' which are often turned into posters that are displayed in our services. This means the voice of young people in and leaving care is heard loud and clear.

The Lincolnshire Leaving Care Service works with a number of Unaccompanied Asylum Seeking Young People who have Care Leaving Status. At present within Lincolnshire a decision has been reached to no longer support Care Leavers who have received an Appeal Rights Exhausted decision from immigration services. The Leaving Care Service have worked alongside Lincolnshire County Council to advocate on behalf of young people and also ensure a fair assessment process is in place for these young people.

80 Young people live with providers as lodgers – paying rent and a contribution towards utilities and food.

## Case Study:

# Lucy

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Our consistency and 'stickability' helped us develop a good understanding of the support she needed.





**Barnardo's has been supporting Lucy through our programme called 'Discovering Your Potential', a service to help care leavers into employment, education and training. Lucy has mild learning difficulties and suffers with anxiety, which has been a persistent barrier for her socially and practically.**

When we first met Lucy, she was living with her boyfriend who was her only source of support. She was not working and preferred to stay at home, due to her anxiety. She felt unable to do things without him by her side.

We met Lucy every week at her flat, and began to build a relationship with her. We showed her that we believed in her abilities, and had faith that she could reach her goals. Our consistency and 'stickability' helped us develop a good understanding of the support she needed. She told us she would be interested in early years education, so we contacted a training provider in this area and supported Lucy to meet them and start their training course. She thrived on the course and progressed on to work in a local nursery in her town.

Lucy's confidence grew steadily as she enjoyed earning and contributing to the household. Deciding that childcare was definitely the career path for her, she enrolled at college and started her National Certificate Course in Early Education and Childcare, while continuing to work.

Recently, Lucy's relationship broke down and she was almost homeless. However, by continuing to support her we were able to put a new support plan in place which helped her to remain in work and at college. Lucy is now in a new home and successfully managing her own tenancy.

## Outcomes

### Fostering and adoption

As the largest not-for-profit fostering agency and voluntary adoption agency in the UK, Barnardo's continues to offer support to the most vulnerable children and young people in care. We support a range of families, carers, and adopters, who are trained to meet the needs of children and young people, who may have experienced one or several of the following – loss and trauma, abuse, neglect, sexual exploitation or trafficking. Our carers and adopters care for sibling groups, disabled young people, and those from BAME communities.

With over 150 years' experience, our services know what works in providing support and training to carers, adopters, and their families. Since September 2018, Adoptionplus, a pioneering adoption agency which helps place some of the most vulnerable children with families, has been run in partnership with Barnardo's.

Adoptionplus, who entered a partnership with Barnardo's in 2018, is a relationship-based organisation that takes a long-term approach to the adoption of children who have suffered high levels of trauma. They offer a comprehensive Therapeutic Adoption Placement service which is an alternative to long term foster care or residential care. They recruit, prepare and approve parents who are interested in children considered harder to place, where a typical adoption placement is not considered feasible by the local authority. This model allows Adoptionplus to have control over both placement and additional support meaning they can take a long-term perspective, providing support when it's needed, and has contributed to Adoptionplus having no placement breakdowns to date, for the 22 children it has placed. Cost-benefit analysis suggests that the service delivers government savings between £6 and £34 for every £1 spent on adoption placements with Adoptionplus.

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With over 150 years' experience, our services know what works in providing support and training to carers, adopters, and their families.

### Education, Employment and Training

#### Building Hope Academy

We have established the Building Hope programme to support care leavers across five south London boroughs who are not in education, employment or training. This is a multi-agency partnership comprising Barnardo's, Saint Gobain, Barking and Dagenham College, and Phoenix Housing.

Saint Gobain, a prominent international construction company, have worked with us to develop The Future Place Academy in Lewisham, which won the Third Sector business charity award this year for exceeding expectations in delivering transformative outcomes for young people.

Each care leaver is assigned a coach that will sit down 1:1 with them to fully understand the challenges they are facing and help them identify their hopes and aspirations for the future. Through our tailored support we ensure that young people are supported

and grow in skills, confidence, and ambition that enables them to find work and pursue a career. Our coaches also support young people to prepare for the world of work through a combination of 1:1 coaching, group skills sessions, and key employability activities. These sessions help young people gain confidence and life skills, write a CV, prepare for job interviews, overcome challenges, and achieve their ambitions.

The Academy supported 41 care leavers (above our target of 30 per year) to gain confidence, skills, and ultimately a construction qualification. We worked with Saint Gobain colleagues to design the 16-week course, which supports care leavers to also gain English and Maths qualifications, alongside receiving holistic support from Barnardo's. Saint Gobain provided site visits and work placements for young people to gain practical experience of working in the construction industry. In addition, the Academy provides: breakfast and lunch, support to maintain tenancy, secure accommodation, access to financial assistance, and, free personal protective clothing.

By the end of the course, nearly half (20 young people) secured qualifications, and 18 (44 per cent) secured a positive outcome such as getting a job.

Saint Gobain colleagues raised over £200,000 to fund the Academy. They also provide important access to employers via their networks, and provide practical and financial resources towards the project. Barking and Dagenham College provides trainers and course accreditation, as well as access to bursaries and discretionary funds. Phoenix Housing provides input and support on tenancy issues. Without this partnership approach and a flexible model that supports care leavers in a holistic way, the partnership is unlikely to have achieved the outcomes it has to date. We believe that by working together, partners have been able to be open and honest about challenges, and work together to find and implement solutions.

Feedback from both referrers and care leavers has been positive.

**“It raised their confidence and self-esteem, gaining qualifications, socialising and engaging, developing a sense of belonging, raising their aspirations, time management, coming out of their comfort zone, making new relationships, gaining new skills and knowledge.”**

Professional, referral agency

**By the end of the course, nearly half (20 young people) secured qualifications**

“In the beginning it was hard but through the course with the support it got a bit easier and I will be able to complete the course. Getting up in the morning was a hard task but it’s worth it in the end.”

Student, aged 18

### Supported Lodgings

Supported lodgings services offer accommodation for young people leaving care, or facing homelessness. In supported lodgings placements, young people can learn essential skills in a safe environment, to help them on their way to living independently.

We use a measurement tool called Young Person’s Star to agree what level of need a young person may be at, across eight domains.<sup>81</sup> These are measured on a scale from young people feeling ‘stuck’ – where they need lots of support and guidance, to ‘independent’, where they are confident and capable, and need little, if any, extra help.

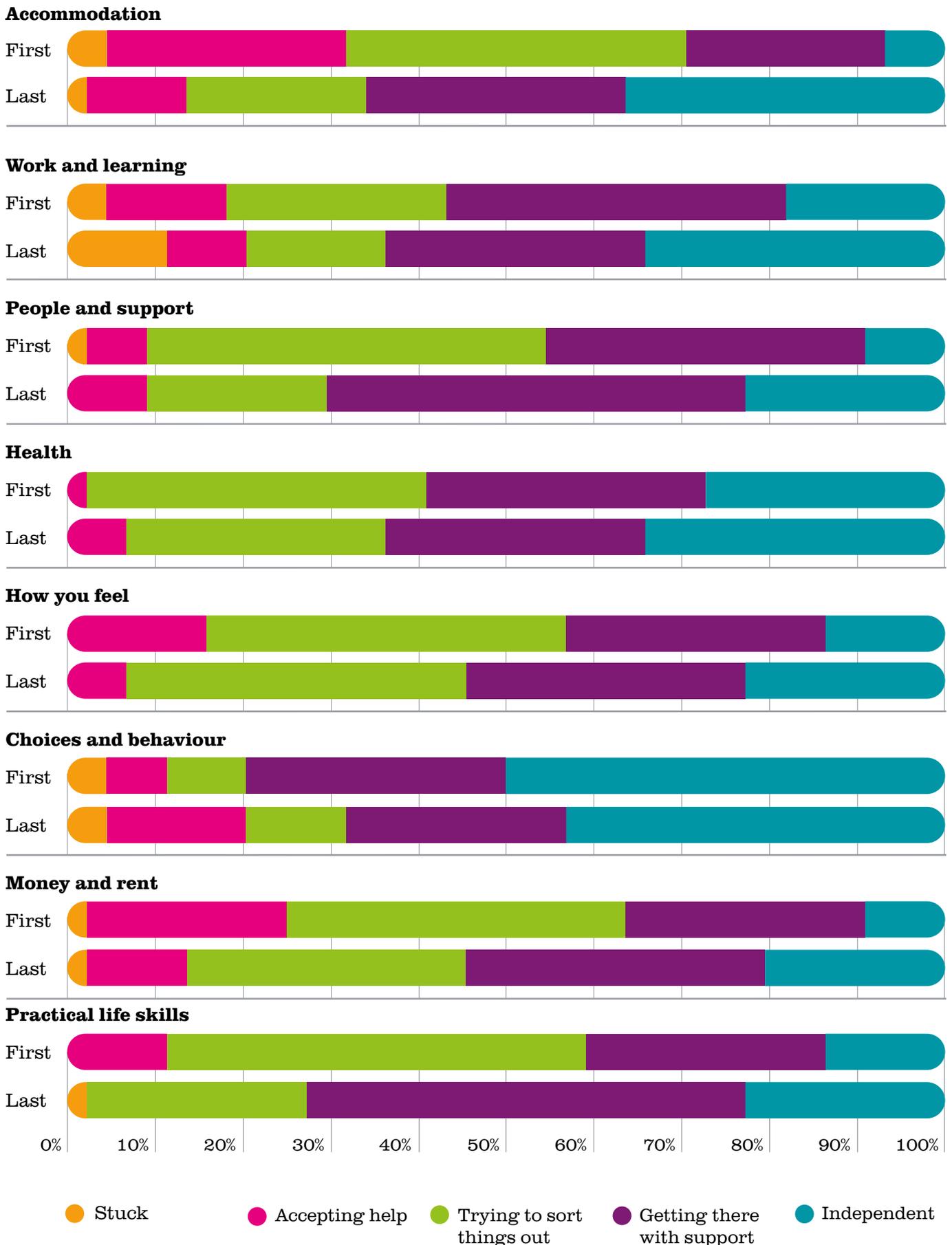
Most young people in our supported lodgings services, where outcomes are recorded using Outcome Star, require support because they are leaving care (43 per cent), have experienced abuse or exploitation (41 per cent), are homeless/temporarily housed (36 per cent), or are refugees/seeking asylum (20 per cent).<sup>82</sup>

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81 Outcomes Star is a tool developed by Triangle Consulting for supporting and measuring change when working with people. Young Person’s Star is the version that has been developed for use with care leavers and other young people experiencing homelessness who are moving to independent living. For further information, see [https://www.staronline.org.uk/star\\_mock\\_homepage.asp?section=838](https://www.staronline.org.uk/star_mock_homepage.asp?section=838)

82 This data is based on four of our supported lodgings services

**Figure 4.0:** Outcomes for young people in four Barnardo’s supported lodgings services, 2018-19. n=44



### **Key findings**

The findings show that supported lodgings consistently helped care leavers with confidence and making progress towards feeling more independent.

- In terms of accommodation, most young people started coming to Barnardo's feeling like they were 'trying to sort things out' (17), by the time of their last recording the majority were 'independent' (16). This was the domain we saw the most noticeable improvement in; from three young people feeling 'independent' at first recording, to 16 feeling independent by the time of their final recording
- At first recording, the majority of young people in this sample were 'trying to sort things out' (20) in terms of people and support. By the last reading, the majority were 'getting there with support' (21)
- Similarly with regard to practical life skills, the majority started out 'trying to sort things out' (21), and by last recording had moved to 'getting there with support' (22)
- In terms of choices and behaviour, fewer young people felt that by their final recording they were able to manage this independently (22 at first, 19 at final recording), and more moved to 'accepting help' (3 at first, 7 at final recording). This indicates that by working with Barnardo's supported lodgings they became more aware of their need for support around choices and behaviour, compared to when they first came to Barnardo's, and were more willing to accept help on this aspect of their wellbeing.

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The findings show that supported lodgings consistently helped care leavers with confidence and making progress towards feeling more independent.

## Influencing wider policy and practice

In November 2018, we convened a national conference to review the extension of Personal Adviser (PA) support to care leavers in England, to ensure care leavers can receive services up until they are 25 years old. Speakers presented learning from their areas and shared examples of best practice.

### Giving evidence to Parliament

The latest inquiry of the All-party parliamentary group on financial education specifically focuses on how well prepared care experienced young people are in managing their own financial affairs. As part of this inquiry one of our Triangles experts was invited to parliament to give evidence directly to MPs. They were able to provide a detailed overview of their own experiences of financial education and how support in money management could be improved so that young people are better prepared for independence when they leave care. A case study detailing the experiences of one of Barnardo's care leavers is highlighted in the final report of the all-party group.

### The Independent Care Review

The Independent Care Review was commissioned by the First Minister of Scotland as a 'root and branch' review of the care system. Barnardo's Scotland was first involved in the Review during the discovery phase, when we facilitated children, young people, and staff from across the organisation to contribute their views on their experiences of care, and propose priorities for the Review.

During 2018-19, the Review entered its 'journey phase', and a number of working groups were created to look at issues in more depth. Barnardo's Scotland was invited to put forward a member of staff for the group looking at Love, and a care experienced person for the group looking at the Edges of Care.

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**It is a great privilege to be at the heart of this process, and gives us a significant opportunity to shape this work...**

Love is at the heart of the thinking of the Care Review, and is likely to be one of the most ground-breaking elements of the Review's recommendations. It is a great privilege to be at the heart of this process, and gives us a significant opportunity to shape this work, ensuring that discussions include the views and experiences of practitioners with many years of experience, alongside the voices of care experienced people.

## Wider learning on achieving Positive Futures

**Our other services working towards positive futures include our wider Employment, Training and Skills support and our youth work including youth justice work.**

### Barnardo's Employment, Training and Skills

Gary grew up in North Tyneside. He attended a school for children with learning difficulties, and went on to study Maths, English and Employability skills at college.

After his course finished, Gary was referred to Barnardo's, where our training support services helped him secure a work experience placement in a retail outlet. While he didn't decide to pursue this as a career, it helped him gain skills and experience in customer service.

By providing an environment that supports young people to try different things and change their interests without being set back, we helped Gary explore his interests. He decided to try his hand at painting and decorating.

Gary has been a great success with the team where we helped him secure an apprenticeship in Gateshead. The skills he gained in the retail course have given him the ability to deliver great customer service, and he has settled in well among his new colleagues.

Gary feels he has grown not only as a person, but as a painter and decorator. He said, *"I have developed my confidence and learnt a lot of new skills I never thought I would be able to."*

Gary has secured a full time job as a Painter and Decorator since completing his apprenticeship.

**I have developed my confidence and learnt a lot of new skills I never thought I would be able to."**

### make trax

make trax equips young people with the skills, confidence and ambition to pursue their goals of finding employment, further education, or training. We run this programme in partnership with Asphaleia, Gingerbread<sup>83</sup>, and The Princes Trust across a large geographic area in the south of England. It is funded by the European Social Fund.

We have focused our provision on young people facing complex barriers, who we know need additional support to achieve their dreams and ambitions. This includes care leavers (17 per cent of the cohort, with a further 17 per cent still in care), and young people with mental ill-health (35 per cent of the cohort).

<sup>83</sup> Gingerbread provide specialist support to lone parents and assist them to get back into the world of work or provide skills to help them search for relevant jobs after time away from employment caring for children

We do this through a tailored package of support to meet individual needs, including:

- one-to-one work to understand a young person’s needs and ambitions
- group sessions to develop skills needed in the workplace
- CV clinics
- job interview preparation
- activities to increase confidence
- work placements.

We know there are many barriers that young people furthest from the job market face, which is why we also help with costs like childcare, travel, and other expenses.

In 2018:



**of participants felt they were more confident in making informed choices regarding education, employment and training after attending the make trax programme**



**of participants said they had improved their communication skills since completing the make trax programme**



**of young people felt make trax had supported them to become more work ready.**

*Progression Outcomes for 2018*

Number of participants who move into education or training after leaving make trax	<b>49</b>
Number who move into employment, including self-employment, after leaving make trax	<b>28</b>

make trax has been pivotal in assisting parents with childcare costs, travel assistance, and funding for the course. Single parents often experience difficulty in accessing opportunities in their area due to lack of childcare facilities, non-family friendly hours of groups/education establishments and location, but due to the support provided by make trax, parents now have a wider

choice of opportunities to attend. Our flexible approach is crucial in effectively engaging participants, as we are committed to understanding individual needs and circumstances. One of the successful aspects of the make trax programme is the strong local presence of the partnership with accessible venues and staff that respond to local needs.

### **Pain inducing techniques in secure estates**

Edward Argar MP, on behalf of the Government, commissioned an independent review into the use of techniques which deliberately induce pain during restraint in the under-18 secure estate. Barnardo's provided a statement to the independent review which emphasised that the use of pain inflicting techniques on children in secure training centres, Youth Offending Institutions, and in their transport should be stopped. We also recommended that the Ministry of Justice issue clear guidelines in relation to independent monitoring of restraint and the techniques applied in order to help support the understanding of roles and responsibilities. All referrals of allegation should also be accepted by Local Authority Designated Officers (England)/Part 4 Chairs (equivalent roles in Wales, in line with All Wales Child Protection Procedures), and used to inform an independent robust mechanism for recording allegations and identifying and monitoring risk.

“

The make trax programme has helped me gain a lot in confidence, which has helped to put myself in social situations I'd never of put myself in before I started the programme.”

make trax participant

# **Building our Capabilities to Deliver Greater Impact**

**Our Corporate Strategy 2016-25 set out our ambition for better outcomes for more children. To achieve our new ambition, we must be proactive, efficient, and forward-thinking. We aim to do this by becoming a digital, diverse, learning organisation, so we are even better equipped to reach and support more vulnerable children.**

## Digital

To meet the challenges faced by children and young people today, and to prevent tomorrow's, we are developing new approaches to shape the way Barnardo's responds to their needs as we seek to deliver the next generation of children's social care. We do this in collaboration with practitioners, commissioners, and other external partners.

Examples include:

- delivering a prototype of 'Journey' – an app to help young people leaving care with finding information and advice on living independently, and communicating with their support worker. We are delivering this in conjunction with CareTech, and currently testing it with care leavers
- piloting a new approach with Barnardo's 4 U service in Portsmouth, Southampton, and the Isle of Wight, to provide additional support to children and young people through mobile messenger services direct with their project worker.

A significant amount of our product and service design and delivery work supports Barnardo's three Core Priority Programmes and we have developed and introduced an approach to service and systems design to benefit partnerships in Plymouth, Renfrewshire, and Leicestershire.

We have also looked at how we build capacity and efficiency across the organisation:

- building and implementing Barnardo's 'Design System', drawing on industry best practice and young people's feedback to set requirements and expectations around the quality and accessibility of all future online services created by or for Barnardo's
- establishing clear principles for co-designing services with children and young people, ensuring ethical and empowering standards and expectations are set for Barnardo's and others in the sector to meaningfully involve children in the design of services.

We're applying digital techniques to develop a new and ground-breaking approach to partnerships which we hope will provide a blueprint to transform corporate and charity partnerships of the future. The first of these, a child-centred fundraising partnership with IKEA sees Barnardo's and IKEA sharing expertise, resources, and skills, to develop innovative new projects that involve children directly and put their needs and views right at the heart of the decision making. In this way we will improve the relevance, targeting and measurability of the support the partnership provides.

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## Diverse

Equality, diversity and inclusion run through everything we do – from the way we support people, through to who comes to work or volunteer with us. We aim to make our services as accessible and inclusive as possible.

Over 2018-19, we have continued to look at ways to improve our diversity.

We have implemented a plan to ensure Equality Impact Assessment (EIA) compliance across the organisation, in order to not discriminate or disadvantage people, and identify ways to make improvements for people with a protected characteristic. In 2018-19, we undertook 14 EIA screenings, and we have seen an increased understanding of equality and inclusion.

We have increased our success rate for BAME recruitment, and attraction rates for disabled candidates. We have also become members of Purple, committing to improving our disability achievements and ambitions.

During 2018, we were awarded a silver banding – for race – in the Business in the Community Diversity Benchmark, and were an early signatory of the Race at Work Charter. We were also accredited as a Disability Confident Employer, demonstrating our continued commitment to Disability Equality.

## Learning

Learning from our experiences will make us more efficient, effective, and strategic. We take every opportunity to find new ways – and the best ways – to support more children and young people, and have greater impact.

In 2018-19, 85 per cent of eligible staff undertook three or more days learning. Our challenge now is to understand the impact of this.

As part of our Learning Organisation Programme, in 2018-19 we successfully delivered the first cohort of an Emerging Leaders Programme, with 20 participants from across the organisation taking part in the 12 month programme. The programme comprised: four cohort days, with inputs delivered by Barnardo's staff and external speakers; mentoring opportunities with senior leaders within the organisation; participation in coaching circles; and, working in action learning sets, on specific strategic areas, sponsored by a Director. We are currently recruiting for the second cohort of the programme, with evaluation of the inaugural programme informing the design and delivery of wave two.

Achieving the best outcomes for children and young people requires a confident and skilled workforce. In 2018-19, we have also therefore committed to investing in our staff and volunteers through commissioning a range of learning and support packages, including:

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**Achieving the best outcomes for children and young people requires a confident and skilled workforce.**

- **Trauma informed practice** – Barnardo's is committed to becoming a trauma-responsive organisation, effectively supporting children, young people, and families with experience of adversity and trauma. We aim to transform the capabilities of the workforce across the entire organisation, by enhancing knowledge and skills in relation to understanding and working with trauma and adversity. We want to ensure our workforce is looking after its own mental health and wellbeing, as well as that of the children, young people, and families we are supporting. To date, we have provided training to more than 400 senior leaders. Further training, for all staff and volunteers, is currently being developed and rolled out. This is supported by an online learning portal of training and learning resources on trauma and stress, with materials provided by Psychotherapy Excellence, and available to all staff.
- **Complex abuse and exploitation** – we are working with leading academics and practitioners across the sector to develop modules of core training on child abuse and exploitation. This new learning and support offer will initially be provided to staff in our abuse and exploitation services, with plans for future roll-out across all Barnardo's staff, to help develop practice across the whole of the organisation.



Our retail operation currently has **11,500** volunteers



who, in 2018, gave **2,682,235** hours of their time

In 2019

**87 per cent**

**of volunteers**

**agreed they receive support and encouragement from staff/colleagues**

## Volunteers in our shops

Volunteers play a vital role in our work. Our retail operation currently has 11,500 volunteers, who, in 2018, gave 2,682,235 hours of their time to support our stores, subsequently helping to fund our frontline work with children.

We have diversified our volunteer base through exploring the range of motivations and aspirations of volunteers, whether that is the achievement of the Duke of Edinburgh Award, a desire to contribute to the community, or a personal affinity with the work of Barnardo's, and a subsequent desire to contribute.

In our 2019 volunteer satisfaction survey, the vast majority of respondents either 'Agreed' or 'Strongly Agreed' that:

- they receive support and encouragement from staff/colleagues (87 per cent)
- they feel they make a difference through volunteering with Barnardo's (85 per cent).

Barnardo's Retail provides a variety of positive outcomes to volunteers, such as learning vital skills, undertaking level two qualifications, and, gaining the confidence to work towards paid employment.

Job-seeking volunteers regularly report that giving their time at a Barnardo's store helps improve self-esteem, communication

**We are on a journey of innovation and empowerment where the most marginalised youth voices will have influence and impact.**

skills, team-working, problem-solving, organisational skills, and numeracy skills.

This year we launched a new pilot offering care leavers work experience opportunities in our stores. This is designed to provide employability skills to a new generation of care leavers, paving the way towards a better future with positive destinations.

## **The Voice and Influence of Children, Young People, and Families**

Children, young people and their families, both within and beyond Barnardo’s, are our hub of expertise, our colleagues, and our critical stakeholders. When we refresh our Voice and Influence strategy in the Autumn 2019, our ambition to work in equal partnership and collaboration with children and young people in our corporate and service settings will be apparent.

We are on a journey of innovation and empowerment where the most marginalised youth voices will have influence and impact. We believe that the result of this will be improved outcomes for children, young people, and families, because services are co-designed, co-led and co-governed. We are also developing an approach to enable Youth Colleagues to make creative and innovative contributions in partnership with corporate teams.

Amplification of these voices has the potential to improve the current safety and future protection of children and young people. The voices of our Youth Colleagues can inspire wider change to systems within governments, public services, and society as a whole.

We are becoming an organisation that:

**Supports and employs**

those with lived expertise into the workplace

**Changes what we do**

as a result of the expertise that we have both heard and listened to

**Is accountable**

to the voice of, and influenced by the views of, the most vulnerable or disadvantaged children and young people in our communities

**Is the place that children and young people want to be**

## Believe in Yourself Programme

### We launched our 'Believe In Yourself' initiative with a two-day programme in May 2019.

Around 100 young people from our services across the UK engaged in workshops designed to increase confidence, teamwork, communication and collaboration. The purpose was to develop their potential and enable them to have their voices heard, from influencing local and national bodies, to situations in their every-day lives. The programme was delivered in conjunction with Entrepreneurs In Action and young people's feedback was overwhelmingly positive. By acknowledging lived experience as expertise, increasing confidence, and

providing a platform for their voice to be heard, we are developing a network of Youth Colleagues who will ensure that Barnardo's governance, services, initiatives and campaigns are relevant and effective. A number of our Youth Colleagues have already been involved in Voice and Influence opportunities since; attending regional young people's conferences, recruiting key staff, influencing in parliament, and delivering key messages at Barnardo's annual lecture.

## Horizon Scanning

While we have an overarching strategy for our work, we are also constantly on the lookout for emerging or changing issues which (might) affect children and young people.

We 'scan the horizon' in a number of ways, drawing together insight from various sources.

We have started to capture insight from our practitioners across our services on what key issues they are seeing from their direct experiences of working with children, young people, and families. Initial analysis suggests that, over the last year, 15 per cent (68 out of 449) said they had worked with young people regularly carrying knives, 38 per cent (168 out of 442) had worked with young people coerced into criminal activity, 70 per cent (296 out of 421) had worked with families who had been referred to food banks or for welfare grants, 76 per cent (312 out of 413) had worked with children, young people or parents experiencing domestic abuse, and 97 per cent (421 out of 436) had worked with children, young people or parents with mental health issues. We are currently exploring the qualitative responses to capture the depth of insight into what's changing in terms of issues and services, causes of issues, and the impacts on children and families.

Alongside other methods of scanning the horizon, these approaches help us learn and understand. Our hope is that by identifying issues at an early stage, we can mobilise ourselves early, and better understand issues, to ensure children are appropriately supported.

### This year...

**76 per cent**

**(312 out of 413)**

had worked with children, young people or parents experiencing domestic abuse

**97 per cent**

**(421 out of 436)**

had worked with children, young people or parents with mental health issues

## Understanding and Demonstrating our Impact

Our services support children, young people, parents, and carers across a range of issues, and report to different commissioners. The needs of those we work with are often multiple, complex, and unique.

We know we can't use a top-down, one-size-fits-all indicator to measure our work. Instead, we need to identify what is important and relevant to measure for those we support.

While we can readily present figures relating to our reach – presenting the number of people we support across our services, and how this changes over time – this tells us nothing about the actual difference we are making, or what support people would receive if we were not delivering a service.

We recognise that achieving positive outcomes is only possible in partnership with those we support in our services, as well as the other organisations, communities, and systems we – and those we work with – interact within.

We want to improve, and be able to better evidence our impact, understand and learn more, and ensure our resources are allocated to create greater impact for children and young people.

We want to be able to bring our data together so we can learn what works – or does not work – across different models of support, and for different groups of children.

We recognise the limitations of our current impact measurement approaches, and the challenges we face in this; we have started to try and identify solutions to these.

Our research team are working alongside our service staff, academics, commissioners, and others, to help develop a shared understanding of how we can best evidence the changes for the children and young people we support, to develop our impact model further.

We are currently exploring how we can better capture the difference we make, including through our campaigning and policy influencing, and our strategic partnering.

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We want to improve, and be able to better evidence our impact, understand and learn more, and ensure our resources are allocated to create greater impact for children and young people.

## Looking to the future

By 2025, we aimed to be supporting 300,000 children, young people, parents, and carers a year – 25 per cent more than in 2015.

In 2017-18, we achieved this ambition, by reaching 301,100 children, young people, parents, and carers. But, our goals are not just about reaching more people. We want to ensure that we are making a positive difference to the lives of those we provide direct support to, as well as those who we don't. We strive to make the best use of our resources, to maximise the impact we have on children and families, working in partnership to achieve sustained positive outcomes.

Over 2018-19, we therefore reviewed our Corporate Strategy, and built upon our key objectives by developing six new commitments for Barnardo's to work together towards (Figure 5.0). Going forward, we will use this framework to measure our impact towards transforming the lives of vulnerable children in the UK.

**Figure 5.0** – *Corporate Strategy Additional Commitments*

## How we maximise our impact

### Commitment 1:

We will understand and build on the experiences of children and young people, their parents and carers, using our scale, knowledge and expertise to drive systems change within governments, public services and society as a whole.

### Commitment 2:

We will drive change that prevents harm and delivers long-term sustainable impact for children and young people, working with partners across agencies, communities and volunteers – including in the rapidly changing health and social care sector.

### Commitment 3:

We will invest our voluntary funds in programmes that demonstrate impact and rises to the challenges and opportunities faced by vulnerable children and young people now and in the future.

## How we maximise our resources

### Commitment 4:

We will further grow our net fundraising and retail income including broadening our supporter base and ensuring we pursue innovative opportunities.

### Commitment 5:

We will increase our efficiency and effectiveness alongside our journey to become a genuinely digital, diverse and learning organisation.

### Commitment 6:

We will engage, develop and retain our most precious resource – Barnardo's colleagues both paid and unpaid – in delivery of the charity's mission.

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...our goals are not just about reaching more people. We want to ensure that we are making a positive difference to the lives of those we provide direct support to, as well as those who we don't. We strive to make the best use of our resources, to maximise the impact we have on children and families, working in partnership to achieve sustained positive outcomes.

# Appendix

## 1. Service User Count<sup>84</sup> 2018-19

### 1.1 Total Service User Count<sup>85</sup>

	<b>Total 18-19</b>	<b>17-18 for comparison</b>	<b>Difference 18-19 – 17-18</b>
Individual Work	84,500	67,000	17,400
Children's Centre and Family Hubs	181,100	210,500	-29,400
School-Based Programmes	28,700	23,500	5,200
<b>Grand Total</b>	<b>294,300</b>	<b>301,100</b>	<b>-6,800</b>

In total we provided support to over **203,300 children and young people**, and over **76,300 parents and carers in 2018-19<sup>86</sup>**. This compares to 163,100 children and young people, and 123,300 parents and carers in 2017-18.

### 1.2 2018-19 Service User Count by parental status

	<b>Individual Work</b>	<b>Children's Centre and Family Hubs</b>	<b>School-based programmes</b>	<b>Total</b>
Child	54,600	120,000	28,700	203,300
Parent	20,300	56,000	0	76,300
Unknown parenting role	9,600	5,100	0	14,700
<b>Grand Total</b>	<b>84,500</b>	<b>181,100</b>	<b>28,700</b>	<b>294,300</b>

<sup>84</sup> A service user is anyone who had an individual case file open between 1st April 2018 and 31st March 2019 and who 'received a service' between 1st April 2018 and 31st March 2019

<sup>85</sup> Figures in table 1.1 – 1.3 are rounded to the nearest 100, totals may not sum due to rounding.

<sup>86</sup> In addition, there are 14,700 Service Users whose parental status is unknown.

### 1.3 2018-19 Service User Count by service category<sup>87</sup>

Strategic Categories 2019	Service users	Percentage Child	Percentage Parent
Advocacy, Children's Rights and Participation	7,100	83%	17%
Child Abuse and Exploitation	7,300	85%	15%
Child Protection (e.g. Domestic abuse, Intensive Family Support)	1,400	31%	69%
Disability/Health	4,800	63%	37%
Early Support	95,200	46%	54%
Education	900	100%	0%
Employment, Training and Skills	2,900	90%	10%
Family Support Services (e.g. CAPI, Young Carers)	120,800	82%	18%
Leaving Care/Accommodation Support	5,000	79%	21%
Looked After Children (e.g. Family Placement)	1,100	100%	0%
Mental Health	40,100	98%	2%
Refugee and Asylum Seekers	800	57%	43%
Youth Work (including Youth Justice)	7,400	93%	7%
<b>Total</b>	<b>294,300</b>	<b>73%</b>	<b>27%</b>

<sup>87</sup> Do not sum total service users in each service category to arrive at total 18-19 service users. This will result in double counting of service users accessing more than 1 service category.

## 2. Services

At the end of 2018-19 we were running 1,037 services.  
This compares to 1,067 at the end of 2017-18.

### 2.1 Number of services as of 31st March 2019 by region<sup>88</sup>

Region	Count Of Services
National projects	68
Cymru	93
East	166
London	82
Midlands & South West	141
Northern Ireland	104
Scotland	128
South East & Anglia	114
West	140
Unknown	1
<b>Grand Total</b>	<b>1,037</b>

### 2.2 Number of services as of 31st March 2019 by service category

Strategic Categories 2019	Count Of Services
Advocacy, Children's Rights and Participation	74
Child Abuse and Exploitation	103
Child Protection (e.g. Domestic abuse, Intensive Family Support)	26
Disability/Health	89
Early Support	151
Education	34
Employment, Training and Skills	35
Family Support Services (e.g. CAPI, Young Carers)	292
Leaving Care/Accommodation Support	72
Looked After Children (e.g. Family Placement)	35
Mental Health	64
Refugee and Asylum Seekers	3
Youth Work (including Youth Justice)	59
<b>Grand Total</b>	<b>1,037</b>

<sup>88</sup> One service is not categorised into a particular region and is labelled as 'Unknown'

### 3. Detailed breakdowns of 2018-19 service user count<sup>89</sup>

#### 3.1 Service User Count by Region

	Individual Work	School-based Programmes	Children's Centres and Family Hubs	Total 18-19	17-18 for comparison
National projects	5,000	0	0	5,000	3,900
School-based Programmes	0	28,700	0	28,700	23,500
Cymru	10,300	0	0	10,300	7,200
East	12,800	0	10,200	23,100	28,500
London	2,600	0	27,800	30,400	46,500
Midlands & South West	11,600	0	33,300	44,900	63,700
Northern Ireland	13,900	0	0	13,900	10,700
Scotland	11,100	0	0	11,100	8,100
South East & Anglia	10,700	0	90,500	101,100	81,800
West	6,500	0	19,200	25,700	27,200
<b>Grand Total</b>	<b>84,500</b>	<b>28,700</b>	<b>181,100</b>	<b>294,300</b>	<b>301,100</b>

#### 3.2 Service User Count for Children Centres and Family Hub by Region

	Children's Centres and Family Hubs	17-18 Comparison	Difference 18-19 - 17-18
National projects	0	0	0
Cymru	0	0	0
East	10,200	16,600	-6,400
London	27,800	43,900	-16,100
Midlands & South West	33,300	56,200	-22,900
Northern Ireland	0	0	0
Scotland	0	0	0
South East & Anglia	90,500	73,600	16,900
West	19,200	20,200	-1,000
<b>Grand Total</b>	<b>181,100</b>	<b>210,500</b>	<b>-29,400</b>

89 Tables 3.1 – 3.3 have service user figures rounded to the nearest 100, totals may not sum due to rounding

### 3.3 Service User Count by Service Category for Individual Work<sup>90</sup>

<b>Strategic Categories 2019</b>	<b>Total 18-19</b>	<b>Total 17-18 for comparison</b>
Advocacy, Children's Rights and Participation	7,100	6,000
Child Abuse and Exploitation	7,300	6,500
Child Protection (e.g. Domestic abuse, Intensive Family Support)	1,400	1,400
Disability/Health	4,800	5,400
Early Support	3,100	2,500
Education	900	700
Employment, Training and Skills	2,900	2,600
Family Support Services (e.g. CAPI, Young Carers)	31,700	24,700
Leaving Care/Accommodation Support	5,000	4,700
Looked After Children (e.g. Family Placement)	1,100	1,100
Mental Health	11,400	8,700
Refugee and Asylum Seekers	800	500
Youth Work (including Youth Justice)	7,400	2,500
<b>Total</b>	<b>84,500</b>	<b>67,000</b>

### 3.4 Service User Count by Demographic Information or Vulnerable Group<sup>91</sup>

<b>2018-19 Service User Count by care status</b>	<b>Individual Work</b>	<b>Children's Centre and Family Hubs</b>	<b>School-based programmes</b>	<b>Total</b>
Care Leaver	3,500	0	0	3,500
Looked after child	7,600	100	0	7,700
Not Looked After Child or Care Leaver	45,000	5,600	0	50,600
Unknown care status	28,300	175,400	28,700	232,400
<b>Grand Total</b>	<b>84,500</b>	<b>181,100</b>	<b>28,700</b>	<b>294,300</b>

90 As above.

91 Tables 3.1 – 3.3 have service user figures rounded to the nearest 100, totals may not sum due to rounding

<b>2018-19 Service User Count by ethnicity</b>	<b>Individual Work</b>	<b>Children's Centre and Family Hubs</b>	<b>School-based programmes</b>	<b>Total</b>
Asian Or Asian British	2,700	11,000	0	13,800
Black Or Black British	2,600	5,400	0	8,100
Mixed	1,900	5,000	0	6,900
White	45,000	101,500	0	146,400
Other	2,100	3,800	0	5,900
Unknown Ethnicity	30,200	54,400	28,700	113,300
<b>Grand Total</b>	<b>84,500</b>	<b>181,100</b>	<b>28,700</b>	<b>294,300</b>

<b>2018-19 Service User Count by disability</b>	<b>Individual Work</b>	<b>Children's Centre and Family Hubs</b>	<b>School-based programmes</b>	<b>Total</b>
Disabled	13,400	1,100	0	14,500
Not Disabled	42,600	49,100	0	91,600
No information	28,500	131,000	28,700	188,200
<b>Grand Total</b>	<b>84,500</b>	<b>181,100</b>	<b>28,700</b>	<b>294,300</b>

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children**  
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