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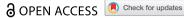
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"I don't think a lot of people respect us" – police and social worker experiences of interagency working with looked-after children

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ABSTRACT

This original qualitative study investigated the experiences of police and social workers who worked closely with Looked-after Children (LAC) and each other in an inter-agency capacity. Participants were based in different local councils and police stations across various regions in Scotland including rural communities and the Northern Isles. Semi-structured interviews were conducted with an experienced cohort (n = 12). Those participants, police (n = 6) and social workers (n = 6), occupied different roles within their disciplines. The interview findings elicited three distinct main themes including numerous instances of traumatic experiences in working with LAC, some conflict in inter-agency working, and a lack of formal support in the workplace. The practical implications of those findings are discussed.

KEYWORDS

Social worker; police; looked-after children; multi-agency working; support; trauma

Introduction

There is a paucity of scientific research investigating the potential differences and similarities in social worker and police experiences working with Looked-after Children (LAC) and the contexts that inform these experiences. This is pertinent as in Scotland, young people's needs and circumstances are considered in tandem through a unitary jurisdiction that incorporates child welfare matters and youth justice decision making through the Children's Hearing System (CHS), which is a system of lay tribunals (McGhee et al., 2017). Considering Scotland's approach towards young people in need, many LAC have experiences with both social workers and the police. Thus, the objective of this study was to establish qualitatively the perspectives and potential differences of these two key professions working with LAC, and to understand any barriers and facilitators in conducting their duties.

Child welfare system in Scotland

Scotland's child welfare system is uniquely positioned in the United Kingdom as the 1995 Children (Scotland) Act and the 2011 Children's Hearings (Scotland) Act serve as its foundation. This is in contrast to England, Wales and Northern Ireland where a courtbased system for matters of child welfare concerns is employed, as well as dealing with young offending matters in distinct youth justice courts (Bottoms & Dignan, 2004). The CHS, consisting of citizen volunteers, is intended to offer a non-adversarial option to encourage productive discussion between parents, young people and the decision makers (McGhee, 2011). While the courts remain the principal decision-makers in cases involving adoption and permanence decisions, as well as where there is immediate risk of significant harm, cases are then transferred to the CHS which is then tasked with further considerations (Francis, 2000).

Definition of a looked-after child

While within the United Kingdom the exact definition of a 'Looked after Child' differs within each country, in Scotland, Looked After Children (LAC) are defined through the Looked After Children (Scotland) Regulations 2009 and the Adoption and Children (Scotland) Act 2007 under section 17(6) of the 1995 Act, as amended by Schedule 2, para 9(4) of the 2007 Act. Within this legislation, it is stated that a young person can be defined as LAC when provided with accommodation by a local authority under section 25 of the 1995 Act, being subjected to a supervision requirement made by a children's hearing, in terms of section 70 of the 1995 Act; or being subjected to an order, authorisation or warrant made under Chapter 2, 3 or 4 of Part II of the 1995 Act, and according to which the local authority has responsibilities in respect of the child (Scottish Government, 2011). Moreover, in Scotland, a young person aged between sixteen and seventeen who remains on compulsory measures of supervision and receives an offencerelated custodial sentence is usually not included in the LAC statistics, while a young person aged 8-15 years old who has been referred to a children's hearing on the grounds of an offence having been committed, and subsequently placed on supervision, is considered a LAC (McGhee et al., 2017). In lay terms, Scotland regards any child in foster, adoptive, kinship, residential or at-home care as LAC, and also includes young adults leaving these types of care in their policies.

The background of looked-after children

Children and young people accommodated in the care system in Scotland have been found to have experienced multiple adversities in their lives, from abuse and neglect at familial level, to educational exclusion and stigma at societal level. Effects range from low educational attainment levels, problems in maintaining interpersonal relationships and a greater vulnerability to self-harm behaviours (Harkess-Murphy et al., 2013; Rogers, 2017).

Reflecting on the complex difficulties and the adverse backgrounds of most looked-after children, McAuley and Davis (2009) established that the prevalence for psychological disorders in LAC was significantly higher than in children in the general population, and that LAC were seven times more likely to have a diagnosis of conduct disorder than a child in the general population. Risk of mental health conditions in the LAC population is among the highest in society, including high levels of comorbidity and increased levels of behavioural problems (McCann et al., 1996). Looked-after children are considered to inhabit a high-risk trajectory towards youth offending, delinquency and antisocial behaviour (Hayden, 2010; Jonson-Reid & Barth, 2000). This is supplemented by an increasing

corpus of research positing that young people who have been exposed to or witnessed adverse childhood experiences (ACE), such as varying forms of abuse and neglect, can be drawn into multiple avenues that lead to delinquency and perpetration of violence in adolescence (Duke et al., 2010; Mersky & Reynolds, 2007; Salzinger et al., 2007). Indeed, it could be argued that a trauma and attachment lens might help make sense of the different behaviours that have attracted the various diagnostic labels given to young people (Rogers et al., 2015). LAC with trauma-related emotional and behavioural problems, but without diagnosable mental health problems, face stigma relating to their incare status and often greater barriers in accessing interventions that may assist in their healthy psychosocial development (Jones & Tully, 2017).

Looked-after children and risk of offending

Looked-after children are at more than double the risk of delinquency when entering a care setting (Ryan & Testa, 2005). Specific risk factors that are identified in individuals who engage in delinquency, offending and/or antisocial behaviour, are also identifiable in LAC - namely family conflict, experiencing and/or witnessing physical-sexual and/or emotional abuse, neglect, parental drug use, truancy, etc. (Fisher, 2015; McCall, 2013; Youth Justice Board, 2001). Conduct disorder and offending behaviour are highly prevalent within this group, and once having entered the system, further problems can arise (Nicholas et al., 2003). Residential care, above all other types of care, has been identified as one of the most criminogenic environments (Carr & McAlister, 2016; Darker et al., 2008). Putative reasons include residential care being utilised as a last resort, placing young people with various complex challenges together in an underequipped environment, which is unable to fully address their complex developmental needs (Shaw, 2013).

Whilst in residential care, all these interconnected factors might contribute to LAC coming to the attention of the authorities, and certain policies can further increase the likelihood of LAC coming to the attention of the police for minor transgressions, in turn increasing the likelihood of being regularly charged (Hayden, 2010). Social workers in Scotland work alongside the LAC throughout their time in care, and given the nature of the circumstances, as well as the significant potential for engaging in offending, it is also likely that LAC will have had contact and experiences with the Police from an early stage (Ashford & Morgan, 2004; Leeson, 2010). Police are also often the first point of contact for many young people in adverse circumstances and can be deemed to be gatekeepers to both the care and justice systems, thus are in a key position to deliver appropriate responses to offending, or to provide a diversion from it (McAra & McVie, 2010). However, even though both professions might work with the same cohort in some instances, such as with LAC, their individual systems operate with different sets of aims, cultures, methods and values. Social workers generally emphasise social justice and change, the paramilitary structure of the police places greater emphasis on law enforcement (Cooper et al., 2008; Kraska, 2007).

These competing professional mandates are underexplored in the context of LAC and inter-agency working. Whilst stigma and adverse experiences among LAC have prompted recent research attention, the ways in which the police and social workers who work with them may also be stigmatised and experiencing barriers to effective practice are less understood. The extent to which these professionals may be hampered in their work by inter-sector differences in aims, codes of conduct and public relations may provide insight into future improvements that could be made in their inter-agency working with LAC. Previous work has explored this gap in professional approach and its detriment to young people in the context of policing and mental health professions. Contradictory system approaches were found to aggravate the stigma and criminalisation of the young people involved with both sectors (Liegghio et al., 2021).

Working with looked-after children

When professionals from different disciplinary backgrounds work with the same client, effective coordination of resource provisions and information is crucial (Peckover & Golding, 2017). Additionally, due to the interconnected nature of child welfare concerns, collaborative working between key professions is paramount and in the best interests of the young person (Darlington & Feeney, 2008; Horwath & Morrison, 2007; Waters, 2006). Collaborative working between professionals has shown to benefit the young person in various areas such as building resilience and working on important social skills (C. C. Bell, 2001; Kennedy, 2010; Weissberg & Elias, 1993).

Research around ACE has highlighted the importance of positive, sustained relationships with significant adults, which are often, for LAC, with the professionals in their lives (M. Bell, 2002; Le Grand, 2007; Winter, 2009). Those relationships are deemed to be crucial to cushion the effects of ACE, while also promoting healthy development (Dearden, 2004; Smokowski et al., 1999). However, bureaucratic issues such as organisational structures and allocated resources, could be detrimental to the relationship with a young person in care, difficulties can lie in latent issues such as the professional's attitudes and values. At the core of the work with LAC is the ability of the professional to build functioning long-term relationships, and their values base and emotional competence are crucial to this (Morrison, 2007; Winter, 2009).

Research question

This current study set out to examine the following research questions: 'How do social workers and police describe their experiences working with LAC, and of working with each other in the context of LAC?' This was explored using semi-structured interviews with police officers employed by Police Scotland in a variety of roles, and social workers employed in different positions within several Scottish local authorities. All had extensive face-to-face experience of working with LAC as first responders, specialist officers, with some in roles dedicated to working this client group exclusively.

Methods

Research design

This qualitative study examined police and social worker experiences of working with LAC, and with each other, by conducting 12 face-to-face, semi-structured interviews with members of Police Scotland and social workers across Scotland between 2017 and 2018.

Recruitment and participants

The police cohort consisted of six professionals (3 males and 3 females, mean age 40.7 years) and were all currently employed by Police Scotland, based in different cities and Islands across Scotland. The police cohort occupied various roles in Police Scotland such as Detective Constable, Community and Response Officers. The social worker cohort consisted of six professionals (5 females and 1 male, mean age 43.5 years) from three different local authorities in Scotland and were employed in various roles such as Social Worker, Senior Practitioner Social Worker and Child and Adolescent Mental Health Services (CAMHS) Social Worker. All participants in both cohorts had substantial experience working with LAC, and were recruited via opportunity and snowball sampling (Dusek et al., 2015; Reddy & Khan, 2013). Inclusion criteria specified adults working within Police Scotland or social work services in Scotland, who had worked extensively with LAC (more than 3 years duration) and were willing to confidentially share their experiences of related inter-agency working. Figure 1 shows participant demographics and job roles.

Police Scotland Cohort

Participant	Age (in years)	Gender	Occupation	Work experience (in years)
P1	38	Female	Detective Constable	19
P2	49	Male	Sergeant	28
Р3	46	Male	Police Coordinator	20
P4	29	Female	Community Officer	7
P5	36	Female	Response Officer	6
P6	26	Male	Sergeant	15

Social Work Cohort

Participant	Age (in years)	Gender	Occupation	Work experience (in years)
S1	33	Female	Social Work Practitioner	9
S2	43	Female	Social Worker – Practise Teacher	7
S3	37	Female	Senior Social Worker	11
S4	48	Female	CAHMS Social Worker	19
S5	54	Male	Social Worker	5
S6	46	Female	Social Worker – Team Leader	13

Figure 1. Participant Demographics

Data collection procedures

The interviewees were provided with an information sheet, consent form and debrief sheet. The researcher used an original interview schedule, which included nine items, to conduct the semi-structured interview. An I-Pad (2017 model) with the 'Voice Recorder' app was used to record the interviews, Microsoft Word software for transcribing and examining the interviews, and a password protected USB drive for storing the transcripts.

All 12 professional participants engaged in an individual, face-to-face semi-structured interview with an average duration of approximately 40 minutes. All interviewees decided the location for the interviews at a place most convenient and comfortable for them. Those interview locations were most often at the workplaces of the interviewee and included interrogation rooms and offices at police stations, social work centres and so forth. Moreover, suitable times for the interviews were also decided and arranged by the participants. This allowed the participant to focus on the interview without making alternative arrangements or being concerned with work related tasks. Before the interview started, an information sheet was made available. After having read this, a consent form was provided, stating that the interview would be recorded electronically and transcribed for analysis, that interviewees had the right to withdraw their data at any point up to a month after data collection (there were no subsequent requests of this nature), and that participation in the interview could be stopped at any point without providing a reason.

Data analysis procedures

Following a verbatim transcription of the recorded interviews, the data were examined by utilising thematic analysis to establish and highlight common themes (Braun & Clarke, 2006). Operating from a phenomenological perspective, the subjective personal experiences of participants were subjected to repeated readings, coding, theme generation, review and definition, and resultant themes were described using explanatory prose and illustrative quotes.

Ethics

Ethical approval was granted from Glasgow Caledonian University's School of Health & Life Sciences Ethical Committee. The study strictly adhered to the guidelines of both Glasgow Caledonian University's Code of Ethics (2015) and the British Psychological Society's Code of Ethics and Guidelines (BPS, 2018).

Results

The analysis elicited three themes, each with three sub-themes: *Traumatic Experiences*, *Negative Outsider Perceptions*, and *Inter-Agency Conflicts*. Figure 2 shows themes with subthemes. There was a tendency to report negative experiences in terms of barriers to effective practice and lack of professional and public support in their often-traumatic work with LAC, often producing greater levels of stigma towards LAC and the professionals who work with them. (Participants are referred to as S for social work or P for police).

	Themes	Sub-themes
Theme 1	Traumatic Experiences	Violent/fatal & threatening events Lack of/non-existent formal support Long lasting impact
Theme 2	Negative Outsider Perception	Feeling discrimination Feeling disrespected and misunderstood Sense of isolation
Theme 3	Interagency Conflict	Disrupted professional relationships II. Incoherent approach Others perceived to underperform

Figure 2. Summary of Themes

Theme 1: traumatic experiences

Participants in both professions recalled graphic, traumatic experiences of a violent and/ or threatening nature while being on duty. The negative impact of those experiences was highlighted through many participants appearing physically and psychologically affected (e.g. appearing emotional/tearful or animated) when sharing those. Within this theme three related sub-themes emerged, namely: 'violent and threatening events', 'lack of or non-existent formal support' and a 'long lasting impact'.

Violent and threatening events

Participants expressed the severity and intensity of some of the traumatic experiences that they shared with LAC in the course of their service provision.

June last year one of (LAC) friends died on a motorbike. In front of [a school], was killed [...] beside the hospital with another young laddie, last year, who lost half of his [limb] ... (P6)

Extant research findings linking ACE and problematic emotional and behavioural development were illustrated by participants, who discussed the nature of difficult and ambiguous relationships between professionals and LAC (Hinds, 2007; Ogundele, 2020; Piquero et al., 2005).

... certainly that experience for me with looked after children was horrendous. [...] seriously, seriously disturbed children, abused children. They were violent I mean oh yes, they were really violent. They were kicking walls and door just like really distressed behaviours running away, going on rooftops. I mean really, they were on the rooftop pissing on [...] people down the road ... (S2)

These harrowing interactions and experiences seemed to feed into reproductions of stigma around LAC as a distinct out-group.

Lack of or non-existent formal support

Despite frequent experiences of traumatic events, most professionals in both cohorts shared that they had insufficient or non-existent formal support to help them cope.

... if I'm brutally honest there's no, at that time, there's no supervisory assistance because I, at that point, I'd ask the supervisor ... see ya later kinda thing deal with it yourself. (P6)

Some participants indicated that informal support from colleagues, family members or partners were positive, thus they felt supported on an interpersonal rather than managerial or systemic level.

... colleagues are very supportive, very supportive team [...]. My supervisor, well, my supervisor retired . . . I am waiting for a new one starting. We've been waiting 4 months. (S2)

Participants in both cohorts reported a lack of general guidance, debrief or emotional support from their superiors in their organisation. They were overwhelmed by the magnitude of everyday challenges and having to master them unprepared and under-resourced.

Long-lasting impact

As reported by participants with traumatic experiences, the lack of formal support from superiors had an impact over the long term, including worsening relationships with superiors, and adversely affecting their job performance following the events.

A threat against me was made and my supervisor on that case was not supporting me. Actually I got seriously ill because of it and was off long term and the relationship with my supervisor worsened (S1)

With the knife incident, I went home that night . . . I was still so shocked like scared. . . . I was terrified yeah because I thought oh my god it's gonna happen again. (P5)

Within this sub-theme participant discussed the impact their work had on their health and life outside of their profession. While recounting some of their experiences many participants were visibly emotional.

Theme 2: negative outsider perception

Numerous participants in both professions shared that, while working cases concerning LAC, the perception of others outside of their agency were predominantly negative or provided inaccurate accounts of their profession. The three sub-themes within this theme were: 'feeling discrimination', 'feeling disrespected and misunderstood' and a 'sense of isolation'.

Feeling discrimination

Most participants stated that they felt discriminated against and undervalued by those they are specifically trying to protect, and also by wider society. In many instances, participants shared a feeling of ostracism by those outside their profession, despite the professionals' belief that they were working in the best interests of the public.

I don't think social workers are valued at all. I think people see them as child snatchers and meddle in stuff that's none of their business and if they don't meddle they get hung out to dry for that as well. (S2)

My view is it's a sign to society that it is ok to assault a police officer, it's ok to assault you because we are the ones that are here to protect people as much as anything. I mean if you get away with assaulting a police officer ... you can just do whatever the hell you want because it doesn't actually matter. (P1)

Those findings aligned with previous research, which proposed that especially on child welfare issues, social workers were perceived negatively (Hobbs & Evans, 2017; Leigh, 2016), comparable to negative public perceptions of police (Awan et al., 2019; Hinds, 2007). This prevailing discriminatory perception of police and social workers as hostile actors in the lives of LAC was discussed as detrimental to the ability of professionals to conduct their roles in an effective manner.

Feeling disrespected and misunderstood

Professionals displayed weary acceptance around the idea that they would be in recipient of negative public, inter-agency and managerial opinions regardless of their outcome or performance.

I don't think a lot of people respect us. (P5)

As frontline workers, the professionals often bore the brunt of dissatisfaction with systemic problems.

We often get the blame. A lot of that exasperation is directed at us, the residential staff were freaking out 'cause they had to deal with it. The police were very fed up with it, the hospital were very fed up with it. You know we're getting a lot of 'what the fuck are you doing', you know. (S6)

Social workers in particular were expected by other agencies to solve all issues with LAC, with little respect or understanding of the boundaries of their remit or resources.

Sense of isolation

There was a pervading sense of frustration among professionals of working without the support of their partner agencies. Related to this, agencies accused each other of not possessing the necessary insight into the LAC's situation.

We see the more difficult time with them that social work will not see. [...] You can try your best and try to explain in a few words but social work don't really deal with that. (P4)

The number of reports they have about a crime or for absconding ... the answer is secure them, so not actually understanding what that means in terms of removing a young person's civil liberties, not actually understanding that's a very short-term solution. (S3)

This inter-agency conflict around LAC, lack of support following traumatic experiences, and prevailing negative perceptions about professional roles, all contributed to feelings of professional isolation.

Theme 3: inter-agency conflicts

This theme highlighted the strained and non-conducive relationships between the key agencies involved in the lives of LAC. All participants reported some form of challenge with the other agencies and were also able to recall experiences where it was perceived that another key agency was failing to perform effectively. Three sub-themes identified within this theme highlighted 'Disrupted professional relationships', 'Incoherent approach' and 'Others perceived to underperform'.



Disrupted professional relationships

Professionals shared experiences of feeling excluded from partner agencies, causing impediments to working relations. Many shared similar experiences and opinions about the same agencies/statutory bodies that are also engaged with LAC namely, CAMHS, the CHS (Children's Hearings Scotland) and Education.

... we don't get told if there's a children's hearing, we gotta find out if a child got a hearing and then ask, can I come along. [...] I would just turn up and say I'm here for a hearing child [...] the Social Workers were like, why are you here ... (P6)

I have terrible relationships with Education. They don't understand looked after children at all. [...] they are making assessments as if they are psychologists. They are seeing the remedy as getting the child out of that house, get the child out, get it out of the house. (S6)

All participants reported having difficult relationships with other agencies involved in the LAC lives. Examples included outside agencies not including them in important meetings or in the wider decision-making processes. This lack of joined-up working was discussed as detrimental to the progress and wellbeing of LAC, as well as being frustrating for professionals trying to provide their service.

Incoherent approach

Many participants described clear differences between both the police and social work agencies, when working with LAC, in terms of interaction styles and goals. Importantly, each believed that their own position was the appropriate one concerning the LAC.

- ... we had a 15-year-old whose mother wouldn't come to pick him up at [Police Station] ... while we charged him with something and then the social worker came up instead and he just told them what they wanted to hear and when she left the room he told us the truth. (P5)
- ... they're (Police) looking at beyond reasonable doubt, for evidence and we look at the balance of probability . . . (S4)

Most interviewees discussed experiences where they believed that their approach was the most appropriate. When those experiences where shared, many participants assumed that the other agency did not fully grasp the reality of a case.

Others perceived to underperform

Participants referred to situations where it was felt that the main work around LAC was their professional burden, while partner agencies were perceived to perform inadequately.

- ... I think you know there needs to be I think a greater understanding the Police aren't always the best organisation to take the lead in certain things. [...]. I think the Police is misused. (P3)
- ... looked after children, you need to work with them in a different way. [...] So CAMHS workers wouldn't work well with them. [...] I find those mental health workers very rigid in their thinking and I felt they are very protective of their service ... (S2)

Cooperation and functioning professional relationships between key-professionals in domains such as assessments and case reviews on matters such as child protection concerns was discussed as paramount, yet the actuality of inter-agency working was hindering this optimal performance.



Discussion

A plethora of research has established that law enforcement officers and social workers are classed as high-risk occupations due, for example, to the threat and experience of violence (Johnson et al., 2005; Jones et al., 2010; Papazoglou & Tuttle, 2018; Waddington et al., 2004). This study further highlights that traumatic experiences have long-lasting physical and psychological effects. Yet, many participants reported a lack of formal support in coping with the psychological consequences, despite previous research highlighting the importance of appropriate clinical supervision and support (Bogo & McKnight, 2006; Papazoglou & Tuttle, 2018).

The second theme exposed the impact on the participants of feeling that others held negative outsider perceptions of them, portraying them inaccurately. This is crucial as in the context of the police, even informal contact with the police can influence young people towards positive judgements, with greater willingness to support police, ask for support, report on either their own or others' victimisation, and thus assisting the police to work with greater effectiveness (Hinds, 2009). This is equally important for social workers where a positive attitude towards their profession enables them to carry out their work positively. A positive attitude increases, for example, the client's adherence to plans and treatments (Kagan & Zychlinski, 2016). Conversely, holding negative attitudes towards social workers hinders the client's utilisation of services offered, as well as reducing collaboration (Kagan, 2016; LeCroy & Stinson, 2004). Our findings suggest that systemic problems with inter-agency working (lack of support, time, budget, respect) serve frustrate effective service provision and to reproduce social stigma against both LAC and the professionals who work with them.

Our third theme identified inter-agency conflicts between the key professionals involved in a looked-after child's life. Even though the complex and varied needs of LAC are intrinsically connected with challenges that require collaboration between the different agencies in their lives (Harker et al., 2004), participants explained that this was not the case. Professionals highlighted difficulties with key agencies such as CAMHS and the CHS as well as significant challenges to inter-agency working between police and social work.

Our findings show that shared inter-agency understanding appeared to be fragmented and problems in collaborative working were evident. Extensive research suggests that this could impact on youth outcomes (Cleaver & Walker, 2004; Jacklin et al., 2006). Professionals referred to inter-agency conflicts in relation to approaches and insights towards working with LAC, claiming that the opinion of their profession was more appropriate and justifiable than others. Collaboration might be hindered as each agency has differing policies, internal infrastructures and systems as well as potentially competing priorities (Herz et al., 2012; Westwood, 2012).

Implications for practice

Joint training initiatives (e.g. on sharing professional experiences with LAC, emotional competencies, ACE, etc.) in a formal setting and capacity may be an optimal means of improving inter-agency working between police and social workers in Scotland. This could enhance working relationships between these professionals as well as reducing the perceptions of us versus them. Support for that notion can be found in research investigating the effects of collaborative working and training with the example of Crisis Intervention Teams (Compton et al., 2011). Within those teams, collaborative working between police and mental health providers is paramount and joint initiatives showed promising results including improved crisis management and less physical intervention (Compton et al., 2008, 2011; Giwa, 2018). This successful approach could be adopted and applied for LAC specific training that included police and social workers together.

Furthermore, a crucial support structure to incorporate is the concept of a traumainformed approach. Research by Perry and Daniels (2016) has demonstrated that trauma-informed practices in schools enable students to develop positive relationships with their peers and teachers. Enhancing the understanding of trauma-informed care leads to a greater understanding of person-centred approaches as well as a reduction of restrictive interventions (Hall et al., 2016; Lotty et al., 2020). Joint police and social work training, and indeed service evaluation, on trauma-informed approaches may well improve both interprofessional working and perceptions and stigma around working with LAC (Taylor, 2021).

Conclusion

This study explored subjective personal experiences of police and social workers in lookedafter children's lives. The findings established the complexities and challenges that these professionals must navigate when working with LAC in an inter-agency capacity. Professionals experienced trauma with long-lasting consequences to their health and role efficacy, with little support in place to help them cope. They experienced (alongside the LAC they work with) discrimination, stigma, and isolation, and inter-agency conflict as a barrier to their service provision. The findings highlighted the need to develop coherent inter-agency working approaches and dynamics between those disciplines. Joint training initiatives with victim/trauma-focused approaches are recommended to enable effective inter-agency working and improved outcomes for LAC.

Disclosure statement

No potential conflict of interest was reported by the author(s).

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