

Evidence for Excellence in Education



# **Executive Summary**

'We should have been helped from day one': a unique perspective from children, families and practitioners

**Findings from LARC5** 

National Foundation for Educational Research (NEER)





# 'We should have been helped from day one': a unique perspective from children, families and practitioners

Claire Easton Emily Lamont Robert Smith Helen Aston

.

Published in September 2013 by the National Foundation for Educational Research, The Mere, Upton Park, Slough, Berkshire SL1 2DQ www.nfer.ac.uk

© 2013 National Foundation for Educational Research Registered Charity No. 313392

ISBN 978-1-908666-81-9

### How to cite this publication:

Easton, C., Lamont, L., Smith, R. and Aston, H. (2013). 'We Should Have Been Helped from Day One': a Unique Perspective From Children, Families and Practitioners. Findings from LARC5. Executive Summary. Slough: NFER.



# **Executive summary**

This summary presents the findings from the fifth round of LARC (Local Authorities Research Consortium), a project led by the National Foundation for Educational Research (NFER) and Research in Practice (RiP). Our report will be of use to anyone with an interest in early intervention; children experiencing neglect; and in improving the ways local authorities and their partners work together to improve outcomes for children, young people and families. The report offers a unique insight into the views of children and parents<sup>1</sup> who have been supported by early intervention services, and others, due to issues of (low level to moderate) child neglect.

For this round of LARC, nine local authorities<sup>2</sup> investigated:

How do we effectively support families with different levels of need across the early intervention spectrum to engage with services within an overall framework of neglect?

The local authorities chose this research topic and carried out their own research, supported by LARC researchers. The research focused on children experiencing the following levels of neglect<sup>3</sup>:

- Level two, related to families where the parent/s mostly met the child's needs.
- Level three, where children had some unmet needs; lived in a family home that lacked routines; had parents with poor awareness of safety issues; and the child received limited interaction and affection.
- Level four, these were families in which adults' needs were put before the child's, and where the child had low nutrition and scarce stimulation.

We did not consider cases where children were at significant risk of harm and should be being supported by statutory services. The data was collected from over 105 practitioners (from education, health, early years settings and authority services) and 40 parents, children and young people.

# Summary of findings

## Defining neglect

Not all authorities had a clear definition or policy in place to support practitioners to define and identify child neglect (except where chronic neglect was evident). Practitioners said they

<sup>&</sup>lt;sup>3</sup> These definitions were adapted from Southampton Local Children's Safeguarding Board's 'Really Useful Guide to Recognising Neglect' (2012).



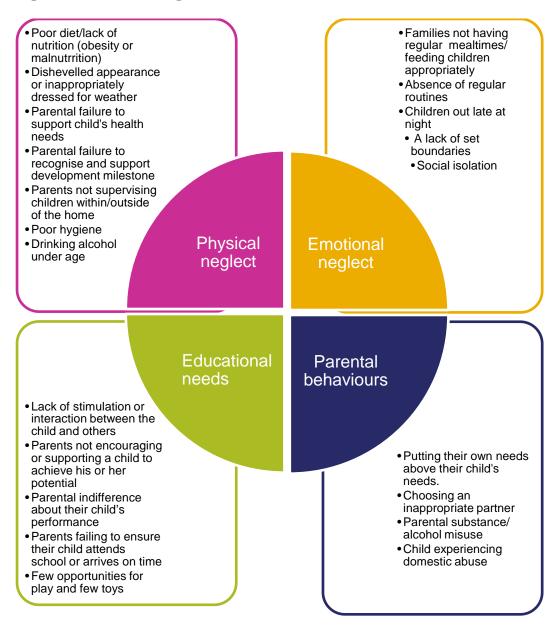
We use the term parents here to refer to a child's primary care giver, who may not be the birth

The LARC5 authorities are: Bracknell Forest Council; Coventry City Council; Hertfordshire County Council; Kent County Council; Portsmouth City Council; Solihull Council; Telford and Wrekin Council; Wolverhampton City Council; and Warwickshire County Council.

used their own professional judgement to identify child neglect and seemed to have a good understanding of the risk factors to be aware of. They noted, however, that defining neglect can often be a 'grey area'. Further, they explained that defining neglect needs an element of 'flexibility' within an early intervention context. It needs to take account of individual family circumstances and lifestyles. Where a child was suspected of suffering from chronic neglect, practitioners explained that child protection and safeguarding procedures would be implemented immediately.

Practitioners defined indicators of neglect under four headings: physical neglect; emotional neglect; educational needs; and parental behaviours. Practitioners recognised that it was not always easy to distinguish between physical and emotional neglect as many issues were inter-related. A summary of practitioner views is presented in Figure 1.

Figure 1 Child neglect risk factors





## Responding to child neglect

Our research shows that the ways in which some authorities and different practitioner groups respond to a child who may be at risk of neglect vary slightly. This finding is applicable across the three levels of neglect. According to practitioner data, some services, within some local areas, are still not engaging with early intervention and prevention processes (such as the Common Assessment Framework or 'CAF') and responding to families' need early enough. Practitioners noted that most help was available to families when they encountered more complex difficulties rather than offering them preventative support through universal services.

Most practitioners felt equipped to respond to families' needs; however a number of unmet training needs were identified. These related to a need for all practitioners to be able to identify a child experiencing neglect; ensuring practitioners assess risk early; and ensuring that, where generalist practitioners are employed, they have the skills and knowledge to offer holistic whole family support (for children from birth to 19). Practitioners valued having training opportunities and the chance for reflective practice and/or networking. They noted that they rarely had the time to undertake such activities, however.

#### Gaps in provision

Practitioners and families noted a number of gaps in provision. Most were not specific to neglect and related more generally to early intervention and preventative advice and support. Many were also applicable across all three levels of neglect. Both practitioners and families felt that more help should be offered to families when they have 'low level' needs to prevent their needs escalating. The gaps identified included, a lack of:

- parenting courses and support (particularly universal parenting support)
- support for families about financial management and budgeting
- access to early mental health support (for parents, children and young people)
- activities or clubs for children and young people
- support for families to attend medical appointments, including a lack of suitable appointment times and locations
- adequate housing support (for example, an overcrowded household or support for 16-18 year olds).

Threshold levels to access some services, as well as long waiting times, also caused difficulties in practitioners meeting the needs of families.

Practitioners gave a number of reasons for the perceived gaps in provision. These related to a lack of resources to offer earlier support; high case loads; welfare cuts resulting in the closure of some early support services; administrative burden; and practitioners having other priorities (such as working with families with higher levels of need).



#### How best can families be supported?

Practitioners and families offered similar insights into the enablers and challenges associated with offering families support. These related to:

- local support services being promoted and advertised in an accessible way to families and practitioners; this would help practitioners to sign-post families to services and may also encourage more families to ask for help earlier
- multi-agency working and information sharing between practitioners and between services; sharing information about families helps practitioners to accurately assess families' needs and to offer more timely and effective support

You should give a leaflet explaining the services and what they can do to help.

**Parent** 

- relationships between practitioners and families, which need to develop over time
  and be built on trust, honesty and openness; families appreciated having support from
  someone they can relate to, whereas unconstructive relationships can lead to families
  disengaging and prevent their future re-engagement with services
- families needing a combination of emotional and practical support to help them
  cope with parenting, their child's behaviour, mental health issues and/or financial
  management; families particularly valued support programmes for parents and
  clubs/activities for children and young people.

We also asked children and young people how they felt best supported. They said they particularly valued having someone to talk to.

Encouragingly, most of the families involved in the research said they felt their family situation had improved as a result of receiving help (note that we did not seek to verify this information). They said they had a more stable family environment; their children were experiencing a more positive school-life; their child's behaviour was better; and mental health issues had improved.

We have no worries. [Child] does as he is told and there is no kicking off.

Parent

Why do some families not engage with services?

Both practitioners and family members observed similar reasons as to why families tend not to engage with services if a child is experiencing neglect. Most of these reasons related to early intervention services in general. Often they mentioned a lack of awareness about the availability of services and misconceptions about some provision (in particular around children's social care and the commonly held misunderstanding that social workers will put children into care if a family asks for help). Families' previous experiences of working with practitioners or services (or that of their extended family or friends) were also seen as having a detrimental impact on willingness to engage. In addition, families and practitioners cited individual family issues that may prevent engagement. These included cognitive or mental health issues, unwillingness to change, fear, pride and laziness.

Practitioners indicated that, because early intervention support is not statutory, they often find it difficult to engage some families if they refuse assistance. They considered whether more could be done to ensure families who needed early help, received it. They did not mention whether this would create additional stigma or barriers to family engagement, however.



## The 'revolving door'

We explored with practitioners what they felt could be done to prevent a family's cycle of dependency on or regular re-engagement with services. Unsurprisingly, practitioners gave similar judgements to those discussed above. They felt that families needed to be offered help earlier and to have a positive relationship with practitioners; and that whole-family holistic assessments and plans needed to be put in place to help tackle underlying issues. They also noted the importance of family engagement and of families recognising that they too, needed to take responsibility for change.

#### Conclusion and recommendations

The LARC5 research shows that practitioners and families share common views about how families can be supported. While the research focussed on early intervention and child neglect, the noted successes to supporting families, the challenges associated with it and suggestions for making improvements are applicable to supporting any family that needs additional help (not only those experiencing neglect).

The data shows that some practitioners would respond to families across all three levels of neglect, while others would not. They felt that most help was available when families encountered more complex difficulties, rather than offering them preventative support through education or universal services. Interestingly, when talking about children experiencing neglect, practitioners talked about the underlying issues whereas families talked about the symptoms of these issues. This may suggest that more could be done to educate families about neglectful behaviours.

While practice varied between practitioner groups and authorities, some sectors continue not to engage with early intervention and prevention according to practitioner interview data. In particular, interviewees mentioned the education sector, general practitioners (GPs) not engaging with the CAF process, and a lack of information sharing.

One of the key factors in ensuring families are supported in a timely and effective way, and so do not enter a cycle of needing support (the 'revolving door'), is to offer early intervention and preventative advice and support. Both practitioners and families agreed that more needed to be done to offer help early.

To overcome current gaps and challenges, practitioners and families offered a number of suggestions. Some would require substantial investment (or system change), others were more practical and should be relatively easy to implement. These related to:

- promoting and advertising early help services more effectively to families and practitioners
- simplifying processes (such as referral route times and the CAF process) and reducing waiting lists
- improving multi-agency working and information sharing
- improving families' knowledge about provision of services for Children in Need and the specialist work of children's social care to help remove the stigma associated with getting help and to allay commonly held misconceptions about child protection and the removal of children from their families



- considering opportunities for offering families peer to peer support within the community (possibly by training parent volunteers to support families in need)
- undertaking whole family holistic assessments and putting support in place for the whole family, recognising the value of non-statutory services in helping statutory services to achieve sustained outcomes for children and young people - supporting families to step down from targeted services and avoid a cycle of dependency (the 'revolving door')
- ensuring frontline staff have core skills to help develop and enhance relationships with families.

Authority representatives noted that being involved in LARC5 had had a positive impact. Some had already made changes to service delivery by applying the lessons learned from the research, while others were making plans to ensure the learning is taken on board.

#### About LARC

LARC, the Local Authorities Research Consortium, was founded by NFER and RiP to support local authorities to develop integrated working through sector-led collaborative research projects. LARC supports local authorities to use and conduct their own research with a view to informing and improving local practice. LARC's key principle is collaboration; working with and for the sector to improve children and families' outcomes. With that in mind, each year the sector chooses the focus for the next round of LARC. <a href="http://www.nfer.ac.uk/research/projects/larc/">http://www.nfer.ac.uk/research/projects/larc/</a> / <a href="mailto:larc@nfer.ac.uk">larc@nfer.ac.uk</a>

#### About NFER

NFER is the UK's largest independent provider of research, assessment and information services for education, training and children's services. <a href="www.nfer.ac.uk">www.nfer.ac.uk</a>.

#### About RiP

RiP is a department within the Dartington Hall Trust's Social Justice programme. It is a collaboration with a network of Partners from the children's sector, which aims to build the capacity for evidence-informed practice in children's services. <a href="https://www.rip.org.uk/">www.rip.org.uk/</a>



NFER provides evidence for excellence through its independence and insights, the breadth of its work, its connections, and a focus on outcomes.

- independent
- insights
- breadth
- connections
- outcomes