

EVIDENCE FOR THE EQUAL OPPORTUNITIES COMMITTEE INQUIRY INTO AGE AND SOCIAL ISOLATION

Introduction

CEL CIS is the Centre for excellence for looked after children in Scotland. We exist to improve the experiences and life chances of children and young people in Scotland who are 'looked after' by local authorities, and those who have left care. We do this by working alongside the professionals who touch their lives, and the wider systems responsible for their care.

We welcome this opportunity to submit written evidence to the Equal Opportunities inquiry into age and social isolation. It is relevant to all looked after children and young people, but we have significant concerns, based on our research and engagement with the sector, about the vulnerability of Scotland's 'care leavers' to social isolation. These are young people who have been 'looked after' by local authorities, and for whom public services are under duties to provide support and assistance into adulthood. We have focused our response on the particular issues facing care leavers.

Key Statistics¹

- In the year 1 August 2012 to 31 July 2013, 1,352 young people aged 16 and over 'ceased to be looked after' by a local authority in Scotland; these care leavers joined a total population of over 3,800 young people eligible for aftercare support.
- More than a quarter (27%) of those leaving care did not have a plan or a named contact on the date of discharge.
- Of the total population of care leavers, only 24% were known to be in education, training or employment.

1. Prevalence of social isolation in urban and rural settings

While there is no agreed measure of social isolation, it is generally seen as referring to separation from social or familial contact, community involvement, or

¹ See *Children's Social Work Statistics Scotland 2012-13* and *Educational Outcomes for Scotland's Looked After Children 2012-2013*

access to services.² It is closely related to the idea of ‘social exclusion’, where this separation occurs for reasons that are beyond the control of those subject to it.³ It is therefore possible to consider the scale of social isolation among care leavers by reviewing the different forms of exclusion they experience. Currently, young care leavers are disproportionately likely to:

- leave school early⁴ and become ‘NEET’⁵ (not in education, training or employment)
- fail to maintain a positive destination nine months after leaving school
- become teenage parents⁶
- end up in prison⁷ or homeless⁸
- be excluded from school⁹

Research has also pointed to a high prevalence of ‘loneliness’, another related concept, among looked after young people and care leavers:

- The Centre for Social Justice (2014)¹⁰ found that 55% of the care leavers in their sample reported finding it either very or quite difficult to stay in touch with former carers and their birth family.
- The Office for the Children’s Rights Director (2012)¹¹ found that 14% of the care leavers they surveyed felt there was just one person they could inform if they were harmed, while a further 11% of respondents were either uncertain of who they could tell or felt that there was no one they could tell if they were harmed.

² *Loneliness and isolation Evidence Review*. London: Age UK.

³ Barry, B. M. (1998). *Social exclusion, social isolation and the distribution of income*. Centre for Analysis of Social Exclusion, London School of Economics:
<http://core.ac.uk/download/pdf/93935.pdf> accessed 1st March 2015.

⁴ *Educational Outcomes for Scotland’s Looked After Children 2012-2013*
<http://www.gov.scot/Resource/0045/00459479.pdf> accessed 1st March 2015.

⁵ *Ibid*

⁶ Department of Health. (2004). *National Service Framework for Children, Young People and Maternity Services*. London: Department of Health.

⁷ Ministry of Justice. (2012). *Prisoners’ childhood and family backgrounds: Results from surveying Prisoner Crime Reduction (SPCR) longitudinal cohort study of prisoners*. London: Ministry of Justice.

⁸ *Operation of the Homeless Persons Legislation in Scotland: 2013-2014*
<http://www.gov.scot/Resource/0045/00453960.pdf> accessed 1st March 2015.

⁹ *Educational Outcomes for Scotland’s Looked After Children 2012-2013*
<http://www.gov.scot/Resource/0045/00459479.pdf> accessed 1st March 2015.

¹⁰ Centre for Social Justice. (2014). *Survival of the Fittest? Improving Life Chances for Care Leavers*. London: Centre for Social Justice.
http://www.centreforsocialjustice.org.uk/UserStorage/pdf/Pdf%20reports/CSJ_Care_Report_28.01.14_web.pdf

¹¹ Ofsted. (2013). *National Overview Report of Children and Young People’s Views: Care4 Me & AfterCare Surveys, Local Authority Safeguarding and Looked After Children Inspections June 2009 - July 2012*. <http://resources.leavingcare.org/uploads/e790493dce1d8cb76d3576663aa4b740.pdf> accessed 1st March 2015.

- Duncalf (2010)¹² accessed 310 care leavers aged 17 - 78 from across the UK and identified 'feeling alone or abandoned' as being one of the top five negative experiences of leaving care.
- Ridley and McCluskey (2003) found that that many young care leavers felt that leaving care had a negative impact on their health, particularly as they did not have enough money to eat well and were depressed as a result of isolation.¹³

Both urban and rural settings pose particular opportunities and challenges with regard to care leavers. In urban settings they will potentially have access to more services and people, yet it is very easy to become anonymous in an urban setting where pressure on services is high. By contrast, in rural areas services may be more difficult to access, but those services care leavers can engage with may know them and their situation well.

2. Impacts of social isolation

Social isolation hinders the development and maintenance of supportive relationships, which have been identified as an important factor in developing 'resilience' - the ability to overcome challenging circumstances and cope with adversity.¹⁴ Resilience is important for care leavers who must learn to live independently, engage in education and employment and avoid issues such as addiction and homelessness in a context of multiple stressors. Poverty further intensifies young people's isolation, threatens their coping skills and can subsequently lead to homelessness.¹⁵

Social isolation is one of a number of interrelated current stressors, including relationship breakdowns and bullying, known to increase the risk of self-harming and suicidal behaviour among young people.¹⁶ A City of Glasgow council study suggested that among looked after children in their residential settings almost half had engaged in deliberate self-harm.¹⁷ An analysis of the figures relating to deaths of children in care collected by the Social Work Inspection Agency (SWIA)¹⁸ showed

¹² Duncalf, Z. (2010). *Listen up! Adult care leavers speak out: The views of 310 care leavers aged 17-78*. Manchester: Care Leavers Association.

¹³ Ridley, J. & McCluskey, S. (2003). Exploring the perceptions of young people in care and care leavers of their health needs. *Scottish Journal of Residential Child Care*, 2 (1), 55-65.

¹⁴ Stein, M. (2005). *Resilience and young people leaving care: Overcoming the odds. Research Report*. York: Joseph Rowntree Foundation.

¹⁵ Biehal, N., & Wade, J. (1999). Taking a chance? The risks associated with going missing from substitute care. *Child Abuse Review*, 8(6), 366-376.

¹⁶ Hawton K, Saunders K and O'Connor R. (2012). Self-harm and suicide in adolescents. *Lancet*, 379, 2373-2382.

¹⁷ Piggot J, Williams C, McLeod S et al (2004) A qualitative study of support for young people who self-harm in residential care in Glasgow, *Scottish Journal of Residential Child Care*, 3 (2), 45-54.

¹⁸ On 1 April 2011 the work of the Social Work Inspection Agency passed to a new body, Social Care and Social Work Improvement Scotland (SCSWIS)

that at least two children in care have died from suicide every year since 2000. There is not a legal requirement to report care leaver deaths unless they are in receipt of services from the local authority social work department¹⁹. However, there is evidence that the number of suicides among care leavers is much higher than among those still in care.²⁰

3. Best practice and ideas that could be shared across Scotland, including examples of targeted support or initiatives (including housing, health, third sector)

Nurturing Relationships

Care leavers who make a successful transition to independence tend to have developed strong attachment relationships with foster carers or family members, according to a knowledge review from 2010.²¹ An international literature review on the promotion of resilience has indicated that professional and personal support received after leaving care makes a substantial difference to outcomes.²² Supporting positive peer relationships within care settings and at school or work combats social isolation.²³ The variable practice of contacting young people and care leavers via electronic media such as texting or social media should not be seen as a blanket solution. Rather, the emphasis should be on regular face-to-face contact.²⁴ As far as is possible, care leavers should be enabled and actively encouraged to remain connected with their former residential units and/or foster carers, particularly at significant dates such as Christmas or birthdays, but also during the course of the year to share a meal or go on a day trip. There may be legitimate concerns regarding child protection or the interpretation of relevant regulations and these must be addressed to remove barriers to ongoing contact with care leavers.

¹⁹ As of April 1st 2015 there will be a duty to report on deaths of care leavers who are engaged with services

²⁰ Cowan, C. (2008) Risk factors in cases of known deaths of young people with experience of care: an exploratory study. *Scottish journal of Residential Child Care*, 7 (1): 34-42.

²¹ Stein, M & Morris, M. (2010). *Increasing the number of care leavers in 'settled, safe accommodation': Vulnerable children knowledge review*. Centre for Excellence and Outcomes in Children and Young People's Services. London: C4EO.

http://www.centreforsocialjustice.org.uk/UserStorage/pdf/Pdf%20reports/CSJ_Care_Report_28.01_14_web.pdf accessed 1st March 2015.

²² Newman, T. and Blackburn, S, (2002) Transitions in the Lives of Children and Young People: Resilience Factors. *Interchange*, 78, Edinburgh: Scottish Executive.
<http://www.barnardos.org.uk/ic78.pdf> accessed 1st March 2015.

²³ Furnivall, J. (2013). Understanding suicide and self-harm amongst children in care and care leavers. *IRISS Insights*, no.21 <http://www.iriss.org.uk/resources/understanding-suicide-and-self-harm-amongst-children-care-and-care-leavers> accessed 1st March 2015.

²⁴ McGhee, K., Lerpiniere, J., Welch, V., Graham, P., & Harkin, B. (2014). *Throughcare and Aftercare Services in Scotland's Local Authorities: An National Study*.

Reducing social isolation among care leavers begins BEFORE they leave care

Previous research has recommended that planning for life after care should begin early, be collaborative, involve young people and those who help to support them, and allow for contingency planning when arrangements break down.²⁵

Experiences in care can protect against social isolation upon leaving care. Stable placements have been shown to lead to better outcomes in education, career and relationships and improved wellbeing²⁶. Throughout their time in care young people should therefore remain in the same placement when possible, provided it is in their best interests. In cases where movement is unavoidable, young people should be able to remain in touch with the staff, friends and carers with whom they have formed relationships.²⁷ In cases where the young person is moved many miles away consideration must be given to the type of contact that is maintained, to ensure that it is meaningful rather than tokenistic.

Leaving care should be based on the needs of the young person, not services

There must be flexibility in a young person's journey out of care to ensure that their individual developmental needs are met. These needs cannot be determined by the age of the young person alone. The younger a person is the more likely they are to experience loneliness.²⁸ This loneliness is considerably compounded as a consequence of being looked after. It is important that mental health services recognise that the transition from child to adult services is likely to coincide with moves to independence for young people in care. Appropriate planning should take place from an early stage to ensure that important relationships and practical sources of support can be maintained.

A gradual transition to independence

It must be recognised that it is not appropriate or desirable for young people to move directly from care to full independence, where tenancy can be lost and homelessness can result from a single mistake.²⁹ As outlined in the 'Staying Put Scotland' guidance and reaffirmed in the Children and Young People (Scotland) Act 2014 Part 11 (Continuing Care) continuity of care should be a reality for care-leavers who were cared for away from home at the time of leaving care. We would like to see that all care leavers, regardless of the placement type, can remain in a stable placement that is not fully independent for as long as they need.

²⁵ Ofsted. (2009). *Support for Careleavers*. London: Ofsted.

²⁶ Biehal, N., Clayden, J., Stein, M., & Wade, J. (1995). *Moving on*. London: National Children's Bureau.

²⁷ Scottish Government (2013) *Staying Put Scotland Guidance*.

<http://www.gov.scot/Resource/0043/00435935.pdf>

²⁸ Griffin, J. (2010). *The lonely society?* Mental Health Foundation.

²⁹ McGhee, K., Lerpiniere, J., Welch, V., Graham, P., & Harkin, B. (2014). *Throughcare and Aftercare Services in Scotland's Local Authorities: A National Study*.

A range of initiatives that have the effect of reducing social isolation among care leavers are currently in operation. They aim to make services accessible to young people while allowing positive relationships to develop:

Co-location of services - Perth & Kinross Council operate 'City Base' (@Scott Street) an information and counselling service for young people run with young people. Throughcare and aftercare services operate from the same building, which also houses drop-in surgeries from NHS Tayside. The co-location of services and opportunities maximises chances to reduce social isolation among care leavers and meet a wide range of their needs.

Suitable Accommodation - The Aberdeen 'Foyer' is a charitable organisation and social enterprise which works to prevent and alleviate youth homelessness and unemployment. They provide supported accommodation to former homeless and at-risk young people alongside a range of education, training, mentoring, counselling, employment support and health improvement services.

Mentoring - We welcome the recent announcement of increased investment in mentoring programmes for looked after children. If implemented well, this National Mentoring Scheme will support educational outcomes, and should also have the effect of increasing resilience and self-esteem and fostering important relationships among looked after children and care leavers. While currently the scheme targets young people up to 14 years of age, the resilience fostered through participation may protect against social isolation when they leave care.

4. Potential ideas for improvement and influencing policy

Successful implementation of new policy initiatives: We welcome the changes brought about by the Children and Young People (Scotland) Act 2014 with respect to looked after children and young people and care leavers, in particular the extension of corporate parenting duties to a wide range of public bodies as articulated in Part 9 of the Act, the extension of After Care services from age 21 to age 25 for care leavers as described in Part 10 of the Act, and the introduction of Continuing Care as a legal obligation on Local Authorities as outlined in part 11 of the Act. We see these policy developments as a positive step toward reducing social isolation among care leavers. We recognise that these changes alone are not sufficient to improve outcomes for care leavers: the challenge is to ensure that these changes are effectively implemented.

We highlight the Scottish Government's explicit statement on the importance of relationship-based practice for looked after young people and care leavers, as per *Staying Put Scotland* which emphasises the importance of connectedness and belonging. Relationships which transcend role-boundary and setting should be

encouraged and supported where this is the wish of the young person and is in their best interests.

Consistent implementation of policies to support care leavers: Support available differs greatly in terms of availability, scope and quality. Across Scotland access to services varies according to location³⁰; it has been suggested that over half of residential care homes fail to offer appropriate information and support for young people leaving residential care.³¹ Arising from the Children and Young People (Scotland) Act 2014, and with effect from April 2015, local authority throughcare and aftercare services will have a duty to provide support to meet the assessed needs of young people up to the age of 26.

While there has been a legal duty to support care leavers up to the age of 19 under the Children (Scotland) Act 1995 and a right to request assistance up to the age of 21, the implementation of this legislation across Scotland has been inconsistent.³² This needs to be addressed in light of the fact that care leavers can now request assistance up to the age of 25. The challenge remains to ensure that legislation translates into a meaningful difference for young people. To this end we would like to see that appropriate implementation drivers are in place; the appropriate staff should be in place with the requisite skills, organisations should be adequately resourced and have the capacity to meet new demands and there should be clear leadership.

Be attuned to diversity in the care leaver population: Care leavers are a diverse group. There is variety in not only their pre-care experiences, needs, abilities, and their cultural, ethnic or religious backgrounds, but also in their experiences in care placements.

Children who have been looked after at home have been identified as a group particularly vulnerable to social isolation.³³ While the attendance at school of looked after children in Scotland overall is poorer than average, the figures suggest that it is the very low attendance of children looked after at home with parents which contributes significantly to the low overall average attendance of looked after children. Efforts should be made to ensure that it is less likely for any looked after child to miss out on school through exclusion, truancy, lack of motivation, or the inability to afford to stay on after 16. This is particularly important in the case of those looked after at home. Research conducted by CELCIS with Barnardo's has

³⁰ Ibid

³¹ Care Commission. (2009). *Throughcare and aftercare provided for children and young people in residential care: Are services meeting the standards?* Dundee: Care Commission.

³² McGhee, K., Lerpiniere, J., Welch, V., Graham, P., & Harkin, B. (2014). *Throughcare and Aftercare Services in Scotland's Local Authorities: An National Study*.

³³ As found in research conducted by CELCIS with Barnardos. The report: *Overseen but Often Overlooked* is due to be published this year.

suggested that the complex and substantial needs of children who are looked after at home are often minimised, and they do not gain access to services they need and are entitled to.

Looked after children and young people with disabilities are also a marginalised group. A series of workshops held as part of a knowledge share identified a number of issues including the multiple challenges faced by agencies in identifying disabled children and young people in the care systems of the United Kingdom; the meaningful involvement of children with a disability in decision making; and advocacy for looked after children with a disability.

Looked after asylum seeking children or children looked after by a local authority whose immigration status is uncertain may be particularly vulnerable to social exclusion, particularly as they transition out of care and are met with confusion and conflicting information regarding their rights and entitlements. Many of these young people will be at risk of homelessness and exploitation.

Thank you for this opportunity to contribute to this important inquiry. We would welcome any further discussions with Committee.

CELCIS Contact:

Dr Lisa Ann Kennedy

Policy Implementation Associate

lisaann.kennedy@strath.ac.uk

0141 444 8504