Let's Face It!: Young People Tell Us How it Is

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Introduction

In 2003, Who Cares? Scotland marked its 25th year by carrying out a major consultation with young people who are currently experiencing care in Scotland. Even with recent developments (the setting up of the Care Commission, the Scottish Social Services Council and the Scottish Institute for Residential Child Care and the creation of national care standards), young people continue to report negative care experiences. It is disappointing that young people raised serious concerns in relation to many fundamental aspects of their care. The report *Let's Face It!* (Who Cares? Scotland, 2003) highlights a number of serious issues, such as: the lack of emotional support for young people; the need for concentrated efforts to tackle bullying; the lack of meaningful inclusion in decision making about their lives; the importance of continuing contact with family and friends; inappropriate and harsh parenting by substitute carers; and a lack of certainty about future support when they leave the care setting. These issues are not new and have been documented in a number of previous reports (Fletcher, 1993; Friday, 1998; Shaw, 1998; Who Cares? Scotland, 1997). This report highlights, however, the continuing need to address the issues raised by young people in care.

The consultation exercise which led to the *Let's Face It!* Report involved 90 young people between July 2002 and November 2003. The first stage of the consultation process involved bringing young people together to identify what currently are the most important issues for them. At a one-day event, 34 young people in residential and foster care identified four key issues:

- Safety and protection
- Relationships with care staff/trust and quality of care
- Friendships and support
- Family

Following this, a two-day residential event involving 62 young people discussed the first three of these issues in more depth and identified possible solutions. It was felt that it was inappropriate to undertake a consultation around the issue of ‘family’ in this setting. This issue, along with the others, was addressed in a
final phase of the consultation which involved individual interviews with 17 young people

In the foreword to the report, Angus Skinner, Chief Social Work Services Inspector, comments that:

‘Who Cares? Scotland clearly developed a strong rapport with the young people who contributed to the report. This led them to share some very personal, and moving, care and life experiences which included loss and bereavement, depression and self harm, and their vital need for consistent, caring, supportive adults in their lives. Some had very positive experiences in the ‘care system’. Many did not or their experiences were not sufficiently consistent.’ (Who Cares? Scotland, 2003, p. ii)

My care experience

In residential care, young people are aware that they are living in a group setting and therefore they articulate issues around individuality and group living very well. Many young people refer to the difference between general rules for all and the unnecessary assumptions, labeling and stereotyping that can become part of general practice and culture within a unit. Their examples highlight how arbitrary decision-making and lack of participation can so easily lead to negative discriminatory practices. Young people do not want the assumption that it is ‘their fault’ for being in care and do want staff to be sensitive to the reasons children and young people need to leave their families and often their communities.

Spread the word that it’s not children’s fault for being in children’s homes because they think it’s you and you’ve done something wrong, but for us it was our parents that had the problem and not us. The minute people look at you, they look with disgust, and they say that you’re in a bad boys’ or bad girls’ home, as if to say you done something really violent, and we haven’t done anything wrong. (Female, 15)

Young people highlighted trust and listening as important factors in relationships with staff.

It is important for all young people to have people to listen to them. The one and only main thing to having a good experience and good relationships with staff, is trustworthy relationships, trust is the key part to any relationship. (Male, 16).
Ask us before the decisions get made, because I mean I have a right in it, it's about us basically, me and my mum, so we should have a right to say. (Male 13).

Young people identified two staff-related issues. The first concerned the sense of history and security in knowing members of staff from previous placements

I have a key worker, she's really good. She used to work in a unit I was in before and I really trust her. She'll sit down and let me talk. She helps me understand the decisions that have been made about me. (Female, 14)

However, high turnover of staff affects the potential to build meaningful relationships.

The place I'm in just now, I've been there for 3 years and I couldn't even name how many staff have come and went there's been that many. It's a good home but I'm just saying that if you get to know a new staff, you talk to them and you feel alright with them and then they leave. Then I think why do I even bother talking to them, because they're just going to be away in a couple of months (Male, 16)

A number of recommendations were drawn from the young people's views on their care experience.

- Explore and address the right to be protected from discrimination as stated in Article 2 of the UNCRC, with particular attention to issues of respect, stereotyping, stigma and negative discrimination for looked after and accommodated young people
- Promote understanding of the reasons young people are admitted into care and to challenge the culture of blame attached to being in the care system
- Identify and promote Article 12 of the UNCRC: the right of young people to express their views freely on all matters affecting them with particular attention to such representation in social work reports, care plans, children's hearings and reviews
- Ensure Article 12 and Article 3 (Best Interests of the Child) of the UNCRC are examined in relation to working with young people in order to ensure the impact of service is beneficial and as intended
- Recognise and encourage that listening to young people and taking their views seriously engenders trust and promotes participation in decision-making
• Scrutinise and evaluate the decisions made and action taken in relation to young people’s lives

• Further promote understanding and discussion on the principles of confidentiality and privacy in terms of their relative and discretionary use, and their relationship to child protection

• Work towards de-escalation practice and non aggressive methods of intervention in residential child care

• Proactively work with young people to offer support and assistance

• Acknowledge and document young people’s experiences through care by including photographs, life story work and diaries as part of the care plan, and that such documentation moves with the child

• Identify the means by which young people can visit previous care placements and consider a mechanism by which young people can retain relationships after leaving a placement

• Investigate the reasons for high turnover of residential staff and also the lack of retention of residential child care staff, and examine the use of short term contracts, sessional staff, and the impact of these arrangements on young people

• Reassess and provide preparation and training for new residential child care staff with particular attention to their understanding of young people and why they are in care

• Reassess and provide training, supervision and appraisal for all residential care staff as part of good and safe child care practice

• Recognise that young people value advocacy and that the best possible advocacy service depends on the acknowledgement of their right to be heard and partnership between all relevant agencies.

My safety in care

From the beginning of the consultation process, the issue of safety and protection has been uppermost in young people’s minds. Three issues in particular were highlighted: bullying; the use of restraint by residential child care staff; and mental health issues related to lack of safety and protection.

Overall, three quarters of the young people interviewed raised bullying as a concern for them. Their experiences of bullying range from fear of verbal abuse to physical attack within and outwith the residential unit.
Bullying in residential care is really frightening for young people. I've tried to tell staff and they sort it out for you but sometimes they can't be there all the time and bullies find a way of getting you on your own. (Female 14).

From outside, I get hassle from the people on the streets too. I get shouted at outside. Some of those that shout at me know the bully in the unit and so they now know I'm in care. They say things about me, the way I look, and I hate it; it stops me from going outside. (Female, 14)

Throughout the interviews it was largely the young men who referred to restraint. Overall, their criticisms are around too many restraints when risk is not an issue; badly handled restraints, and the use of too much force or aggression, including too many people holding them down.

Most times in care I do feel safe, there's only a few times that I don't feel safe and the only times I don't feel safe is when I'm getting bullied or if I'm getting a restraint done which is being done wrong. (Male 15).

Yes, [restraint is the] last resort but in some cases that just doesn't happen. (Male 16).

Mental health and well-being arose from young people's comments about safety and how they feel about themselves: self esteem, feelings of fear, stress and anxiety, the impact of trauma and loss, and experiences of low mood, depression and suicidal thoughts.

You know some people in their lives go through a bad time and [now is] maybe my time. You don't really know what's wrong with you. I feel like I'm in this dark dimension and I can't find the light, I can't get out and I'm trying my hardest to find the light. It's like I've got problems with school, problems with my friends, problems with this and that, and I'm trying to be good at school, and it's working, but then just at the wrong time, the wrong place, I do something and I get into trouble of it. It feels like this dimension is holding me back, every time I'm trying to get out of it, it's pulling me back in again. (Female, 16)

Recommendations from their insights were:

- Further explore and implement Article 19 of the UNCRC which states that state parties apply all appropriate legislative, administrative, social and educational measures to protect the child from all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse, while in the care of parents, legal guardians or any other person who has care of the child
• Address the protection of children without families as stated in article 20 of the UNCRC, specifically the state’s obligation to provide ‘special protection’ for children deprived of their family environment, and to ensure that appropriate alternative family care or institutional placement is made available to them

• Acknowledge that many young people are in care due to a lack of protection alongside the assumption that they are safer in care

• Further develop the knowledge and skills required to identify and respond to the bullying of young people by their peers

• Further assess and plan the work with communities to reduce the bullying of young people by the community

• Implement training for staff on the use and abuse of power including an exploration into the use of bullying as inappropriate and damaging practice

• Promote the fact that young people feel safer in an environment where verbal and physical aggression are kept to a minimum

• Understand that young people will not feel safe with new members of staff and that a degree of safety comes from the building of a relationship

• Rethink and question the use of restraint as common practice, to evaluate the use of restraint and its effectiveness to date, and to train adults in other methods of intervention in order to make clear it is used as a very rare and last resort

• Ensure a fully comprehensive and understandable complaints procedure is in place, including creating a culture in which complaints are taken seriously

• Work in partnership with Who Cares? Scotland and children’s rights officers to promote young people’s views and support the making of complaints

• Develop further understanding of the relationship between young people’s mental health and safety and protection matters, and to make links between the occasional lack of safety in care and the impact of this on young people’s mental well-being

• Provide therapeutic services that address mental health issues for young people and provide support for them

• Provide training on young people’s mental well-being and therefore support adults to support extremely vulnerable young people.
My personal life

Throughout the consultation process, young people have identified family and friends as issues which are crucial to them. The importance attached to family by young people should be of no surprise to us, as this after all relates implicitly to their being of care.

*Sometimes in care you miss your family and that’s hard about being in care, you just feel abnormal…you still don’t see your family and you’re not in a normal house environment in a big home.* (Male 15).

The impact of moving into care, and living there, had an intrinsic effect on friendship for all of the young people who discussed this issue.

*When you go into care it does affect friendship, it’s a simple fact. You’ve got all that stuff at home, all the baggage you come out with and your pals are having a good time and sometimes you’re just thinking ‘Oh God, I’ve not to go back there [residential unit]’. (Male, 17)*

*One day you can be in Glasgow and the next you can be in Fife. I suppose it does affect your friendships because you can’t take them with you.* (Male, 16).

A significant theme developed in the interviews was the lack of friendship between young people sharing the same accommodation.

*There’s no such thing as friendship in care. All you get is acquaintances, but young people, no there’s no such thing as friendship.* (Male, 16)

The issue of police checks was considered by young people as a further hurdle to ‘normal’ friendships.

*It’s good having friends but the down side is that you need to get police checks to have sleepovers and it’s so annoying.* (Male, 15).

A number of recommendations were identified relating to family and friends:

**Family**

- Demonstrate a fundamental commitment to contact and the value of the family – irrespective of dysfunctional background, in line with article 8 of the UNCRC – preservation of identity
• Develop and implement clear and flexible arrangements regarding family contact

• Maximise family contact – appropriate to each individual, as stated in article 9 of the UNCRC – separation from parents

• Support young people and their families with contact (including, but not only, transport)

• Demonstrate a commitment to the maintenance of sibling groups

• Ensure regular contact with other siblings – including those who may be adopted

• Enable access to bereavement counseling

• Provide support to young people and their families to resolve family issues/problems with regard to, where appropriate, article 18 of the UNCRC – parental responsibilities

• Facilitate access to, and private use of, a telephone with due attention to article 16 of the UNCRC – protection of privacy

• Organise regular, and improved, communication between professionals, families and young people

• Foster greater participation of young people and their families in decisions regarding family contact

• Demonstrate a commitment to articles 3 and 12 of the UNCRC by consulting with young people in all aspects relating to their family

• Ensure access to up-to-date information about their family

• Acknowledge and record the young person’s identity and family, by means such as life story work.

*Friends*

• Respect for and support with, the young person’s right in relation to article 15 of the UNCRC – freedom of association

• Provide support with, and the opportunity to maintain friendships

• Promote positive relationships between young people in care

• Provide young people with clear information regarding the purpose and process of police checks
• Explore and develop means of reducing the stigmatizing effects of police checks
• Operate an efficient process for police checks which reduces time scales
• Implement a pro-active and therapeutic approach to dealing with trust issues for young people
• Give due consideration to the geography of a young person’s placement in relation to their place of origin
• Have due regard for the placement of an individual in a group setting – taking into account the other young people living there
• Promote the participation of young people in community groups and/or activities
• Provide support for young people from staff/carers in participating in groups/activities
• Allow the opportunity for time with friends which doesn’t impinge on family contact
• Organize and implement planned placement moves, over reasonable time scales.

Response of professionals

Young people have rights and should be able to expect that their lives are made better, not worse, by their entry into the care system. Therefore we have a responsibility and a duty to listen to their care experiences and to act on their recommendations for improvement. While some of the recommendations rely on resources and money, many depend on attitudinal and cultural change.

Following the *Lets Face It!* Report, Who Cares? Scotland used the opportunity of the 25th anniversary conference to consult some 130 delegates in order to produce recommendations for practice. The resulting report is seen as an important opportunity to work individually and in partnership to ensure the voices of young people are heard and actively to pursue the provision of improved services (Who Cares? Scotland, 2004).

Attitudes and awareness

In relation to the issue of the stigma attached to young people in care, there appeared to be a consensus that a strategic approach was required to educate the public to change their attitude and behaviour in relation to young people
who are, or have been, in care. It was also felt that the stigma attached to social work and the care system should be challenged. This action should occur at both the local and national level.

Training, education and qualifications

Delegates recognized the important role of on-going training and education in relation to working with young people in care. The need for consistent and accessible training was highlighted; however the requirement for a realistic solution to staff replacement issues and associated costs was acknowledged. It was noted that an integral part of the training process should be an appraisal system which is available to everyone, including temporary staff.

Young people’s lives in care

In considering the overall care experience of young people, a number of underpinning practical measures were identified which would promote positive change. There was recognition of the need for a flexible service which meets the needs of the individual. The necessity of a move towards a more open culture was re-iterated, with a requirement of internal and external monitoring. Delegates identified a number of practical areas for change. They suggested, for example, that there should be:

• a consistent multi-disciplinary approach to confidentiality
• a shared understanding of the UNCRC
• increased resources to meet the needs of young people, particularly those with intensive support needs
• improvement in multi-disciplinary support for young people
• monitoring based on the National Care Standards
• more access to Who Cares? Workers and children’s rights services for young people
• more involvement of young people in recruitment processes
• a planned and positive approach taken to moving on staff who are unsuitable or struggling to cope with their role
• a move towards smaller residential units
• improvement in the quality and standards and the promotion of happier, non-aggressive environments
There was a recognition of the importance of supporting and valuing residential staff. Particular emphasis was placed on team building and the development of individual and team action plans. The difficult and complex role of residential workers and the need to evaluate and potentially reconsider their role was noted. Furthermore, staffing levels, turnover and burnout were areas identified as requiring immediate attention.

The influential role of field social work staff in the lives of young people who are looked after and accommodated was repeatedly referred to. The importance of a partnership approach to working with young people and the provision of a seamless service were areas which require further consideration. There was also a clearly stated need for more early intervention and family work by social work staff.

There was recognition that while both reviews and children’s panels should have the young person participating as central to the process, this is not often realised. It was therefore suggested that both reviews and hearings would benefit from an evaluation of venue and format. The need to see the young person as a whole and not to focus on an isolated incident was highlighted in relation to both of these processes.

There was awareness of the need for a more transparent and effective complaints procedure which is young person friendly. Delegates also suggested that the timescale for dealing with complaints should be reduced with young people provided with clear and consistent feedback.

Young people’s safety in care

Delegates reiterated that the safety of young people must be paramount in relation to policy, practice and services. There was recognition that it is the role of all professionals to be alert to signs indicating that a young person does not feel safe and to treat all concerns and complaints seriously.

The use of restraint prompted the plea that the ultimate goal must be to remove restraint in a structured and systematic way, placing greater emphasis on de-escalation. Risk assessments should incorporate health issues, past experiences and background of the individual young person. Where there are identified issues the young person should be supported with a more therapeutic approach to anger management. It was also noted that young people could be involved in the design of alternative approaches, such as the use of ‘chill out’ rooms.

Delegates acknowledged that there should be a pro-active approach to bullying aimed at reducing the level of risk for young people. Clear information should
be available to young people regarding what supports are available to them and ways in which they can deal with situations. Bullying must be handled with sensitivity at all times and should take account of the young person’s views on confidentiality (child protection issues permitting). It was recognized, however, that staff should also receive specific training on bullying to improve their understanding of the issues and to enable them to provide adequate support and advice to young people. Creative ways of dealing with bullying, for example drama sessions or board games, were considered to be a possible way forward.

There was recognition that mental health can be a frightening issue to deal with and staff and carers would benefit from further information, training and specialist support. This would build confidence in dealing with issues. In acknowledging the stigma attached to mental health, delegates suggested that consideration should be given to the use of language, particularly with young people, suggesting that it could be addressed as ‘how we think and feel’ or ‘emotional and behavioural differences’.

**Young people’s personal lives**

It was seen as key to identify who and what is important to the young person as an individual. All possible steps should be taken to ensure young people are not deprived of their most important relationships and that a holistic view is taken of all aspects of a young person’s life. The importance of treating young people as individuals was once again noted, ensuring that the young person is listened to and their views valued and respected.

A primary aim was considered to be an increase in resources and supports to the family to reduce the risk of young people coming into care. This should include; outreach work in the family home; intensive family support; and coping skills.

More resources and supports should be made available to young people and their families to encourage and maintain contact, with a greater emphasis placed on normality, as far as possible, in family contact situations. Family contact should be regular, flexible and encouraged by staff and carers.

While there was recognition of safety and protection issues, it was suggested that there were a number of measures which could be implemented to improve communication, facilities and opportunities. Therefore it was recommended that clear, fair and realistic boundaries should be provided and explained to young people, while at the same time staff should place more trust in young people.
Delegates suggested the exploration of creative ways to facilitate communication (including safe internet/e-mail access).

**Conclusion**

Will current initiatives lead to improvements? We hope that the *Lets Face It!* reports will be used in a way that keeps the views and opinions of children and young people to the forefront when policy, practice and legislation are being examined. There is little doubt as to what the fundamental issues are. They have been identified by young people over the years and documented in both research and in consultation. It would seem that they are not always the same as the most important areas for immediate change identified by adult planners of services.

Let's face it, we have many lessons to learn from young people in care. Let us look to what could be done in the future. This paper highlights recommendations to improve the life and life chances of young people in care, and how we can look after them better. It suggests custom and practice that needs to change in order to promote a healthier environment and better relationships in residential care. Young people tell us how it is, are we ready to listen?

**References**


