Child protection and family support: Experiences in a seaside resort

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ABSTRACT

Effective Early Help services are key to halting rising rates of children in care in the UK. Yet despite family support and child welfare interventions being unequally distributed across the country, the role of 'place' has received limited attention in the children's social care arena. This paper examines the connections between coastal challenges, Early Help and child welfare interventions, drawing on embedded research undertaken within a Local Authority on England's coast with elevated levels of children in care. We focus on families' experiences raising children in a seaside resort area as well as professionals' perspectives on the place-based challenges faced delivering effective and accessible Early Help support. The study generated data from ethnographic observations, semi-structured interviews, and focus groups with local parents/carers (n = 57), service managers and frontline professionals (n = 14), and the Voluntary, Community, and Social Enterprise (VCSE) sector (n = 22). The findings highlight how the socio-economic challenges associated with many seaside resort areas, including housing pressures, a seasonal and low-wage economy, and the transience of the population, present difficulties for parents/carers in raising and supporting their children. For professionals delivering Early Help, high levels of housing instability, elevated inward migration, resource constraints and challenges around recruitment and retention presented challenges to delivering services. This paper recommends increased emphasis in regulation and resourcing around family support that considers the spatial and geographic dynamics that influence the incidence, structuring, and experiences of child and family welfare.

1. Introduction

1.1. Levelling up and coastal deprivation

Recent research by the Institute for Fiscal Studies (2020) found that the "UK is one of the most geographically unequal countries in the developed world" (p:315). Under the UK Government's *Levelling-Up* agenda, it is now a stated priority to reduce 'spatial disparities' by investing in the physical, human, financial, social, and institutional capital of 'left behind' places (UK Government, 2022). Part of this agenda involves recognition that socio-economic deprivation is not only geographically concentrated in large urban areas with historic manufacturing and/or mining sectors, but also in coastal areas (Walton and Browne, 2010; Centre for Social Justice, 2013; MHCLG, 2019). Recent reports have shone a spotlight on the elevated rates of poverty, unemployment, poor physical/mental health, educational attainment gaps and poor housing and public service provision that commonly afflicts England's coastal communities (House of Lords, 2019; CMO, 2021;

Sim and Major, 2022). England's Chief Medical Officer (2021) has also argued that the distinct socio-economic and health challenges facing coastal areas means "they often have much more in common with one another than their nearest inland neighbours" (p:20).

Whilst there is increasing focus on the unique sets of challenges surrounding coastal communities, little attention has been placed on their intersection with children's social care and the delivery and accessibility of child and family welfare services, despite these areas commonly experiencing high levels of service demand (Bennett et al., 2022). Recognising that these issues need to be understood within their broader geographies (Jupp, 2017), this paper builds upon scholarship on 'care ecologies' which seeks to (re)situate care within the interconnected and interdependent actors, processes and systems that family life unfolds within in differing spatial contexts (Bowlby and McKie, 2019; Disney et al., 2022). To this end it is important to recognise firstly that 'place' itself is a contested concept (Cresswell, 2014). For the purpose of this paper, we identify place as created through the shared meaning and experiences of people and use the concept to explore how this is

"entangled in a web of socio-economic and ecologic relationships" (Bartos, 2013p:89). Similarly, there is no common definition of coastal areas or communities. Researchers and policy makers have adopted a variety of classifications, from broader definitions which include all Local Authorities with a coastline within their catchment, to narrower groupings encompassing the differing economic and demographic characteristics of coastal areas (CMO, 2021). Our focus in this paper is on what we and other researchers' term seaside resorts - coastal localities that encompass a touristic beach and associated visitor attractions and are largely reliant on a tourist-based economy (Agarwal et al., 2018; ONS, 2020a; Leckie et al., 2021) – and to explore how these settings shape local 'carescapes' (Bowlby and McKie, 2019), family experience and available support.

1.2. Seaside resorts

In the second half of the 19th century, England's domestic tourism market expanded when railway linkages with the country's booming industrial centres meant seaside holidays were no longer the preserve of the wealthy (Walton, 2000). As the number of coastal resorts grew, so too did the hotels, piers, theatres, ballrooms and fairgrounds built to attract and entertain visitors (Chapman and Light, 2011). However, from the 1970s a long-term economic decline set-in, brought about in large by the increasing affordability of air-travel and overseas holidays (Walton, 2000). Since then, seaside towns have encountered different stages of evolution and in some cases regeneration (e.g. Brighton) due to variations in factors such as geography, governance, resources, and infrastructure (House of Lords, 2019). Yet, for the seaside resorts that have continued to face socio-economic difficulties, there are some common themes in the challenges they face.

Firstly, tourism has been described as a "poisoned chalice" for seaside resorts because of the low-skilled, low-paid, and seasonal nature of employment it brings (Agarwal et al., 2018). Many seaside resorts have struggled to diversify their local economies away from a reliance on accommodation and hospitality and their geographic location on the periphery, combined with often poor transport links, leaves them cut-off from the larger national economy (ONS 2021); Sim and Major, 2022).

Secondly, this limited economy can drive distinct migratory patterns, with outward migration of many young people for better jobs and prospects which further deters industries and businesses investing in seaside resorts and offering professional or more highly-skilled careers (Wenham, 2020; Leckie et al., 2021). On the other hand, seaside resorts attract a comparatively large inward migration of retirees, who can stimulate certain sectors of the local economy but also increase demand on local social care and health resources (Beatty et al., 2014; Leonard, 2016; ONS, 2020b).

Thirdly, seaside resorts encounter significant housing pressures. The combination of low-wages and a housing market driven by high second-home ownership and premium holiday properties (often temporarily-let in peak times, and under-used for other periods) can create distinct affordability barriers (HCCLGC, 2007; Agarwal et al., 2018). Various Government reviews have also established that coastal towns suffer disproportionately from poor-quality housing stock (HCCLGC, 2007; House of Lords, 2019). This often results from the tourist trade's physical legacy, with conversion of run-down commercial holiday accommodation and Victorian houses into hostels, houses in multiple occupancy[1] (HMO) and small flats (Ward, 2015; Agarwal et al., 2018). Studies have found that in seaside resorts socio-economic deprivation can cluster around poor-quality, privately rented HMOs (Agarwal et al., 2018). Numerous government reviews have also stressed that substandard housing stock is one of the most important socio-economic

disadvantages facing seaside resorts and has long-frustrated regeneration efforts (Beatty and Fothergill, 2003; HCCLGC, 2007; Walton and Browne, 2010; Beatty et al., 2014; House of Lords, 2019).

Lastly there is some evidence (Beatty and Fothergill, 2003; Ward, 2015) to support a link that many Local Authorities have made between the stock of small, relatively cheap privately-rented HMOs and inward migration of vulnerable populations of social support claimants from neighbouring areas (HCCLGC, 2007; House of Lords, 2019; CMO, 2021). Local Authorities have raised concerns that this places additional pressure on local services which are not adequately recognised in central funding and resourcing allocation decisions (House of Lords, 2019).

In sum, we see in many seaside resorts the "persistence, complexity, and distinct spatial clustering of deprivation" (Agarwal 2018p:2). As a result, there are calls for stronger geographic emphasis in research and policy to understand how place-oriented factors and the social ecology of seaside resorts might be contributing to multiple deprivation and social exclusion in English seaside resorts (Agarwal 2018; Ward, 2015).

1.3. Child welfare interventions in coastal areas and the development of preventative services

Over the last decade, child poverty[2] has grown across the UK and by 2022 it was estimated that almost 1 in 3 Children were living in poverty (JRF, 2022). During this period, the rate of children in state care in England has also been rising, from 59 per 10,000 children in 2010, to a high of 70 per 10,000 in 2022 (Department for Education 2022a). Recent studies have detailed a social gradient in child welfare interventions in England, whereby the more socio-economically disadvantaged the neighbourhood a child lives in, the more likely they are to experience a child protection plan or become looked after (Bywaters et al., 2020). This social gradient also becomes steeper in areas with greater socio-economic inequality (Webb et al., 2020). Although the causes of child maltreatment are multi-factorial and poverty is neither a necessary or sufficient factor for maltreatment to occur, it is emerging as a key risk factor and is interrelated with other issues associated with child abuse and neglect including domestic violence, mental ill-health and substance misuse (Bywaters et al., 2022). When it comes to coastal deprivation and child welfare interventions there has been limited focused research attention, however, a recent study by Bennett et al. (2022) highlighted some coastal areas are shouldering a 'double burden' of both increased child poverty and increased rates of children entering care.

The Independent Review of Children's Social Care (2022) (hereafter Macalister review) has called for a 'radical reset' to address England's rising rates of children in state care. This includes the expansion of a simplified preventative Family Help offer that will identify risks earlier and work alongside families to "prevent problems needlessly escalating" (MacAlister, 2022p:30). As Frost et al. (2015) discuss, since Victorian England, family support projects aimed at preventing family breakdown and related social problems have been ever-present, though their conceptualisation in policy and practice has changed over time. Over the last decade, coinciding with a programme of austerity, prevention and early intervention has increasingly been "couched in terms of cost savings, both in terms of avoiding later expensive statutory intervention and producing more economically productive future citizens" (Disney et al., 2022p:2).

Within current statutory guidelines, Local Authorities are already expected to offer Early Help services for children, young people, and their parents/carers to promote family wellbeing and prevent any emerging difficulties escalating towards child protection interventions (Department for Education (DfE) 2018). As a pre-statutory threshold for services, the intention is that families voluntarily choose to engage with the support and advice Early Help offers (Munro, 2011, DfE 2018). The

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[1] An HMO is defined as s a building in which more than one household has living accommodation (other than self-contained flats) there and are sharing a toilet, bathroom or kitchen facilities with other tenants.

[2] When measured as the relative poverty rate, after housing costs.

most common Early Help practice model to have emerged in England involves a single holistic family assessment and multi-agency response often called a Team Around the Child/Family (Lucas and Archard, 2021).

However, following Government austerity since 2011, Local Authorities have fought to minimise the impact of budget cuts by "prioritising child protection work and reducing spending on non-statutory children's services" (NAO 2019 p:10). This has produced wide-spread scaling-back of Early Help and wider family support services, particularly in the most socioeconomically deprived Local Authorities (Webb and Bywaters, 2018). Of the Early Help Services that have remained, many are now being rationed for families with the most complex needs, with Early Help reproducing many of the features of statutory services including "referral and gatekeeping procedures, a screen-and-intervene model of delivery, and a preference for case management over direct work" (Hood et al., 2020p:89). Parents are often reluctant to request Early Help due to fears about judgement from professionals (Burgess et al., 2014; Murphy et al., 2021), and frequently report finding Early Help highly bureaucratic and overly centred on assessing their individual deficits, which can feel judgmental and stigmatising (Daniel, 2015; Gupta, 2017; Featherstone et al., 2018a; Morris et al., 2018a).

2. Torbay context

Torbay is a Unitary Authority consisting of the coastal towns of Torquay, Paignton and Brixham. Situated in the Southwest of England, Torbay's areas of outstanding natural beauty and heritage as a holiday resort, draws large numbers of tourists each year (Rosslee and Chapman, 2015). It is also a popular destination for retirees, with the highest inflow of population being those aged between 50 and 69, while many young people between 20 and 29 leave the area for improved education and work prospects (Torbay Council, 2021b; Council, 2021a). The main sectors of employment in Torbay are tourism (including accommodation and hospitality), retail, and health and social care (Office for National Statistics 2021). Brixham also has a large fishing community and one of England's most lucrative fishing ports.

According to the Index of Multiple Deprivation (IMD) Torbay is the most socio-economically deprived local authority in the Southwest, with 27 % of Torbay residents (approximately 36,720 people of the 136,000 population) living in the 20 % most deprived areas in England (IMD, 2019). Torbay's economy is also one of England's weakest, and lags the UK in terms of business growth, employment growth and productivity (Torbay Council 2021b). When compared both regionally and nationally Torbay is also a significant outlier in terms of its high rates of domestic abuse, poor mental health[3] among both adults and young people and elevated levels of substance misuse and addiction (Torbay Council, 2021b; Council, 2021a). Finally, like many coastal seaside resorts, Torbay has acute housing problems, with our estimates showing rates of family homelessness two times higher than the England average and almost four times greater than the regional average (Ministry of Housing Communities & Local Government 2021). It also has one of the lowest proportions of social rented housing of any English Local Authority (8 %), significantly lower than the national average (18 %); long waiting lists for council and housing association homes; and high demand for temporary accommodation, much of which is provided by Bed-and-Breakfast and hotels often unequipped to support vulnerable people (Torbay Council, 2021b; Council, 2021c).

Although the number of children entering care in Torbay has seen slight recent reductions, over the last decade, rates of child protection investigations, plans and care orders have been significantly and consistently higher than both England and regional averages (Department for Education 2022a,b). Since 2018, a core element of Torbay Council's strategy for children and young people has been to reduce the

numbers of families entering the more costly and high "intensity part of the system by increasing the number of families that could be supported through targeted Early Help" (Torbay Council, 2021b; Council, 2021d p:32). This paper draws on data generated while the researchers were embedded within Torbay Council during remodelling of its Early Help services and reflects on the perspectives of Heads of services, Early Help staff, VCSE and local families regarding the experience of raising children in the seaside resort and accessing family support and guidance.

3. Methods

3.1. Embedded research

The data reported for this case study were generated through eighteen months of embedded research within Torbay between September 2021 and March 2022 using a Researcher in Residence (RiR) model (Gradinger et al., 2019; Lloyd, 2021). Embedded research has multiple definitions; however, at base it typically involves a researcher affiliated to an academic institution being hosted by an organisation (McGinity and Salokangas, 2014). The RiR in this project was hosted by both Children's Services and Public Health Departments. They were, as a RiR, invited to all strategic, implementation and sufficiency boards related to Torbay Council's remodelling of its preventative strategy and Early Help system and given opportunities to regularly share research findings and insights. Due to changes in working practice following Covid-19, many meetings were held online; however wherever possible the RiR attended meetings and presented in person. The RiR was also invited to observe Early Help panels involving multi-agency decision making and to build working relationships with frontline professionals. A community connector also played a vital role ensuring that the perspectives and priorities of the VCSE sector and families fed into the project and that they were regularly included and fed back to regarding progress with recommendations coming out of the research. Having a prescribed community connector, whose role was ring-fenced to spending significant time in communities, dropping into VCSE spaces, volunteering, attending events, building networks and involving people in the research was essential to the project's success in engaging local families.

3.2. Qualitative data collection

The research team carried out qualitative data collection during this period of embedded research including networking with over 35 local charities, community centres, youth centres, peer-to-peer groups, churches, food banks and community cafes. Eleven organisations took part in semi-structured interviews, involving 22 participants (see Appendix A). VCSE sector interviews explored; how these organisations supported families; the factors they perceived were driving the areas high rates of cared for children; and their views on family access to preventative Early Help services.

Semi-structured interviews (n = 26) and two focus groups (n = 31) were also held with parents/carers who had varying levels of interactions with children's services (please see appendix A for sample details), from never receiving support, to formal Early Help, up to child protection plans and repeat child removals. Many parents had experienced multiple episodes of children's services involvement across these thresholds. Most parents/carers that took part in the research were living in areas of Torbay that experienced socio-economic deprivation. The interviews and focus groups explored parents'/carers' experiences of raising and supporting their children and the socio-cultural, economic and systemic factors that enabled or constrained this; their experiences of engaging with services; and how Early Help could best be delivered.

The research team also carried out interviews with Torbay's Early Help team and a Local Councillor. These interviews focused on frontline decision-making, views on the pressures facing Early Help services in a seaside resort and the procedural, financial and political challenges the Council faced in remodelling its services.

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[3] Including elevated levels of depression, anxiety, self-harm and suicide.

In total, 95 individuals participated in the study, enabling a robust cross-section of views and experiences. Ethical approval for the study was granted by the University of Exeter Ethics Committee. Interim and emerging findings were regularly shared with a dedicated steering group comprising directors of Children's Services and Public Health as well as service managers and external senior academics.

3.3. Thematic analysis

Interviews and focus groups were transcribed verbatim and analysed using inductive thematic analysis (TA) (Braun and Clarke, 2006). An inductive form of TA meant that rather than applying preconceived coding frameworks driven by existing concepts or theories, the analysis was data-driven, with interpretation of concepts and patterns wedded closely to participants' expressed views and experiences (Braun and Clarke, 2006). This method of TA required six analytic phases. First, immersion by repeatedly reading transcripts. Second, generating initial 'codes' which stayed close to the raw data but helped distil transcripts; coding was aided by NVivo. Third, establishing themes by tracing repetition across the data, distinct features within and between interviews and stakeholders, locating key words, meanings, perceptions, or experiences and reflecting upon how this related to the broader research question around exploring wider and place-based social determinants. Fourth, review of the initial themes, making repeated adjustments and clarifications. Then the fifth and sixth phase involved titling the themes and confirming the findings. In the reporting of findings, all participants have been provided pseudonyms and any identifying information has been excluded.

Each of the researchers performed the thematic analysis on a subset of data and then cross-checked one another's coding and the overall theme generation. To enhance the validity of the findings, we also carried out respondent validation through feedback loops with the Local Authority and public dissemination events.

4. Findings

4.1. Transience

One of the most significant overlapping themes to emerge from parents'/carers' and professionals' views and experiences on living in Torbay related to transience. Participants discussed inward and outward migration, the seasonal ebb and flow of tourism, the overall sense of turnover and fluidity in the population and its effect on community cohesion.

Common pull factors amongst families who had moved to Torbay from other areas, included: happy memories from childhood holidays; links with family, including parents who had retired to the area; a move for job opportunities; and most commonly, a search for an improved lifestyle for themselves and their children due to the natural surroundings;

> We left all our support and family and friends behind and moved here. And one of the reasons for that was that my childhood in [another seaside resort] was quite idyllic and I wanted to move back down south because I felt it would be better for the children and they'd have more options with regards to their lifestyle, it would be more improved than being in the North. […] And if it didn't work out we thought we could just go back. Sometimes you have got to take these risks. (Lesley, father with children's services involvement).

However, families who had migrated to the area frequently described facing unexpected challenges including: the lack of affordable and good-quality housing; the seasonal, unstable, and low-wage local job market; the limited amenities, activities and parks for children compared to the larger urban areas they had moved from; and the levels of poverty, anti-social behaviour and visible substance misuse in communities;

> I've got a daughter who works in deprived areas of [North West City]. And yes, although they struggle, they don't struggle anywhere near as much as we do. If I'm driving around [North West City] I can spot Action for Children, children centres all over the place. Or like, community centres. We don't have as much of that. (Kinslee, mother whose children went into care).

As the above quote captures, the availability of community centres, youth clubs, and activities for families to meet and socialise were often perceived to be limited in Torbay compared to larger metropolitan areas, making it difficult to make new connections which might provide respite and support with child raising and prevent social isolation. This perception was reinforced by staff/volunteers from Torbay's VCSE, and children's services teams who described the difficulties inward-migrating families faced when they left behind their wider support networks of friends and family;

> I think the challenges within Torbay particularly are, historically, it's a very transient population. People come here on holiday, have memories of it being a nice place to live, and will come here and live, and leave their extended support elsewhere. [….] For lots and lots of reasons, people have high expectations of coming here and find themselves quite isolated when they do get here, quite lonely (Youth Worker at Church & Youth Centre which provides a food and baby bank supporting local families).

In a locality with socioeconomic difficulties and more limited infrastructure and amenities, migrating families could thus be at risk of finding themselves, perhaps unexpectedly, in precarious and stressful circumstances. Although these potential strains on families' lives could be encountered by any family in Torbay, the lack of crucial social support networks available to those who had migrated to the area compounded these families' difficulties.

For parents/carers born and raised in Torbay, the transience of the local population was commonly considered to dilute community stability and cohesion. Parents/carers from Torbay frequently described the importance of community connection and belonging in helping them raise their children. Often reflecting on their own childhoods in the area, participants described how the neighbourhoods or estates they grew up on used to be close-knit, with neighbours helping raise each other's children; disciplining them, feeding them, and looking after them when their parents were at work. Now they were parents themselves, the same connections with neighbours were felt to be missing, and hence similar sources of guidance and support were not available to help them navigate the complexities of child rearing and family life. The transience of the local population was often described as an important contributing factor in this weakening of community ties, a declining sense of common vision, buy-in and belonging to the area and the difficulties families faced building positive, supportive relationships.

In this sense, a recurring aspect of parent/carers and professional's narratives of migration and transience was that of the insider/outsider to the locality, particularly when describing migration from larger metropolitan areas. Torbay was frequently described as a locality that attracts a 'vulnerable' population which regularly move in and out of neighbourhoods and communities (which might be partly explained by the availability of cheap but poor-quality HMOs), echoing evidence from other national reviews examining socio-economic regeneration in seaside resorts (House of Lords, 2019). These accounts fuelled a potentially divisive narrative that this in-migration and transience brought increased risks and fragilities to communities, namely from substance misuse, county lines and anti-social behaviour. When service managers and frontline professionals were asked to reflect on the unique demands facing children's services in Torbay, the challenges of supporting people who had migrated from metropolitan areas was repeatedly raised;

> We absolutely do get families coming into us from lots of different areas. I think that's something that is often people trying to leave some of their troubles behind, they might have wider family in the

bay area, or equally they might not have family and might be moving away from their existing networks, but we do have lots of families who are coming from Liverpool, Birmingham, and Manchester. And I think that's because it was a traditional holiday destination for generations of their family…they come down here thinking that they're going to have a lovely time but unfortunately their problems follow them (Professional from the Multi-Agency Safeguarding Hub).

These families were described as having existing vulnerabilities, "chaotic lives", "fragile" family relationships and as "escaping" from difficulties to an idealised conception of a "better life" by the sea. Frontline professionals felt this was a distinctive and often overlooked dynamic of working in a traditional seaside resort, where a long-standing holiday culture and economy has dominated which acts as a draw for people to the area. Early identification of potentially vulnerable families moving to Torbay, and importantly, feeling that Torbay's Early Help system can respond to the specific combinations of challenges they may face, was seen to be an ongoing area of policy and practice development for managers and frontline staff.

4.2. Limits to prevention and early intervention

The second overlapping theme from interviews with service managers and frontline staff in the Early Help teams related to the deep-rooted nature of marginalisation and disadvantage within Torbay, which in turn, were perceived to both drive high demand for children's services and restrict possibilities for effective support.

Frontline staff described for example how cuts to preventative and early intervention services and increasing financial and housing insecurity had a disproportionate impact in seaside resorts such as Torbay because these areas *already* experienced such acute infrastructural challenges and long-term economic downturn. Many service managers and frontline staff were frustrated that the difficulties confronting them had not been adequately recognised in national policy and decision making:

I think it's quite difficult because it's a small unitary authority and we have a lot of very high levels of need in our area. There's a lot of poverty and there's not a lot of services. And because we're a little seaside town, it's kind of not really been as recognised. So, you know, it's hard for all of us to manage (Team Member, Early Help)

The above quote captures a frustration expressed in interviews across children's services teams, and during observations of strategic meetings and decision making, that the level of attention coastal deprivation and seaside resorts receive in terms of resources, funding and dedicated long-term strategies, is not commensurate with the deep-rooted challenges they have faced over several decades or with the resulting intergenerational demand from many families.

For frontline professionals working in prevention and early intervention, the socioeconomic difficulties of the area, increasing inflationary costs and rising demand for services had implications for what was and was not felt to be possible in their work with families:

So, if you think of Maslow's Hierarchy of Needs and for children to be at their best the children need to have their basics met before they can go through each step and if you can't get the food and the shelter and all that stuff right it is a recipe for disaster and that is for children but that is also for adults. Having a stable base helps support your mental health and all the rest of that comes from that stability (Professional, Multi-Agency Safeguarding Hub)

As the above quote illustrates, professionals described how structural issues such as inadequate housing and financial difficulties could quickly escalate problems for families, especially for those who are already on a difficult trajectory, with risks quickly rising and early intervention support work becoming less effective. Service managers and frontline professionals saw these structural issues as being deeply interconnected

with other difficulties facing local families such as domestic violence, mental ill-health and substance misuse, all of which were disproportionately high in Torbay.

Working in a climate of rising demand, reduced resources, and increasingly complex needs, professionals described feeling persistently stuck on a reactive (back)footing;

I think we're all aware that services are already at maximum capacity as it is. Their waiting times are extremely long[…] we can be working with a family that needs support or a diagnosis for their child now but have to go on a waiting list that can be up to a year or even two years. It's just so unfair on families[…]So yeah, it can be challenging and especially when you read, you think about Early Help as just being the soft touch […]short term basis. But actually, when we get to the nitty gritty of it, we've got some really challenging high-end families that are needing weekly visits and needing all this additional support" (Team Member, Early Help)

To give the Early Help teams increased scope to address the underlying financial and material stressors faced by families, service managers recently added a Department for Work and Pensions advisor and Housing Officer into the Early Help team. Frontline workers in the Early Help team felt this had benefited their practice as it increased their scope to give direct attention to poverty in their work with families. Yet, members of the Early Help team still described feeling they were fighting an uphill battle against the long-entrenched socio-economic challenges within Torbay that meant many parents/carers were trying to raise children in often stressful and precarious circumstances. These professionals discussed the difficulties they faced in maintaining families' faith in, and continued engagement with, the support that could be offered in a climate of long-waiting lists and rising service-eligibility thresholds.

Parents/carers also described the barriers they experienced accessing support for themselves and their children, particularly when it came to specialist services regarding their child's educational needs or mental health;

As far as support goes, on the whole, there aren't many things out there for our children to do, unless it's further afield, and we can't always travel, so that's a difficulty. (Mother, Focus Group 2)

I think even for something like CAMHS [Child and Adolescent Mental Health Services] it is based in Torbay Hospital; that's nearly a whole day for me because if the appointment's ten o'clock, I have to leave at nine, get on the bus, do the ten o'clock appointment. You come out at twelve, it's an hour travelling back, that's one o'clock, two o'clock; they've missed a whole day of school for a CAMHS appointment. And it's things like that, and it's crazy. If you don't drive, it's not accessible at all. (Lara, mother caring for a child with significant learning and physical disabilities)

Parents/carers regularly reported that groups, activities, and services were unevenly distributed across Torbay, or located outside of the Local Authority altogether, in larger urban areas some distance away. The time, cost and inconvenience associated with travelling, particularly in a coastal setting with weak transport linkages, was a significant obstacle for many families. The Early Help team described how the sparsity and unevenness of specialised services meant families often faced diagnostic delays (e.g. for special educational needs) which both constrained possibilities for providing essential support and increased pressures within the family unit.

Interestingly, service providers also felt that at least some of these service-access problems related to the unique difficulties Torbay faced recruiting staff across health, social care, and education sectors to the local area. Within children's services itself, difficulties relating to recruitment and turnover in managerial positions as well as frontline staff, were felt to have been exacerbated by Torbay's peripherality, limited facilities, and housing availability and affordability issues;

We have seen less and less newly qualified social workers coming through. It is only in the last couple years we had stability in the senior leadership

team - before that we had constant different interim senior managers coming in who didn't live in or buy into the area. Having that constant influx of different people from different areas, coming in with ideas that 'we did this elsewhere so it will work here in Torbay', but it doesn't work like that – square peg in a round hole. The churn was significant with faces and people changing from one meeting to the next and that was really undermining a vision and a focus for social work practice. It just created a huge amount of instability in the service. (Professional from the Multi-Agency Safeguarding Hub)

As the above quote depicts, these staff recruitment and retention issues had serious implications for the consistency and stability of local services. Recently improved permanency in senior leadership, was something that many professionals felt had provided greater direction to their practice. However, as many parents/carers who took part in this study highlighted, turnover of frontline staff was still an issue; which limited the opportunities to build long-term trusting relationships between staff and local families and communities. In sum, although many of the challenges professionals faced delivering services resemble other geographic areas in England, accounts suggested these difficulties were amplified by the physical distances, limited housing stock, levels of socio-economic deprivation and transport constraints associated with a more peripheral coastal locality.

4.3. Inequalities and conflicting local priorities

The third theme relates to what many participants described as the deep socio-economic rifts in the locality and the conflicting local priorities this can generate. As a seaside resort, Torbay relies on the annual summer influx of holiday makers and despite efforts to diversify the economy, the hospitality sector remains a significant employer. Herein participants described a key social and political tension, where the priorities of maintaining the area's attraction and prestige as a traditional seaside holiday resort were often seen to outweigh the direct attention given to tackling deep-rooted socio-economic challenges, including low-wages, job insecurity, shortages of affordable housing and access to services;

I just don't think there's been enough investment in the right areas. They've focused on the seafronts to bring in the holiday makers; Torbay's seafront's always getting new revamps, harbour has been getting a lot of funding recently…but the troubled areas don't really seem to have any investment. And they tend to lump all the social housing in these areas so you get big groups of social housing in the back-end areas, just sort of out of sight, out of mind, keep it away from the seafronts. (Jadyn, father who experienced a child protection plan)

In this respect residents often discussed tourism as a double-edged sword, contributing significantly to the local economy, but also bringing strain on local resources, services and amenities and potentially diverting attention from pressing social issues for large portions of the population. For many parents/carers, these perceived tensions around investment and local priorities were important in shaping their lived environment, and the challenges they experienced accessing housing, services, and stable and well-paying employment. This restricted the possibilities for them to provide as they would like to for their children and it was these local social and economic conditions that were seen as key drivers for families falling into difficulties, and Torbay's elevated levels of children on protection plans and in care.

Importantly, parents/carers also discussed local socio-economic inequalities and tensions as playing a role in confidence to seek Early Help and wider support. As addressed elsewhere (El-Hoss et al., 2023), one of the most significant barriers to parents/carers seeking early support during emerging personal and family difficulties was fear of judgement from service providers and potential allegations of neglectful parenting. Data from across England show that areas of higher, concentrated wealth inequality experience higher levels of statutory child protection interventions (Webb et al., 2020). This study found that Torbay high rates of children's services interventions and child removals over a number of years had led to breakdowns in trust between families and service providers, particularly in Torbay's most disadvantaged areas. In this respect, parents/carers also frequently described a felt distance or disconnect between themselves and the professionals they interacted with;

They know better because they've got the qualifications, but they're not living in the real world. You've got some people that are coming to you and they've got no children of their own, yet they can say "Well, I'm going to take your child off you". For what reason? For why? You're not living in this world with us. You try doing it. I bet they wouldn't last five minutes. (Tanya, Grandmother who is a Kinship carer and has been involved in multiple child protection plans)

The inequalities in Torbay and the proposed distance professionals inhabited from the lives of parents/carers living in socio-economically disadvantaged neighbourhoods was seen to be an important factor in low levels of trust between families and local services, including Early Help. Issues of trust that emerged from interviews and focus groups during this research raise important questions around the levels of scrutiny and intervention in poorer neighbourhoods and what this does long-term to families' confidence to seek out help at early stages and the ability of professionals to build rapport with communities.

5. Discussion

There is increasing evidence that spatial dynamics in rural and coastal areas influence the incidence, structuring, and experiences of multiple deprivation and social exclusion, as well as their associated care ecologies (Agarwal et al., 2018; Burke and Jones, 2019; Disney et al., 2022; Sim and Major, 2022). Yet research in specific geographic localities like seaside resorts which examines individual and family experiences at the convergence of geography and socioeconomic deprivation is more limited (Wenham, 2020; Preece and Lessner Lištiaková 2021). Even less research has examined how the unique sets of challenges surrounding seaside resorts intersect with children's social care and the delivery and accessibility of preventative Early Help services. These are however important areas of inquiry with international significance for debates around rural and coastal social exclusion and regeneration (Shucksmith and Brown, 2016). This paper has begun addressing this gap by examining the core challenges families, and the service providers seeking to support them through Early Help, faced in Torbay.

Families are often seen in political and policy discourse to "either contain and mitigate against risk, or actively produce, forms of social risk" (Jupp, 2017p:267). Child welfare policy and social work practice often construct 'risk' in terms of individual parental failings, pathology, and self-responsibility; decontextualising families from their wider geographies and socio-economic conditions (Gupta, 2017; Jupp, 2017). We found that Torbay was a locality with complex socio-economic and environmental dynamics seen as both enabling *and* constraining to people raising and supporting their children. The depiction of the seaside resort as a site of escape, new beginnings and improved lifestyles featured heavily in parents'/carers' accounts of their decisions to relocate to the area or their views on the advantages of raising children in this setting. Yet, parents/carers explained that below the surface socio-economic inequalities and infrastructural shortfalls co-exist spatially with the pleasure-seeking venues and activities of tourism. Peripherality, inadequate transport linkages, a low-wage economy, population transience and housing shortages were factors shaped by the physical, cultural, and economic heritage of Torbay and had an important impact on family life, particularly for those living in the most disadvantaged communities.

Parents/carers and VCSE groups in this study also frequently discussed the significance of the social and economic divides they

encountered in Torbay. This contributed to a sense of distance in parent/carer descriptions of their interactions with, or perceptions of, local politics, decision-making, services, and frontline professionals. Issues around trust in the child and family welfare arena is a perennial topic, with countless reports and studies highlighting parent/carer experiences of judgemental, stressful, and shaming interactions. However, the *experience* of social divides and inequalities from the perspective of parents/carers within a seaside resort can differ – with deluxe holiday homes, harbours hosting luxury yachts, and expensive hotels, restaurants and cafes catering for holiday makers coexisting in a small geographic locality alongside areas facing some of the worst health and education outcomes in the country, and some of most scarce and worst conditioned housing (Torbay Council, 2021b; Council, 2021a). In this study, this contributed to parent/carer perceptions that local priorities were skewed towards maintaining the area's income from tourism as opposed to concentrating resources and investment in local communities facing hardships. The stark social divides in the locality also fuelled parent/carer perceptions that services and professionals, often described as encompassing differing sets of values, expectations and experiences regarding childhood and 'good' parenting, found it difficult to understand the constraining environmental factors low-income communities and families may confront raising children.

This is a debate for practice and practitioners that is gaining increased attention as our knowledge grows about how significantly more likely children and families in poverty are to be the subject of state intervention (Morris et al., 2018; Bywaters et al., 2020; Bennett et al., 2022). Addressing child welfare inequalities is not only about addressing the social, infrastructural, and economic determinants of these inequalities – but reflecting on child welfare practice, the professional gaze placed on disadvantaged communities, and how trust and rapport can be built so that families feel confident to seek meaningful support at early stages (Authors' Own 2023). As other researchers have argued, bringing the context in which families are raising children into sharper focus is important because too often constrained children's services have to err towards standardisation and universalism in the way services are designed and delivered and the way frontline practice and assessments are carried out. Featherstone et al., (2018b) argue that Local Authorities tend to offer similar 'menus' of child and family welfare programmes (particularly parenting courses and child behavioural programmes), irrespective of context and what being a parent/carer in a particular city, town or neighbourhood *feels* like, how these experiences may differ and the unique combinations of barriers/enablers to help and support that families may encounter. This means that any work with individual families starts by recognising and highlighting "the structural underpinnings of families' hardships [and] recognition that solutions to problems are not only about individual change, but also reflect the impact of social and economic environments on individuals and families" (Featherstone et al., 2018b p:107).

To the backdrop of expanding geographic disparities in the UK and growing pressures in health and social care, 'levelling-up', 'localism' and 'place-based' solutions are now becoming an increasing aspect of recommendations to improve children's life chances, prevent family breakdowns, and reduce the numbers of children entering care (House of Lords Public Services Committee, 2021; Department for Health and Social Care, 2022; UK Government, 2022). The UK Government's strategy for children's social care reform proposes that expanded Family Help offers "will be based within and tailored towards their local communities" (Department for Education, 2023p:33). Undoubtably, changes to the scope and delivery of Early Help in England will need to consider the attuning of prevention and early intervention strategies to the unique social, economic, and infrastructural challenges that confront families in different localities. In Torbay for instance, a preventative strategy could better recognise the significant stress acute local housing shortages place on families, the particular support needs of families relocating to the area and potential barriers families face accessing specialist services. Of course, these are considerations that will be

important to preventative strategies in every area; however, recognising that subtle differences in emphasis are required from location to location can ensure more effective engagement with and support for the existing strengths, skills and capabilities that each area offers.

In bringing 'place' more sharply into focus in children's social care there are however some important considerations. First, localities facing severe socio-economic inequalities can also encounter divides in voice and power in local agenda setting and decision-making. Place-based approaches need to consider how the needs, priorities and perspectives of marginalised and disadvantaged communities can feature more meaningfully in the design and delivery of local family welfare strategies. The high rates of child protection investigations and removals in some of the most disadvantaged neighbourhoods over a number of years had left a legacy of mistrust in Torbay, meaning that for a new Early Help strategy to effectively engage families, an essential process of (re) building trust is needed. The meaningful participation of families and communities who are socially and economically marginalised in the framing, design and delivery of services is therefore an important component in trying to configure locally-informed preventative strategies. This was an outcome of the research that was discussed in-depth with Torbay Council during the project and they responded by developing parent/carer panels, hosted by local VCSE groups, to feed core local needs and priorities more directly into the planning of Early Help services.

Secondly, the themes that emerged from this study around resource allocation and the perceived overlooking of Torbay's socio-economic challenges echo important discussions around peripherality in previous research in the region. For instance, Sim and Major (2022) argue that perceptions of areas of natural beauty and holiday destinations as offering a good quality life, together with the often "hidden" nature of socio-economic deprivation has limited a strong political voice at the national level advocating on behalf of rural/coastal regions. The UK government's Levelling-Up Agenda (2022) and investment through the Family Hub initiative are signals this emphasis might be changing. However, the UK Government's place-based approach has been criticised for its emphasis on economic recovery and growth; overlooking the critical importance to any levelling-up efforts of addressing the complex multiple-deprivation *within* areas which can limit them taking advantage of any economic opportunities (Connolly et al., 2021; Bambra, 2022). This is a warning echoed by the Institute for Fiscal Studies (2020), who caution there is no single set of factors characterising 'left-behind' places, and in turn no one-size-fits-all policy agenda. As they state, "Levelling up' will need to be a long-term, multifaceted agenda if it is to succeed where other governments have failed" (2020p:315). In turn, although the increased focus on Family Help services is important, it will only go so far in supporting families out of the material constraints they encounter locally and will need to be accompanied by wider social welfare and economic policies to reduce child poverty and welfare inequalities (Bywaters, 2020; Hirsch, 2023). In a resort area like Torbay, this is often a question of fundamental local regeneration to bring greater access to employment, education, housing, and public services. However, as highlighted in other reports (Association of Directors of Children's Services, 2022), we found service managers and frontline staff were frustrated that a general shift towards short-term funding allocated to Local Authorities through competitive bidding processes, was not commensurate with the long-term planning and investment required to address increasingly complex child and family needs, rising child poverty rates, and the entrenched economic and infrastructural challenges that underpin these in a resort like Torbay.

This is connected to our third point; that to make meaningful progress in the UK government's ambition to shift the emphasis of children's social care from late crisis intervention, towards preventative early support, the barriers service managers and frontline professionals face in delivering stable, accessible, and effective services and resources need to be addressed. In Torbay, the challenges of staff recruitment and retention, the turnover of professionals and the difficulties attracting people

to a more peripheral area constrained the effective delivery of services. Focused long term investment in skills and retention in health and social care in rural and coastal areas is required to enable Local Authorities to achieve the types of turn-around in outcomes for children and families set out in Department for Education (2023) strategy for children's social care.

This calls into question whether the current structure of performance management, quality assurance, and compliance Local Authorities are subject to allows sufficient space for more place-sensitive strategies to be developed. For instance, recent analysis of Ofsted recommendations in England found recommendations "less sensitive to the contextual differences between local authorities than one might expect" (Hood et al., 2019p:19). Important factors within Local Authorities such as rural, coastal, or urban geographies, population profiles, levels of socio-economic deprivation, housing infrastructure, available resources and funding, and localised issues around staff recruitment/retention are rarely directly addressed. Allowing more sensitivity to place in the regulation of services would begin to shift the dial from a homogenised risk-based approach, towards one that encompasses how Local Authorities and Children's Services departments are responding to the socio-economic pressures in their localities and the extent to which resourcing and funding is proportionate to them meeting these challenges.

6. Conclusion

The experiences of one resort such as Torbay cannot be unquestionably extrapolated to represent all. However, we know that many English coastal areas like Blackpool, Morecambe and Hastings are experiencing high levels of socio-economic deprivation and negative cycles of high numbers and associated costs of children in care. It is likely that many of the issues raised in this paper around local economy, geography, population, and infrastructure both shape family life and the delivery of preventative services in other localities. Further quantitative research is urgently needed to analyse and compare the patterns of demand on children's social care within and between coastal areas as compared to inland locations. This should include more granular analysis that takes into consideration the diversity that exists between coastal areas themselves. Further qualitative research is also needed to examine both family experiences within and between these localities as well as the perspectives of service providers to help understand how geography impacts experiences of family life and the design and delivery of services supporting child and family welfare. Drawing lessons from effective strategy design and delivery in these localities will also help other coastal communities address rising demand on children's services and improve engagement with communities.

CRediT authorship contribution statement

Thomas El-Hoss: Conceptualization, Data curation, Formal analysis, Investigation, Methodology, Project administration, Resources, Software, Validation, Writing – original draft, Writing – review & editing. **Felicity Thomas:** Conceptualization, Data curation, Formal analysis, Funding acquisition, Investigation, Methodology, Project administration, Resources, Software, Supervision, Validation, Visualization, Writing – original draft, Writing – review & editing. **Felix Gradinger:** Conceptualization, Data curation, Formal analysis, Funding acquisition, Investigation, Methodology, Project administration, Resources, Supervision, Validation, Writing – original draft, Writing – review & editing. **Ms Susanne Hughes:** .

Declaration of competing interest

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

Data availability

The data that has been used is confidential.

Appendix A. Sample summary

Sector	Organisation/Family	Individuals	Description
Early Help	Family Intervention Team (FIT)	Team Member x 7	
	Multi-Agency Safe Guarding Hub	Professional x 1	
	Subtotal	8	
Voluntary and Community Sector	Youth & Community Centre 1	Manager x 1 Youth Worker x 1	
	Youth & Community Centre 2	Manager x 1 Housing Officer x 1	
	Church & Youth Centre	Manager x 1 Youth Worker x 1	
	Community Centre 1	Manager x 1 Youth Worker x 1	
	Community Centre 2	Volunteers x 3	
	Community Café 1	Member x 1	
	Community Café 2	Owner x 2	
	Local Children's Charity	Family Worker x 1	
	Parent Support Group (peer to peer)	Founders x 3	

(*continued*)

Sector	Organisation/Family	Individuals	Description
	Youth Project	Project Leader x 1	
		Staff x 1	
	Care Leavers Charity	Staff x 2	
	Subtotal	**22**	
Families	**Family 1**	Wendy (Mother 47)	Undergoing care proceedings
	Family 2	Jay (Father 37)	Experience of child protection plans
	Family 3	Tommie (Father 48)	Father with SEN; experience of child removal
		Alana (Partner, age not disclosed)	
	Family 4	Bernie (Mother 37)	Received Early Help when leaving abusive relationship
	Family 5	Lesley (Father 54)	Parent of child with SEN; domestic abuse survivor; experience of Early Help and children's services
	Family 6	Melyssa (Mother 40)	Children with mental health difficulties; Experience of Early Help; multiple child protection plans
	Family 7	Lara (Mother 48)	Children with SEN; Experience of Early Help
	Family 8	Jodie (Mother 51)	Child with SEN; no interaction with Children's Services.
	Family 9	Kinslee (Mother 46)	Multiple children in care; experience of Early Help
	Family 10	Mollie (Mother 42)	Parent of child with SEN; experience of Early Help
		Davina (Grandmother 70)	
	Family 11	Cristen (Mother 44)	Parent of child with SEN
	Family 12	Stacee (Mother 42)	Parent of children with SEN
	Family 13	Abi (Mother 36)	Domestic abuse survivor; mental health issues; no interaction with Children's Services
	Family 14	Mae (Mother 43)	Parent of children with SEN; experience of child in need plans; Early Help services
	Family 15	Dani (Mother 29)	Parent that regularly attends local children's centre groups and activities; no interaction with Children's Services.
	Family 16	Jessy (Mother 52)	Parent of children with SEN; No interaction with Children's Services.
	Family 17	Ashlyn (Mother 39)	Domestic abuse survivor; experience of Early Help
	Family 18	Tegan (Mother 38)	Experienced repeat child removal
	Family 19	Steph (Grandmother 51)	Kinship carer; experience of Early Help
	Family 20	Jadyn (Father 47)	Experience of child protection plan
	Family 21	Bill (Father 50)	Experienced repeat child removal
		Martha (Mother 28)	
	Family 22	Laurene (Mother 42)	Parent of child with SEN; No interaction with Children's Services
	Family 23	Tanya (Grandmother 60)	Kinship Carer; experience of multiple child protection plans
	Focus Group with Families – 1	14 parents	Varied experiences of services and thresholds
	Focus Group with Families – 2	17 parents	Varied experiences of services and thresholds
	Subtotal	**57**	
Other	Council	Elected Member	
	Care Leaver	Female (21)	
	Housing Association	Team Member x 2	
	Children's Centre 1	Family Support Workers x 4	
	Subtotal	**8**	
Total		**95**	

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