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Pathways and Outcomes:

A Ten Year Follow Up Study of Children
Who Have Experienced Care

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Pathways and Outcomes: A Ten Year Follow Up Study of Children Who Have Experienced Care

Introduction

This small study traced a cohort of 19 young people who had lengthy care experience in Northern Ireland and who had taken part in an earlier study. Sixteen agreed to participate in the follow-up study. They were aged between 17 and 24 years at the time of interview. With their consent, file searches were also carried out. The study was funded by the DHSSPS and HPSS Boards.

These young people had been the subject of an earlier study of primary school aged children entering planned long term foster care placements. The cohort was drawn from the four Boards' areas and consisted of all children aged four to eleven who were being placed in new, planned long term foster placements in a seven month period between 1988 and 1989. At the time of these placements, the children had a history of considerable trauma and adversity and there were concerns about their adjustment and development. The initial study followed their progress for two years after placement (McAuley, 1996 a, b; 1998; McAuley and Trew, 2000).

At follow up, the young people were keen to share their views and pleased that the Department was interested in what had happened to them. The file searches focused upon progress and outcomes in the seven developmental areas covered in LAC review forms namely mental health, emotional, social and behavioural development, family and social relationships; education; physical health and development; self-esteem, identity, social presentation and self care skills. The interviews with the young people covered the same areas and also sought their views on their experience of care; their relationships with birth family and carers; their experience of moving from care and leaving care support and their thoughts on the Children (Leaving Care) (NI) Act 2002.

Following the pathways of these young people who had experienced many years of care yielded rich information. To retain the depth of information generated in this predominantly qualitative study seemed crucial yet there was a need to preserve the confidentiality of those concerned. The presence/absence of pronounced difficulties/problems whilst in care/juvenile justice settings were found to vary across the sample and two groups emerged-the more troubled young people and the less troubled young people. Seven young people were included in the former whilst the latter comprised the remaining nine. Within the more troubled group, we had young people who had presented serious difficulties throughout or for a considerable part of their lives in care or juvenile justice centres. We also had young people who displayed serious problems whilst in care but were making good progress before leaving care at eighteen years of age. The less troubled group comprised young people who had displayed a few/moderate problems in care or towards the end of their time in care. It also included young people who had exhibited few, if any, problems throughout their time in care.

Key Findings from the File Searches

Mental Health/Emotional, Social and Behavioural Development

- For the more troubled young people in the sample, there was evidence of a lack of available Child and Mental Health services and Learning Disability provision to meet their assessed needs.
- The absence of residential therapeutic provision in Northern Ireland led directly to the inappropriate placements in training schools.
- The lack of comprehensive assessments of children's needs coupled with scarcity of available placements, contributed to a succession of unplanned and inappropriate placements which subsequently broke down.
- The lack of available residential facilities capable of meeting the complex needs of young people with special needs in care was highlighted.
- The absence of Child and Mental Health services' support for carers of the more troubled children was evident.
- The young people in settled foster placements exhibited some difficulties but these were appropriately responded to and dealt with by the social workers and their foster carers.
- There was little evidence of planned direct work with children. Rather it appeared to be a reaction to behaviour problems which arose in either the placement or school.

Family and Social Relationships

- For the more troubled young people in the sample, contact with birth parents was often associated with further rejection, threats and occasionally further abuse.
- There was evidence, particularly with these young people of earlier dysfunctional relationships with birth parents and siblings being re-enacted through contact arrangements.
- In contrast, for the less troubled young people, contact with their birth family was generally a positive experience.
- Problems which did arise for these young people centred on erratic contact due to parental lifestyle and the impact of sibling placements which broke down.
- Almost all of the young people had developed significant relationships with a long term foster carer which had lasted beyond the breakdown of the placement.

Self-Esteem

- All of the more troubled young people were assessed by their social workers as having low or very low self-esteem, yet there was no evidence on the care files of any work being carried out to address this issue.
- Three of these young people had improved self-esteem by the age of eighteen as a result of educational achievement and a kinship foster placement.
- In contrast, the less troubled young people were assessed as having high self-esteem and were increasingly confident during their long term placements.

Identity, Self- Presentation and Self -Care Skills

- Generally there was little evidence of life story work, although the young people had many unanswered questions about their identity.

Education

- All of these young people had experienced multiple moves of school at primary and/or secondary school levels.
- The more troubled children had by far the most changes of school.
- Generally, changes of school were related to placement moves.
- The instability in schooling was most evident at primary school level where five of the sixteen children experienced between five and seven primary schools.
- Four of the more troubled young people experienced instability in schooling at secondary school level and educational provision outside mainstream schooling.

Physical Health

- Whilst most of the files contained information on serious physical health problems and treatments, information on children's progress over time on core areas of development such as language, cognitive ability, general physical development and social and emotional development was noticeably absent.

Social Work Contact

- Social work contact was usually on a monthly basis although more frequent at times depending on the needs of the child.
- It was not always clear if the child was seen on their own during social work visits.
- Three young people had significant periods when they had no social work contact. Two of these were in training school, when the practice was for the Northern Ireland Office to assume responsibility for the children during the period of the Training School Order. The third was in an area where there was insufficient staffing to provide for contact.

Changes of Social Worker

- There was evidence of a considerable number of changes of social worker with three young people having seven social workers and four others having four or five.

Further Abuse in Care

- File records indicated that one of the more troubled young people experienced abuse by a birth parent during a contact visit. This led to a criminal conviction and imprisonment.
- The files also stated that two children in the study cohort made allegations of abuse by former long-term foster carers and that another child and her sibling

were removed from long term foster carers following anonymous allegations of maltreatment. The children's files indicated the removal of the foster carers' names from the list of approved foster carers in the former instance and immediate removal of the children from the placement in the latter. On these files, there was no further detail as to whether the allegations were substantiated or any subsequent action taken. Two of the more troubled young people were included.

Educational/Training Qualifications at 18 years of age

- There was evidence of considerable achievement in either educational or vocational qualifications.
- However, there was also the suggestion of educational underachievement which seemed to be related to the young people's intense desire for independence.
- There was evidence of social services providing support for two young people in third level education and a specialist work placement for a child with special needs.

Employment/Housing and Social Support at 18 years

- The majority of the young people were in employment (11) or full time education (2).
- Most were living in their own homes or living with birth/foster families but a few had no permanent accommodation.
- Whilst the majority had supportive networks, the more troubled young people were very isolated.

Transitions from Care and Leaving Care Support

- There was evidence of considerable support provided by Social Services to three of the more troubled young people.
- The social work plan and the young person's plan were not always the same. When the young person pursued their plan and this did not work out, support from Social Services seemed to be much less readily available.
- The young people who had spent considerable periods in training schools did not make successful transitions to the community. This appeared to be linked to inadequate assessment and provision of support to this particularly vulnerable group of young people who exhibited extremely low self-esteem and signs of institutionalisation.
- Social Services were noted to be providing financial assistance to support those young people still at college or in training.
- For some young people there was no evidence of any leaving care support provided. Records did not show whether services were offered and rejected or not.

Emergent Issues from the Interviews with the Young People

The Availability and Adequacy of Therapeutic Help for the Most Troubled Young People in Care

A serious concern highlighted by the case files which were examined was the lack of available appropriate therapeutic services to meet the needs of the more troubled young people who had experienced extreme forms of abuse and neglect prior to being admitted to care.

The most outstanding example was that of a young person whose needs were assessed as warranting a long term placement in a residential therapeutic unit but no such facility existed in Northern Ireland. Instead, he was inappropriately placed in training school for many years. What came across from the interview with him was his anger at what he saw as social services' lack of persistence in locating a therapeutic placement for him:

‘If Social Services had of done more when they were trying to get me a place there (*therapeutic community in England*), they might have actually succeeded and got me a place.’

He viewed his placement in training school and the consequent loss of a community social worker as abandonment of him by social services. Whilst in the training school, he vividly recalled being taken to see a proposed new Northern Ireland residential therapeutic home in which he had been given a place and later being told that the facility was not going ahead as a result of financing problems. Although critical of the system, he appeared remarkably grateful to the staff who had tried to secure the placement for him. Nevertheless, overall he felt let down by Social Services.

Alongside that, we have an example of therapeutic facilities being offered to a young girl who had experienced extreme sexual abuse yet been removed prematurely from therapy as a result of external constraints (financial/personnel). During interview this young girl explained how she had built up a sense of trust in the specialist, with whom she was disclosing for the first time the extensive nature of her abuse.

‘She sat with me and she played with toys and she got to know me as a friend first before she rushed in and asked me questions. She didn't ask me any questions. She waited until I told her things. And then when I started telling her things, she asked me would I prefer to do this “Would you prefer me to ask you questions or wait until you decide to tell me?” I said, “ Ask me questions”.’

She indicated that she was not ready to cease therapy when the specialist could no longer offer her help. In her view, this premature cessation of help impacted adversely on her ability subsequently to engage in further therapeutic interventions. Several years later, she engaged with another therapist in an adolescent unit but the therapist's

move after a relatively short period left her unwilling to invest in such an approach again. She was later placed in a training school for a short period. In her view, this was highly inappropriate.

The Young People's Ability to Trust

The issue of being able to trust others (e.g. foster carers, social workers, therapists) was raised in many of the interviews. It was, however, a predominant theme with the more troubled young people. Some were convinced by their previous experience that they must learn to survive on their own. Some expressed a wish to be able to develop such trust as they recognised that they did need support. On a more positive note, one young person developed a considerable sense of trust in her long-term foster carer which maintained after the breakdown of the placement. In contrast, all of the less troubled young people had established a reasonable to very strong sense of trust in their foster carers.

Further Contact with Abusive Birth Family Reinforcing Rejection and Dysfunctional Family Patterns

For the most part, the more troubled young people did not have continuing contact with their birth parents who abused them but sought them out during adolescence. Some of these young people, however, did have sporadic contact with their birth parents over time. These contacts with birth families tended to bring further rejection for the young people. The dysfunctional family patterns which had led to the young person coming into care were re-enacted through the renewed contact. In general, their parents did not accept any responsibility for the neglect or abuse, placing blame on the young people for splitting up the family by making disclosures to Social Services. Most notable was that patterns of rejecting the young person within the family were repeated during contact. As the young people related these experiences, it was evident how deeply they had been affected by the rejection and how admirably they were trying to make the best of their reality.

Moving Outside Mainstream Education and Drifting towards Crime

Four of the most troubled young people were excluded from mainstream education, three of them for most of their secondary education. The young people were very aware of this and related these moves to their drift into unstable relationships, drugs and/or crime.

‘See, I just got into a bad, bad crowd and life went downhill and I started staying out late and stealing money off my foster parents....’

These young people all referred to the power of peer influence, with the young males particularly emphasising the extent to which they learnt crime within training school settings from other young people.

Isolation of the Young People and Lack of Supportive Network of Family and Friends

All of the young people interviewed expressed a sense of isolation and difference from their peers. Not only were they living apart from their birth families and in long term care, the most troubled young people were further segregated from their peers through extraordinary educational, psychiatric or training school provision. As referred to earlier, the move to training school resulted in the loss of a community social worker and often the only link the most troubled young people had with the community. With this group, the lack of a supportive network within the community undoubtedly contributed to their unsuccessful transition and their return to behaviour which would remove them again from it. Interestingly, one young person who had experienced such a transition emphasised the amount of support young people leaving care would need to survive. Two of the others indicated that they had serious literacy problems which in itself set them apart from their peers but also at times led to violence as a result of frustration or bullying. A similar extreme sense of isolation came across in the interview with a young person with special needs. Prior to his current placement, he had had no family contact and had been living in a children's home with troubled adolescents. He indicated that the home was also in an area where he was afraid of being attacked due to sectarianism. Altogether, his description portrayed an isolated, unhappy young person.

In contrast, two of the more troubled young people had excelled in mainstream education and had developed friendships at school. All the other less troubled young people had supportive relationships within their foster families and friendships at school and work which led to further integration in the community.

The Impact of Long Term Foster Care

All seven of the less troubled young people interviewed had a positive view of their experience of long term foster care and all seven placements were those established at the time of the original study. Hence they had lived in those placements on average about ten years. In fact, two were so well integrated into the families that they chose to remain living there several years after leaving care. With the others who had established their separate homes by the time of interviews, they were in close contact with their former foster families.

‘The last few years of my life have been happy...and yet I’ve gone through the same things with my foster parents...the same things that a normal teenager does. I’ve been treated no differently. I’ve been treated as if I’m their own son. And I’m sure I’ve given them a lot of headaches over the years. I’ve always had the feeling that I’ve been loved, always been wanted. Nobody would know what they mean to me, what they have done for me. They took me out of something bad and gave me something good. They always make me feel special’.

Often they were living nearby with frequent visiting (e.g. twice weekly) for washing, Sunday lunch and general support. Financial and practical assistance was offered to establish their homes as well as emotional support regarding partner relationships and parenthood. In many ways, these foster carers were offering the love and support that parents continue to do for their own children after leaving home. There was every indication that these relationships were long-term.

And there were some important messages emerging from the interviews with the more troubled young people about their foster care experiences. The young girl who had suffered extensive abuse had found someone to trust in her second long-term foster mother:

‘She talked to me...she asked me if I was okay...she slept beside me a night time so I felt safe...all the wee, wee things like that’

In her view, this placement had given her security. It had lasted for several years and ended, in her view, as a result of the premature cessation of therapy. Nevertheless, she had since maintained a very positive relationship with her foster mother. In fact, she viewed her as the only person in whom she would place her trust and her sole support. Given this young person’s lack of a network of supportive relationships, this was extremely significant.

And both young people interviewed in prison emphasised the importance of their experience with their long-term foster carers. One had lived with them for several years before moving into training school. They had maintained contact whilst he was there and attempted to support him in his transition into the community again. Although there was little contact by the time of interview, his placement with them was very important to him and he expressed regret that he had not tried harder to make it work.

The extent to which the other young person attached significance to his brief foster placement was much more surprising. This was the original study long-term placement which lasted for a year and was his second long term foster placement. It was also his last family placement in the community before moving into the training school system at ten years of age. The foster family had maintained some contact over time. It was obvious that he attached a great deal of significance to their continuing contact. His view was that he experienced normal family life with them and particularly commented on being treated as one of their own children. He expressed regret at not having tried to make it work again with them when they offered respite or a further placement. He attributed this to his inability to trust.

An accidental meeting with a relative brought about the kinship foster placement for the young person with special needs. And there was no doubt about the happiness expressed by him in interview, which contrasted with his previous experience in care.

Some children had experiences of unsuccessful foster placements and for at least two of the young people, residential care was very significant. Particularly for one young person who had had multiple moves of foster homes, residential care in early childhood and in adolescence had provided much needed stability and she appeared to trust the staff. For the other young person, a relationship of trust was established in a

residential placement which proved an invaluable support during times of crises after leaving care.

Different Educational Pathways-Possibly a Protective Factor

Two of the more troubled young people achieved academic success in school and went on to study at university. Both developed friendships through school. These young people had experienced abuse, neglect and rejection in their early lives. Whilst they also had considerable difficulties at times, they did not exhibit the same level of behaviour problems as some of the other more troubled young people.

‘They expect kids in care to get into trouble in school and I wanted to show that it doesn’t have to be like that.’

From the interviews with the young people, the impression gained was that the self-esteem of these young people had grown with their achievements in school. However, the most outstanding feature was their focused determination to achieve a better life no matter what effort it would take. In many ways, their educational pathway appeared to have served as a protective factor even in the absence of a close family or substitute family experience.

Contact with Birth Family

All of the less troubled young people generally had regular contact with birth parents and/or siblings throughout their lengthy period in care. During and just prior to care, four of the young people had experienced the sudden death of their only known parent or only parent who remained in regular contact with them. Generally, there was clear evidence of strong efforts being made by their social workers and foster carers to facilitate at least monthly visits. It is important to add that for these children, there was no feasible plan for rehabilitation. The purpose of contact, therefore, was to maintain their links with birth family whilst living in long term substitute care. During the interviews the young people referred to the importance of this contact to them and a few thought that the frequency should have been increased for them. On the whole, contact was sought by and was a positive experience for this group of young people. Interestingly, what came across from the interviews was the respect shown by the foster carers for their birth family and their birth identity. Where there was such respect, the young people deeply appreciated this and seemed to feel even more secure in their placements.

In contrast, for the more troubled young people, contact at times brought further rejection and/or abuse and the re-enactment of earlier dysfunctional family patterns. These young people indicated that contact made them realize that their birth parents continued to blame them for disclosures and had not accepted responsibility for their behaviour. They also found that family patterns had not changed.

The Desire for Independence and Underachievement at School

Where the less troubled young people exhibited any level of problem behaviour, it seemed to stem from their strong desire for independence. Whilst this is obviously a normal part of adolescence, there was a sense that for some of these young people, the desire for independence was particularly strong and related to their wish to be living in a more normal situation. They had a strong sense of wanting to be away from social workers, care and those things which set them apart from their peers. At least three young people who achieved GCSEs were thought to have seriously underachieved. From interview, these young people were focusing their energies at that time on establishing their own independence through housing and employment as soon as possible rather than education. In all of these situations, supportive relationships were maintained by the foster carers.

Social Work Contact in Care

The predominant message from the interviews was that they valued social workers who treated them with respect. They wanted social workers to spend time with them, getting to know them and sometimes just having fun together. They wanted social workers they felt they could trust. Several thought that social workers should take the children out more to places they would enjoy to build up a relationship with them. With some of the more established foster placements, some social workers seemed to see the children only during a visit to the foster family. Where this was the case, the young people thought that they would have wanted to talk to them more readily if they had taken them out. In the absence of an established relationship with them, their questions came across as intrusion and not genuine interest. There was no doubt that the most troubled and most isolated young people viewed their social workers as central to their lives.

‘P (*his last social worker*), for instance, he treated me like a son. He brought me to his house, introduced me to his family...took me out.’

‘He (*his last social worker*) treated all the kids with respect. He wasn’t just in there for the money. He was there to make sure the kids were alright. He made an appointment to come and see me nearly every week. If I had any problems, he was there for me and helped me sort it out. Somebody you could talk to.’

Where social workers established a relationship of trust with them, this was extremely important to these young people. In the interviews they recalled such relationships, their significance not having diminished over years.

Further Abuse in Care

Two of the more troubled young people indicated that they were maltreated by former foster carers. One stated that the behaviour of the foster mother had made her unable to trust females since. The other was keen to know what action had been taken against the carers. They expressed anger towards social services for lack of protection and approval of foster carers who maltreated children.

Social Work Contact with Children and Young People in Training Schools

Several of the most troubled young people were placed in training school for periods of years. Apart from the recognised inappropriateness of the placements and their duration, this also brought about the loss of their social workers from the community. Whilst they may have been placed initially on care grounds and hence retained there for a short period, their predominant stay was on custodial grounds where there was no longer a statutory responsibility on Social Services to visit the young person. As referred to earlier, given the isolation of these young people from family and wider support networks in the community, this was a deeply regrettable practice. Not only did this mean that the young people lost the social workers who knew their circumstances over time and with whom they had established trust but it was inconsistent with the idea of successfully reintegrating them back into the community again. Both of these young people recounted at length their attempted and unsuccessful transitions back to the community. The most isolated young person reflected at length about the loss of his social worker which he interpreted as abandonment by Social Services.

Social Work Contact Post Care

Across the sample of young people interviewed it was clear that the focus of their energy from their mid teens was on achieving independence. And in this context they viewed contact with social workers as dependency and therefore not what they would necessarily desire later in care or after leaving care. Again there was a significant difference in this respect between the more or less troubled young people. The latter, who were well integrated into their substitute families by the age of eighteen and well supported by them afterwards, were understandably not convinced of the need to maintain contact with their social workers. In contrast, the more troubled young people were also striving towards independence but recognised their continuing need for support and advice. For these troubled young people, social workers had played a very significant role in their lives and sadly in most instances they provided the only supportive relationships they had. What came across from the interviews was the importance again of having someone they felt they could trust to talk to and ask their advice. The person they turned to might have been their care social worker, a residential worker, an after care team worker or a substance abuse team worker. The common denominator was that it was someone they felt they could trust and of their choice. Where there was tension, it seemed to be around the involuntary nature of the relationship. For example, one young mother was visited by a social worker on a voluntary basis but she suspected that there was concern about the care of her child. Yet she needed support. In another case, the young person was in higher education and dependent upon the financial support offered by Social Services. Although keen to be fully independent, her respect for their earlier support coupled with the insecurity of the future made her ambivalent. Interestingly, all of the young people were positive about the recommendations of the Children (Leaving Care) NI Act 2002 and in particular liked the idea of having a Personal Adviser of their choice.

The Young People's Anger and Determination not to have their Children in Care

All of the young people were asked about their hopes for the future and their vision included having a house, job and family. However, when they were asked about the future for their children, this evoked a different level of response from many of them. They stated that they would want to give them all the things that they had not had and would determinedly ensure that they would not be taken into care and experience what they had in their lives. These sentiments were expressed with a depth of feeling generated nowhere else in the interviews. And it was expressed across the sample. This rare glimpse of the depth of anger of these young people about their life situation perhaps helps us to understand them more than anything else shared with us. It seems fitting then that it should be the final message from the interviews with these remarkable young people.

Implications for Policy and Practice

Assessment of Needs

There was considerable evidence of a lack of a comprehensive assessment of needs for these children. In the case of the most troubled children, the level of need appeared not to be recognised which in turn led to multiple, inappropriate placements. Regrettably, this was particularly the case with the most troubled children. The Framework for the Assessment of Children and their Families [Department of Health, Department of Education and Employment and the Home Office (2000); Gray (2001)] has been introduced in England and Wales to provide a comprehensive assessment of needs and a basis for sound professional judgements as to what actions/services would be required to meet those needs. An extensive staff training programme and reading materials (Horwath, 2001) have been developed to underpin this major development which underpins the Children Act 1989. Although the Children (NI) Order 1995 is virtually identical to the Children Act, Northern Ireland lacks a regionally agreed comprehensive assessment model.

Recommendation:

- The introduction of a regionally agreed assessment framework with a related implementation and training programme should be pursued by the Department of Health, Social Services and Public Safety.

Provision of a Range of Child and Adolescent Mental Health Services

Obviously assessment needs to be accompanied by a range of available, effective services (McAuley, Pecora and Rose, 2005). There was considerable evidence in this study that the needs of the most troubled young people were not being met. The absence of any residential therapeutic facility within Northern Ireland was particularly noted, as was the inappropriate use of training school provision to meet such needs. More generally, access of children in care to therapeutic, psychiatric and psychological services appeared to be problematic.

Recommendation:

- A range of child and adolescent mental health services capable of meeting the needs of our most troubled Looked After Children should be developed within Northern Ireland as a priority.

Contact with Birth Family

Contact was generally valued by the young people and social workers made strenuous efforts to maintain it. For the most troubled young people, however, contact brought further rejection and/or abuse.

Recommendation:

- Contact plans should be based upon assessment of the individual child's welfare and wishes. Where there is a history of rejection, abuse or dysfunction, there needs to be careful assessment as to whether contact is in the child's best interests or not. If it is, consideration should be given to the nature of the contact and the support needs of the child.

Preventing Social Exclusion

Looked After Children are particularly vulnerable to social exclusion. In this study we have detailed pathways of some of the more troubled children which illustrate a number of areas of particular concern. In particular, the very troubled children were suspended or expelled from their schools. This was an important turning point which often meant that they moved outside mainstream education and received specialist provision in training school, residential psychiatric setting or home tuition. From their interviews it was clear that this set them further apart from their peers and the community and consequently added to their isolation.

The second area highlighted in this study which contributed to the social exclusion of the young people was not only their committal to a regional training school facility outside of their community for lengthy periods but their loss of a community social worker once they became the subject of a Training School Order for custodial reasons. Recent reform of the juvenile justice legislation should prevent lengthy periods in juvenile justice centres and continuing social work contact could be monitored through inspections.

Furthermore, it seemed from this study that we need to be actively addressing the isolation of many of these young people. In the context of the young people's desire for independence and normality, focused work on building up support networks in the community for these young people before leaving care should be encouraged.

Recommendations:

- The educational needs of looked after children should be prioritised at Departmental, Board and Trust levels and collaborative efforts made to prevent or limit school exclusions by promoting joint working with the Department of Education, Education and Library Boards and relevant others.
- Social workers in the community should maintain regular contact with looked after children who are committed to juvenile justice centres and this should be monitored at LAC or other planning fora.
- Social workers should actively assist young people to build up supportive networks in the community before leaving care. Training should be developed and offered in this area.

Family and Child Care Workforce Planning and Investment

These young people experienced a significant number of changes of social workers. The issue of a high turnover of staff in Family and Child Care needs to be considered from the point of view of impact on Looked After Children and their expressed and understandable difficulty in establishing trust in adults. Commitment to addressing the high turnover of staff in this area will necessitate addressing reasons such as high stress levels, large workloads and low status. Obviously this means substantial financial commitment.

Recommendation:

- All Looked After Children, but particularly those who are living in long-term substitute care, should have the opportunity to have an experienced child care social worker who is likely to be with them for some time. Workforce planning should bear in mind the particular needs of this group of children.

The Contribution of Long Term Foster Care

At present there is currently around two thousand and five hundred Looked After Children in Northern Ireland and the majority of those live in foster homes (DHSSPS/SSI/NISRA, 2003). Whilst it is likely that more children in care in Northern Ireland will be adopted in the future (DHSSPS/SSI, 2002), long-term foster care may well remain the option for many children particularly when they enter care later in childhood. Although there is debate about the relative outcomes of long-term foster care or adoption (Minty, 1999; Triseliotis, 2002), there is little doubt that long-term foster care was a very positive experience for many of these young people. The major problem faced in foster care nationally and locally appears to be placement choice and the consequent safety of children (McAuley, 2000). We need to continue to ensure that foster care services are recognised as a valuable part of the continuum of services for children and their families and invest in the service to further develop it.

Recommendation:

- Further investment in foster care is necessary to develop this valuable part of the continuum of services to children and their families. In particular, investment is needed to increase recruitment, retention, support and training of foster carers. This, in turn, will increase placement choice and safety.

The Strategic Framework for Children and Young People in Need and Families-Linking Policy and Evaluation

Improving children's lives is a central tenet of the Children Act 2004 and recent government policy (DfES, 2003; HMTreasury, DfES, DWP and DTI, 2004). Policy developments in England to improve standards for children in need have for some time been accompanied by a range of research initiatives (e.g. Quality Protects, Choice Protects and Costs and Cost-Effectiveness of Services to Children in Need) to evaluate their effectiveness. The introduction of the Strategic Framework for Children and Young People in Need and Families in Northern Ireland provides the opportunity to build in policy evaluation and research to provide evidence about the outcomes of services to children and family in the Northern Ireland community.

Recommendation:

- The Strategic Framework for Services to Children and Young People in Need and Families should include provision for an evaluation/research programme into its impact.

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