

The Children's Commissioner
for England's report on:



Family perspectives on safeguarding and on relationships with children's services

June 2010

A pink, cloud-like speech bubble with a pointed tail pointing downwards and to the left. It contains a quote in white text.

**"Trust is important to
make a partnership.
To understand each
other's needs and
work together"**



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The Office of the Children’s Commissioner commissioned In-Trac Training and Consultancy to carry out this consultation. The interviews were carried out, and initial analysis completed by Jane Wiffin, Anne Patmore and Ushma Patel, associates of In-Trac. The report has been written by Jane Wiffin.

The work was planned with colleagues in C4EO and links to work they commissioned on resistant families.

Thanks go to all those people who made the interviews possible (and who cannot be named for reasons of confidentiality), and those who gave advice and information through the virtual reference group. Above all, thanks must go to the young people and families and the professionals who gave of their time freely and with the aim of improving services for others.

Office of the Children’s Commissioner: Family perspectives on safeguarding and on relationships with children’s services

Preface from the Children's Commissioner for England



This research study was commissioned by the Office of the Children's Commissioner as part of our commitment to disseminate the views and experiences of children and young people. The planning of the research was undertaken with colleagues in the Centre for Excellence and Outcomes (C4EO) who were interested in exploring ideas around resistance from families receiving child protection services and the type of practice which would be most effective.

This research report therefore links to the knowledge review: 'Effective practice to protect children living in 'highly resistant' families', Fauth, R. et al (2010), C4EO. That review identified the different concepts embraced by the term 'resistance' which need further examination. In reflecting on forms of resistance, the review writers address the link between perceived barriers to gaining help and the development of resistance. It is suggested that some apparent resistance may be better understood as resulting from inadequacies in services and in the way they are provided. This is a particularly significant finding for the present study as are the practice issues arising from the mismatches in the perception of needs and problems. A number of practice messages emerge for the 'helpful practitioner'; including confirmation of the need for a greater focus on the child's experience.

It was hoped that the voices of children and young people would be to the fore in the present study. However, within the time available, it proved difficult to find young people prepared to be involved and it is acknowledged that the main focus is upon the experience of other family members. This is a very sensitive area of research: issues of trust are central and it was felt important to try to gain the views of a wider group than those with care experience. A further study of children and young people's experience is planned, with the involvement of young people from the outset, and the messages from this report will provide a good basis for extending the work.

This study addresses the experience and views of those engaged with social work services, with the intention of providing insight into how they perceived the notion of resistance. It proved a contentious topic for the families but the nature of the barriers which for them lay behind the development of reluctance or

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resistance is explored through their own words. It was possible to identify those who felt misunderstood, those in fear of authority and whose previous experience had led to mistrust. It is harder to make contact with those who might have denied risks or evaded real co-operation, with whom work is perhaps most challenging. While there are many negative reflections here, it is also clear that family members appreciated the help of social workers who were open, involved them in unravelling the problems and demonstrated understanding.

The key messages echo and elaborate upon those from the research review:

- The potential there is for a 'stand off' position between service users and professionals concerning problems, needs and services. Perceived failures of understanding by professionals and disagreement about their needs lay behind the family members' perception of resistance. Yet similar feelings were common to both the families and the workers: both groups felt they would be pre-judged and both could feel defensive from the outset
- The powerful and traumatic impact upon young people and adults, particularly at the start, of being involved with the child protection system. The fear of the consequences, the sense of suspicion and mistrust and the formality of the processes are clearly expressed
- The barriers to using services, which the families and young people identified, underline many of the good practice issues addressed in the review. They pointed to fundamental issues of respect and experience of a double standard in behaviour which reinforced powerlessness and stigma. Good support would be undermined by frequent changes of social worker, with consequent changes of plan. Not all the barriers concerned quality of individual practice: frustration with not getting a service sufficiently early led to anger and difficulty for families as did the premature removal of support
- On the positive side, there were clear messages about what was wanted from social workers and the value of workers who understood, cared, were knowledgeable and worked openly. Again there were echoes of similar feelings: both families and young people and social workers valued relationship based practice

The direct reports from young people and family members about

their experience provide rich detail for many of the themes addressed by the review of research. The children and families recognised the pressures which social workers are under and this report is published with full acknowledgement of the challenges they face. There is confirmation here that the quality of service delivery needs to be attended to when resistance is considered and that the fear and lack of trust which is illustrated can be relieved by sound and thoughtful social work practice which is honest about concerns, while based on an empathic understanding of how it feels to be on the receiving end of the child protection system.

A handwritten signature in black ink, appearing to read 'ME Atkinson', with a long, sweeping flourish at the end.

Dr Maggie Atkinson
Children's Commissioner for England



Who are we?

The Office of the Children's Commissioner is a national organisation led by the Children's Commissioner for England, Dr Maggie Atkinson. The Children's Commissioner is a position created by the Children Act 2004.

The Children Act 2004

The Children Act requires the Children's Commissioner for England to be concerned with the five aspects of well-being covered in *Every Child Matters* – the national Government initiative aimed at improving outcomes for all children. It also requires us to have regard to the United Nations Convention on the Rights of the Child (UNCRC). The UNCRC underpins our work and informs which areas and issues our efforts are focused on.

Our vision

Children and young people will actively be involved in shaping all decisions that affect their lives, are supported to achieve their full potential through the provision of appropriate services, and will live in homes and communities where their rights are respected and they are loved, safe and enjoy life.

Our mission

We will use our powers and independence to ensure that the views of children and young people are routinely asked for, listened to and that outcomes for children improve over time. We will do this in partnership with others, by bringing children and young people into the heart of the decision-making process to increase understanding of their best interests.

Our long-term goals

1. Children and young people see significant improvements in their wellbeing and can freely enjoy their rights under the United Nations Convention on the Rights of the Child (UNCRC).
2. Children and young people are more highly valued by adult society.

Policy areas

Safeguarding is one of the Children's Commissioner's six work areas for 2010-2011. These are areas in which we will influence emerging policy and debate.

For more information

Visit our website for everything you need to know about the Children's Commissioner for England, see: www.childrenscommissioner.gov.uk

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1 The purpose of the study



- 1.1** This consultation process sought to give young people and family members who have been through the safeguarding system and worked with social workers the opportunity to provide feedback about their experiences. We also wanted to know what family members think when they are described as “resistant” or “reluctant”, and what lies behind this from their perspective. We were interested in why young people and their family members are sometimes reluctant to take up social work support and what would be more effective ways of engaging them.

Overall we want to make sure that the voices of children, young people and their family members are heard in the current discussion about effective services.

The purpose of this consultation was to:

- enable young people and their family members to share their views and opinions about their lived experiences of safeguarding systems
- obtain ideas from young people and their family members about the ways in which social workers' safeguarding practice could be improved
- understand what makes it difficult for family members to make use of services in the safeguarding context
- consider family members' reluctance towards social work interventions and their views on the idea of “resistance” in the context of safeguarding practice
- ensure that these opinions influence the national safeguarding policy and practice agenda

1.2 The process of consultation

This consultation process was completed within a short period of time. The planning started in December, and the interviews were carried out between January 11 and February 2010, in London, the South West and East Anglia. Consulting with young people and their family members who are reluctant to use services is, by definition, difficult to achieve. All the young people and their family members interviewed were already part of existing networks and connected to service user organisations.

The family members agreed to take part because they trusted the researchers who were known to those existing networks. This issue of trust is important. Many of these young people and family members

have been asked their views before, and they have agreed to be interviewed, even though talking about the difficulties that led them to have contact with services could be both embarrassing and painful. They have agreed to be interviewed with the aim of improving services for others, and perhaps for their children. They told us that they had been disappointed in the past at the lack of impact previous consultations have had.

Four focus groups were held with 19 family members and individual interviews with a total of 16 different people, including five young people. Interviews were held with five professionals and a focus group involved four family conference group organizers. Several further efforts were made to engage a wider group of young people but it proved impossible to establish contact through these means within the time available. (Details of the approaches used are in the appendix). This is therefore a small exploratory study but it is considered that the experiences related here reflect themes which support the messages from the literature review published by C4EO and provide important messages for social workers.

1.3 Confidentiality

The names of all those who were interviewed have been changed to ensure confidentiality, and all young people and their family members received a confidentiality sheet signed by them and the researcher. It was agreed that all information that was shared would be kept confidential, unless a child's or vulnerable adult's welfare was at risk. Those involved are referred to in the report either generally as part of a group of family members or individually as a young person, parent or family member.

2 About the family members and young people



- 2.1** The intention of this report is to promote understanding of the views and experiences of young people and their family members of the child protection system. Many acknowledged their anger and frustration at a system that they considered to be sometimes hostile and oppressive, and these perceptions had an impact on the views they expressed. There was agreement from all the family members about how painful and difficult it was to have professionals in their lives, either to try and get a service and fail, or to have someone questioning the quality of care that they provide to their children. They all agreed that it was this process which has made them critical and at times angry, rather than individual workers. Despite this, all the family members and young people were able to draw on more positive experiences of work with social workers, and were also able to reflect on how their own behaviours and attitudes were not always helpful.
- 2.2** All the family members and young people agreed to take part in the interviews in order to improve child protection services. They all said that they recognised that this was a particularly difficult time to provide child protection services. They could see that the media coverage of Baby Peter and similar cases had made the social worker role more complex, but that it also meant that more family members could be viewed with suspicion. They all raised the importance of social workers protecting children and young people from harm by family members or strangers, but they felt that they themselves had been involved with services because of personal difficulties, rather than the active harming of children, and they felt offended and challenged by the comparison with these very serious cases.
- 2.3** The views of the family members and young people were often influenced by their different experiences of social workers, and there seemed to be four distinct groups in this respect.
- Many of the family members had long term involvement with social workers over many years with extensive experience of child protection services. A number of the family members and young people had been in care themselves, and said that many of their views of social workers had been informed by this experience. These family members said that they had many difficulties to cope with in their lives, including poverty, oppression, social disadvantage and some personal difficulties with ill health and disability.
 - A smaller group was formed of refugees to this country, who had not had any previous contact with social workers before

they came to the UK. This involvement was both shocking and bewildering to them, and they described anger and uncertainty about a system they did not always understand. They had experience of child protection services and more latterly 'child in need' services, and specifically a family group conference service.

- Another group comprised family members of disabled children. This group had the experience of battling for services on behalf of their children, in the context of 'children in need' services, rather than involvement with the child protection system. Their experience is included because they add to an understanding of the barriers to gaining help when it is needed.
- The final group was formed of family members and young people who had a range of experiences in children's services, including the child protection system, but more recently had had a family group conference.

2.4 Despite the differences between the groups, there were similarities in all the family members' experiences of working with social workers, some of which were negative and some positive. We have used what people told us to draw out themes. Where only a few family members said something, we have made that clear. The material was very personal to people, and so was based on their own circumstances. The interviewers tried, in a respectful way, to help the family members see the issues from a number of perspectives, and to be self critical of their responses. As part of this, we asked family members to consider what their contribution was to the engagement with social workers and their managers, both positive and negative. The family members were open to this, as well as being very curious about why their experiences of working with social workers felt so difficult. The family members found it much harder to discuss the concept of resistance, because it was such a contested idea. Many said that they were resistant to social work input, but that this was born out of previous experiences and disappointments. They were able to reflect on their own behaviour, but were reluctant to see themselves as "resistant" as such. They recognised that individual social workers did a hard job, and that most had good intentions towards families and were focused on helping their children, but they were less sure they were focused on helping them, as family members. There was much discussion about what made this stated intention so far from what people experienced day to day, and this is reflected in this report.

2.5 A small group of professionals was also interviewed. They were very keen to contribute to an understanding of both the issue of resistance, and what working in social work was like. They too were challenged to consider the issues from their own perspective, but also that of young people and their family members, and they were very open to doing this. They felt that providing social work services in the current climate was complex and, because of the many child death enquiries, they had to work hard to gain the trust of family members. They also felt pressure to work in partnership with people who they saw to be in very real need, whilst being suspicious about what they might be hiding.

3 What is it like to be in the safeguarding system?



- 3.1 *“When I first had contact, I thought, well they’re professionals, they’ll help me. It was a shock. They’ve become a social police force. They make you feel very small. If you say anything, they twist it. If you get upset, they judge you. They rationalise it. Accuse you. It can be so demeaning. They don’t realise some basic fundamentals about what would make it easier (to) work with them.”*

“I felt violated at the end – like I had been raped – like everything had been taken from me and there was nothing left.”

All of the family members interviewed, except for those of disabled children, had had direct experience of the child protection system. They all said that the experience had been traumatic and difficult, and this had left them feeling vulnerable. These first encounters shaped future feelings about engagement with children’s services, and so were powerful and influential for all those we interviewed.

3.2 On hearing about social work involvement

“We had a letter from the social services on a Friday night. It said they had had an anonymous call and they were coming around to visit on Tuesday at 9.00. Apart from being scared I thought I will be at school then. What am I going to do? What could I do? If I stayed in they would hold not going to the school against me, and if I was not there, they would think I was avoiding them. So many times you think, I can’t win here. And you can’t.”

Many family members talked about the shock they felt when they received a letter from a social work department. They always assumed that this letter meant bad news and agreed that the media portrayal of social workers as either taking children into care for no reason, or being incompetent, as in the Baby Peter enquiry, did not help. For some it reminded them of past encounters and for others it linked to previous experiences of authority figures.

“Those letters they are like ones I have had from the benefits office, telling me I am losing my benefits.”

Those who had never had a social worker before said that the letters and the first contact did nothing to stop their fears, as they did not clarify why someone was coming or what they would do when they got there (see the quote at 3.1 above).

One family had contacted the social work department after receiving a letter saying that they had had an anonymous referral. The parent felt that the person she spoke to had been helpful and appropriately reassuring, providing information about what was likely to happen, and what the purpose of the meeting was.

“Because I had these letters before, I thought, I am going to try and get to the bottom of this. I was so angry. I managed to speak to someone at the office, and she could not tell me exactly why they were coming, but she did say why. She did tell me a bit about what would happen. I felt that she listened to my worries, and that helped.”

3.3 Knowing the system

All the young people and the family members interviewed said that they did not understand the system they had been drawn into. This was despite many of them having two generations with such experience. This lack of knowledge created fear and a sense that anything could happen.

“They (the social workers) are allowed to do whatever they like.”

Most family members felt that they experienced the social work system as unfair and they felt that they were not given a chance.

“In law you’re innocent until proven guilty, in social work it’s the other way around.”

This perceived lack of fairness was compounded by a lack of understanding of their rights within the social work system. Family members said they did not know who they could ask for help and felt it would be inappropriate to ask their social worker, as they assumed they would not help them, either because they wanted to withhold this information or because they were not allowed to discuss it. Either way this led to feelings of suspicion and a lack of control for the family. One parent said:

“Are you allowed to see all the documents written about you?”

3.4 The home visit

“I’d clean the house before she came”.

For the group who had had long term experience of social work, having a social worker visit their home was a difficult one, and they felt that their privacy was invaded.

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This was true for those who had had many social workers: *“They (social workers) need to see what the issues are to understand how it feels to have a constant stream of strangers,”* - as well as for those for whom this was the first experience.

“They just came into my home, and looked around. They looked into the bedrooms and the fridge and the cupboards. Why did they do that? She looked embarrassed but she didn’t say why.”

This was compounded if they felt judged by the person who visited.

“If you’re on benefits you can’t always afford to look good, as they do in the smart suits. How would you feel if someone was coming to your house all official?”

A small group of family members felt that the social workers who visited had a negative attitude before they arrived.

“When social workers walk into your home they talk down to you. They have no respect for the family. We would like to be treated with a little bit of respect so that we feel we can create some sort of a relationship. Instead of distancing themselves from the family they should get to know them. They just read about you in the file, and that’s it. You are no longer a real person. You are a case. And that is how they behave.”

“Some people have terrible attitudes. They come into my house and it’s a tatty dump. Some social workers will walk in and go, ‘oh my god, how can you live like that?’”

Some family members acknowledged that the visits were likely to be stressful for the social workers involved and that they had felt that the social workers were feeling stressed or uncomfortable.

“The stress of the social worker comes across to us.”

“I don’t know what they thought we would do, but she sat by the door, didn’t take her coat off and she would not have a cup of tea.”

3.5 The investigation

Family members said that they were surprised that the social workers were going to carry out an investigation. They considered that this was like the police and that the implications were that they had committed a crime, when their own experience was one of struggling because of their own personal and social circumstances. This mismatch fuelled feelings of distrust in this initial period of involvement.

“When my child was in trouble, they said they were going to investigate me! Many people contact the social services for help. Then they say they’re going to investigate you.”

“Always taking notes. Official letters and phone calls are incredibly stressful. The social worker puts incredible expectations on you, when you already have so much to deal with.”

The initial contact was described as very stressful for family members, and rather than being helpful it had, on the whole, made matters worse rather than better. This was because of their sense that the system was trying to catch them out.

One parent said being in the child protection process was a dehumanising experience.

The family members talked about the social worker asking to see their child alone, and that this felt threatening.

“They tell him not to speak to strangers, yet he has to speak to the stranger social worker. They need to get to know you.”

Family members could understand why social workers would need to see children, and that many children were abused by their family, but they were still unhappy with it because of distrust of social workers, and their perceived lack of respect for family members. They felt that this process of seeing children alone needed more exploration and explanation for it to feel comfortable.

3.6 The case conferences and core group meetings

Those who had been part of the child protection system had attended a number of meetings, but there was general confusion about what kind of meetings they were and what their purpose was.

“I have attended meetings about my son and daughter. There were lots of people there, not sure what it was called, but it was the most intimidating place I have ever been to. They just talked about me.”

Many family members had attended case conferences.

“I’ve been to case conferences. The lies they tell you. They ruin you. It’s like a big bunch of bullies sitting around. They distort the truth to make it the worst it could possibly look. They sit around looking for things. It’s not a crime they [the family members] have committed. All sitting around talking about this one person - it’s devastating for that one person. If they’ve been in care, it’s what they’ve been going through their whole life”.

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Family members said that they did not feel that what was said reflected their experiences, and considered that they were misrepresented. They acknowledged that they may have misunderstood some of what was said, but they were unable to ask for clarification or to challenge.

“A lot of the judgements can be a class issue. In a lot of the big ones, like the case meetings, there can be people who don’t even know the family members or the children.”

This lack of ability to challenge came from both the sense of the authority that professionals had and the anxiety that these meetings caused.

“Many people suffer from nerves. That (the case conference) would push you over the edge. I felt stuck, unable to speak, unable to think at all. It was like being in a dream where it is all going on, but there is nothing you can do about it.”

One young person felt that, during the case conference, her mum did not get much support, and suggested that it would be helpful for the family to be able to have a family friend present, or someone who was on their side.

“... there should have been someone there for my mum ... I don't think she got a lot of support. I know my social worker was there but she was there to act more like a professional than a friend of the family, there to help the family ... I would like somebody there who was a friend of the family to support the family.”

The learning disabled parents in particular said that they had found the case conference confusing.

“The person I met before the conference was very nice and kind, but I did not really understand what she said.”

“I got given a load of typed notes just before the meeting, and told to read them. I did not like to say I could not read, not that much anyway.”

Overall the family members felt that they were sorry that they had attended, as they thought it would have been better not to be there, to listen to *“a lot of difficult stuff about you, whilst everyone looked on, nodding their heads, agreeing with everything. I have never felt so alone. I had gone asking for help and here I was before a jury, and I did not even know what the charge was, well except the charge was that I was a bad parent. About that they were right, but I just wanted help.”*

Some family members were positive about the meetings that took place after the case conference, although they did not know what these were called, or their purpose. (These were core group meetings).

“I went to another meeting after the case conferences, and that was O.K. There were less people there and we talked about what would help me and my six kids. I thought finally someone understands me. Something good came out of it for us. We got help. I could go through all of it, if I knew it would end in help.”

Finally the group who had had long experience of meetings said: “No way would I go to a meeting again. The only people they can get are the ones who haven’t yet gone through the system”.

3.7 The issue of challenge or making a complaint

“I was always told that you couldn’t challenge it, as it’s always used against you.”

For the family members involved with child protection services, the feeling that they could not make a complaint compounded many of their frustrations. This reinforced the sense that the whole system did not operate on a basis of fairness or respect. People were also frightened that if they did try and complain, it would be held against them, and things would get worse for their family.

“You cannot complain, if you do you will get into more trouble with them (the social workers) and so it’s best to say nothing. Anyway no one will listen to you, as you are not a professional.”

Most of the family members did not know how to provide feedback about their experiences, or make a complaint if they felt this was necessary.

3.8 The professionals’ views about the safeguarding system

The social workers and their managers felt under pressure from the image of social work that was presented in the media, an echo of the family members’ perceptions. They understood that this meant that the young people and their family members would have preconceived ideas about what they would be like and what they might do. They felt there were a number of dominant stereotypes: they would either withhold much needed services from hard pressed family members, take the children away without any evidence, or fail to protect those who needed protecting.

This made visiting family members difficult, because social workers were unwelcome before they arrived, which could make them

defensive, and made engagement difficult

The family group conference coordinators thought that social workers in the child protection system were overloaded and so did not always have time to explain things to needy family members, leaving them feeling misled and not respected.

The social workers said they had got to the point where you did not mention to anyone that you were a social worker for fear of abuse. They felt that each encounter held the potential for anger, and possibly violence, and this impacted on their response to family members.

“You just do not know what you are going to face - no one wants to see you, no one is grateful for your services, and many are angry that you are there – that is the starting point.”

They echoed the feelings of being judged; that the family members could judge them on how well the previous social workers had worked with this family.

“The last family I went to see said who the hell are you – another social worker – as bad as the last, and the one before that.”

4 The idea of resistance



4.1 One of the primary purposes of talking to the family members and young people was to try and understand what, in their view, makes people either “resistant to social workers” or “reluctant to use social work services”. This was a controversial question and many family members felt angry at being asked. They acknowledged resistance, and said that there were a number of different causes which need to be understood in order to improve services. The meaning which is given to this notion here is that gained from the family members’ experience. While, from the professional point of view, ‘resistance’ can incorporate denial, avoidance, disguised compliance and hostility, these perceptions could not be addressed as they did not emerge from the views of family members.

Many of the family members had spent years trying to get help, only to have a crisis which led to services they considered inappropriate and oppressive. Other family members felt that their circumstances and problems had not been adequately understood, and therefore were forced to accept what they saw as inappropriate responses to their needs. Trust emerged as a key issue, with present and previous experiences of particular social workers having a powerful influence on accepting help.

Trust was a problem both because of the media representation of social workers and their role and because of family members’ own early traumatic experiences. The family members also said that they were often ashamed of having to have a social worker, and this played a part in their reluctance.

The Baby Peter and Victoria Climbié enquiries influenced many of the family members and young people who considered that social workers came to offer help but that they also conveyed the sense that perhaps this family was hiding something. This led to mistrust on both sides and therefore difficulties with partnership working from the start.

4.2 Self-esteem

The starting point for “resistance” or “reluctance” was the impact that the family members said that using social work services had on their own sense of self esteem. Having a social worker reflected on the family members’ sense of self, and this was uncomfortable. It made it hard to accept any help offered.

“I can remember being mortified that I’d become the sort of person who needed a social worker. I felt abandoned.”

“That I must be a bad mother to need a social worker.”

Others felt judged by the people in their community and wanted to deny the need for a social worker or to hide their involvement.

“There are still people out there who think badly of you because your child has a social worker, as though you’re a bit inadequate.”

Some family members worried about the impact that being involved with social workers might have on their children.

“They say about my son on the estate ‘don’t play with him, he’s got a social worker’.”

One mother described going to a school parents evening and saw a report from her social worker on top of her son’s school report. She did not feel able to challenge it or ask about it, preferring to pretend it did not exist. She felt that the school labelled her son as difficult for being involved with social workers.

“There is a lot of shame in admitting you cannot look after your own children – I mean they’re yours and you should be able to cope – and so it’s hard then to ask for help.”

4.3 Lack of trust in social workers

“Trust is important to make a partnership. To understand each other’s needs and work together.”

A number of family members agreed that they had problems trusting anyone because of the many difficult experiences they had had in their past, such as exploitation, and so this made working with social workers difficult. They felt that for them this issue of trust was never raised, and so could not be openly discussed:

“Talking from personal experience, I think it’s very hard to work with a social worker when you have issues yourself about trusting people.”

4.4 Poor experience of social workers

“If they are rude and disrespectful and you feel judged, you’re not going to invite them in. People need to feel supported and listened to.”

“Poor previous experiences of social work leaving you with negative feelings that go into any new relationship with a new social worker.”

Some of the family members had recently had poor experiences of social work support and this led to them not wanting to accept help.

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They felt they had social workers who were rude and aggressive to them, and they would pretend not to be at home, or deliberately go out when the social worker was due to call. They acknowledged that this was not helpful, but they felt that they had no other way of addressing any concerns they had about the social workers' behaviour. Other family members in the focus groups said that this was not always their experience and that they had encountered helpful and respectful social work staff.

4.5 Previous experience of social work

Within the focus groups and the discussions with family members and young people who had had long term involvement with children's services the experience of being in care was found to be a powerful influence on the ability to accept social work services.

"They call us reluctant, but they make us like that. We are resisting oppression. Fear makes us defensive. I will never have children as both me and my partner have been in care and I think that they (the social workers) will take the child away. I cannot risk it." (Young person)

4.6 Disagreements about the causes of problems

Family members said that the primary reason for being reluctant to use social work services was that social workers had offered help which did not match what they felt they needed.

"People are not stupid. If they feel they benefit they will go to the social services. Most I speak to don't feel they benefit from seeing them. People go to places when they know that they will be supported."

"All they did was do no harm. They were nice, and I was grateful for that. But they didn't help me, didn't point me in the right direction with my son."

Some of the family members agreed that they did "play the system" in order to get services for their children. They accepted the services, because they could see that they needed help, but they did not accept the social workers' understanding of their difficulties, and so this could lead to lies and deception. They said that this was not lying about harm to their children, but lying because they felt that they had been misunderstood by the social workers and could not make them accept this. They connected this to how they felt about themselves, and how they kept their own self esteem intact.

"They want you to give up everything, to come out and say, you are right, I am a bad parent, I have made all the wrong choices, and then they would be happy. But I can't, because I do not think it's true."

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Many family members said that if they disagreed with the social workers' views of their problems they would be described as "in denial" and "lacking the ability to change". They said there was no room to disagree with this and so they rejected the "agency understanding" of their difficulties and the services that went with it. Those who were interviewed said that this was apparent when there were issues facing adults in the family. Social workers seemed reluctant to offer help to people with poor mental health those using alcohol and drugs, and those experiencing domestic abuse. The family members said that they had heard time and again:

"We are here for your children, not for you."



5 Disagreement and resistance

5.1 There were five contexts where disagreements between the social workers and the family members about the nature of problems emerged, and therefore where resistance was likely:

- Domestic abuse
- Parental learning disability
- Poverty
- Working with men
- Race and immigration - being a refugee

There were also two issues which brought to light a different perspective on resistance:

- The idea of family change
- Desperation from lack of services

5.2 Domestic abuse

Three of those interviewed had experienced domestic violence from their partners, and this had led to services which they considered to “*blame them for his behaviour and violence*”. One mother said that she had been asking for help to get rid of her partner who was violent to her, but that the police and social workers had not seemed interested.

“... I never really felt like they offered me any support which I could have taken that would have helped. I asked for help to get away from X, but they didn't believe I could do it, so I didn't get given it.”

An anonymous referral to children's services led to a visit by a duty social worker and a child protection investigation. This mother felt that having spent years asking for support, she suddenly found herself under the spotlight as an uncaring mother. She described one incident where she had expressed uncertainty about leaving the family home because she was worried about losing contact with their friends and her family. She was then told that “*she was reluctant to leave and put the perpetrator before the children*”. (Mother who experienced domestic abuse)

Another mother said that her children came into care because she could not keep her husband away from the family home. She said that she received no help or support to achieve this. He would turn up at the house every day after school and bang on the door. She called the police, but they said they could not respond because a crime had not been committed. Eventually this mother decided that it would be less distressing for her children if she invited her husband in, rather than

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have him shouting on the street. This led to an anonymous referral and eventually a decision that she “was failing to protect her children”.

“They said that I failed to protect them, but what was I supposed to do? I had no help. I had no support, so I had to manage it my way, and of course it was wrong. In fact I thought I was protecting them, you just cannot win.” (Mother who experienced domestic abuse).

The three mothers who had experienced domestic abuse felt that they were treated as if they were responsible for the violence, and it was their fault. They could accept that they had a responsibility to their children, but they did not perceive that any of the social workers understood what it was like to live with violence and abuse, or how men who are domestically abusive behave.

“...but if these social workers know all that kind of stuff about men that abuse people, why can they not accept the fact that that's just what I was caught up in at that time, and try and help me get out of it rather than take my kids away from me, and push me even more into the only thing I had left cos that's what they did, they took the kids away from me, and I had nothing worth fighting for, yeah, and I wasn't strong enough to fight to get them back because he was still around, and they weren't helping me enough ...”

Ultimately, for these three mothers this lack of understanding of the issues, as they saw it, was called “denying the problems” and they felt they were considered as resisting help, rather than wanting the right help. This reinforced the view that they were somehow weak.

5.3 Learning disabled parents

The learning disabled parents who were interviewed said that they were often seen as problems by children’s services social workers, and were told that they found it hard to accept the problems they faced with parenting. These parents felt assumptions were made that they would automatically find it hard to look after children because of their learning disability. They considered that social workers did not see them as individuals, and found it hard to build working relationships with them.

“She finds it hard to talk to me. I think it's because she thinks I am stupid and don't understand, but she will not give me a chance.”

The parents agreed that they often mistrusted social workers and were concerned that they would take their children into care because they were learning disabled.

“They have a view about you, they think just because you find reading and writing hard that you must be a bad parent.”

The learning disabled parents also felt that social workers did not explain their concerns to them in a way that made sense, and that they were the ones who were blamed for miscommunications.

“They think we don’t do these things on purpose, but I did not really understand what they wanted me to do.”

One parent described how she had been sent on a parenting class and none of the other mothers had talked to her. She had found the class difficult to understand, and she felt it did not address the problems she was facing in a way that made sense to her. The final report was sent to her and it said that:

“I had not got on with any of the other women, so they said I had problems with social things. It was not me. It was the group. They could not accept me. And now it was my fault and was put in my notes.”

This same mother was offered short term help for 12 weeks. Some of the help was useful, but it came to an end too quickly for her, because she was struggling to manage the behavioural problems of her 14 year old and the medical needs of her three year old twins. Again she found herself considered to be the problem:

“They said I did not make good enough use of the support I was given and so I had failed the course. They said I could not change, but it was not enough time for me – I needed more time.”

One mother described how she discovered that her new partner was sexually abusing her son. She was horrified and angry, but did not know what to do about it. She confided to a family centre worker, and there was a meeting which led to all her children coming into care. She felt that no one had explained to her what had happened, why it happened and what she could do to keep her children. The explanations were that she *“had sided with the abuser”* but she disagreed with this. She felt that both her partner and social workers had taken advantage of her and in each situation there was nothing she could do about it.

One young person whose mother was learning disabled said that she felt that the social workers were not there for either of them, and didn’t understand what it was like to live on an estate where they were both bullied.

“We had it every day, throwing bricks, calling names, shouting at me. My mum was scared. I was scared, but we got no help, none at all.”
(Young person)

This sense of helplessness was a key theme of all the learning disabled parents’ stories.

5.4 Poverty

The majority of young people and family members who were interviewed said that they lived on a low income and struggled with poverty. For most, this poverty was long term and was at the heart of their difficulties, leading to problems with depression, stress and targeting by people who took advantage of them. It meant that they could not do things with their children. It appeared to the whole group that the impact of poverty on both individuals and family life was not recognised.

“It’s nearly always the poor people who have social worker involvement. The social workers don’t seem to be trained to deal with poverty. They don’t look at the problems created due to poverty, just are they good enough? They don’t put it into perspective.”

In fact many of the young people and family members felt they were blamed for their poverty and considered somehow inferior to others.

“I lived on an estate, a single mum bringing up kids. It’s being held against you forever, these preconceptions. You’re put in categories. You need help, but no one [social workers] offers it”.

There were comments about negative attitudes and a lack of understanding of the family’s needs and circumstances.

“What I didn’t like was the snobbery, sarcasm, superior attitude and putting you down in front of your children. One social worker said to me “you’re having a child again?!” You don’t have the money, food. Why are you doing it?”

“She thought this woman hated poor people.”

There was a view from several of the family members that social workers did not have a good understanding of the impact of poverty and what it meant to people.

“There’s people getting by on £50 a week, always worrying, taking off how much they spend on shopping, travel, etc, lying awake at night worrying about how to give their kids enough food. Then you go to

court and all sorts of people are getting paid. You can't just starve people into care. Why don't they help? They don't want you to mention poverty."

Ultimately this led to responses which family members felt were inappropriate and offensive.

"I remember when she came and she looked in my fridge, in the cupboard. This was recent. She said, 'I can see the kids are well fed.' I said yes, but there's mould all over the wall, and damp in the bedrooms. What are you going to do about that? She said she couldn't do anything, that was housing; she was here to talk about my neglect. So it's ok for us to be neglected?"

5.5 Working with men

A number of fathers, one grandfather, and one male sibling carer took part in the individual interviews and focus groups. Those in the focus group felt strongly that they were treated differently by social workers, because they were men.

The male sibling carer who was 23 had agreed to look after his six siblings after his mother had left. He felt that he was viewed by the social work services as lacking capacity as a parent both because of his age and because he was a man. He described having to get a taxi to school because one of his brothers had turned up there with a dirty jumper, and he was worried that this would get reported to the social worker. He also lived in fear of being late for pick ups at the three different schools his siblings went to in case he was accused of neglect. He felt different standards were imposed upon him. This made him reluctant to accept help and support, which he admitted made life more difficult and stressful.

Another father said that he had received a lot of support from the social worker when he had agreed to take on the care of his children after his wife, from whom he had separated, had developed mental health difficulties. He thought, however, that the social workers were less comfortable working with men, and that it was harder to build relationships, regardless of whether the social worker was a man or a woman.

The grandfather felt he had been marginalised by the social work services, particularly because his own children had been in care. He had to fight hard to get his role recognised, and that his difficulties as a parent were not automatically the same now he was a grandparent. After an assessment he did eventually take on the care of his grandchildren.

“They thought because I had problems in the past, with my own kids, there was nothing I could do for my grandkids. They wanted them in care. I wanted them in the family. I had to fight to get a chance to prove that I had changed. You have to give people a second chance. I know I had to prove it to – I just wanted that chance.” (Grandfather)

5.6 Being a refugee

A number of the family members in the focus groups were refugees to the UK and they had had no previous experience of social work in their countries of origin. They talked of the shock of finding themselves caught up in the child protection system. For some this was like coming into contact with the border authorities:

“I thought this is just like being with those people from the passport place – they behave the same – they treat me like I do not belong here.” (Refugee parent)

These family members said that they had picked up hostility from social workers about their immigration status. This made them reluctant to ask for help, in case they were considered “scroungers”. They agreed that they were sensitive to this as it was an experience they had had in their communities. One father said:

“I think they think I am here illegally or don’t deserve any help, because I did not grow up here.” (Refugee parent)

This group of family members said they were reluctant to talk about their lives, both because of issues of trust, but also because they had had previous traumatic experiences from their past, often at the hands of those in authority. They felt judged by their reluctance to talk, and felt that social workers did not understand why it was difficult.

“I have given up my country, my home, to be here, and I am finding it hard to provide for my children on benefits. They (the social workers) look at me as if I should be grateful for what I have. They judge me for it. They make me feel ashamed. I cannot ask for help. I cannot accept help. I must look after my own family.” (Refugee parent)

Pride was important to these family members, but not asking for help from the host country meant that difficulties got worse. This had led to a number of the family members interviewed being involved in child protection processes.

5.7 The idea of family change

A number of those family members who were part of the focus groups said that resistance came from the idea of “the family” needing to change. Their experience had been that a new partner or family friend had come into their lives and had harmed a child by either sexually abusing them or physically abusing them. They had been unaware that this was happening, yet they felt that they had been held responsible in some way.

“He abused her, but they said I must have known, I must have done something, they did not believe me.”

The assessment that there was a problem for the family to solve, when the family felt that it was an individual that needed help, meant that the whole family, or the other parent, was considered to be resistant to change.

5.8 Desperation from lack of services

For many of the family members their reluctance or resistance grew from having spent years trying to get services for their children. This had become a full-time task for many of the family members of disabled children and led to drastic actions:

“One half term when I had no support for the week, I felt I had to force the issue by ‘doing a bunk’ while my son was out with care workers. I rang the social workers to say I would not be at home when they returned him. The messages left for me were threatening, horrible – you must come back. It was awful. My son went to a children’s home some distance away. No one came to see me while my son was away to talk about why I had taken such action.” (Parent of disabled child)

There was also concern that when family members had been through the child protection system, and social workers were happy that the children’s circumstances had improved, all the services were taken away, regardless of whether the family felt that they needed them or not.

One said: *“They just dropped us, like Dad said, and I don’t feel that was a good decision, because, still now we do every now and then need the support of a social worker.”*

This family needed support after the young people had returned home. The father was left to cope with one young person’s serious criminal behaviour, which he felt ill equipped to do after so long.

Another mother explained how she had approached children's services several times for help with her daughter who was being violent and getting into criminal activity. She called several times and it wasn't until her daughter was arrested that the social workers became involved and offered the family help.

Desperation about needing a service and not being able to get one was a theme which recurred with all the family members. There was a strong sense that they were left to struggle and cope with what they saw as the unmanageable. When it all fell apart, they had child protection services imposed upon them, and they were represented as failures. This made people angry, and they felt their previous requests for services were never mentioned or acknowledged. This left them, as they saw it, labelled as uncaring, neglectful or abusive.

Many who were interviewed acknowledged that there were family members who deliberately misled social workers in order to harm a child, but they felt that all resistance was interpreted in this way.

5.9 What kind of family members do professionals regard as resistant to change?

The practitioners who were interviewed had different views about the meaning and context of resistance. They talked about family members where there were issues about substance misuse, poor mental health and domestic abuse and that these family members were *"harder to engage"*, because their dependency *"gets in the way and they forget you are visiting, or it's not convenient, or they are hiding something"*.

The managers said that many of the family members that are drawn into the child protection system find it hard to acknowledge their problems and the need for change to improve outcomes for their children. They acknowledged that this was often because of adult issues which impacted on children's lives, and family members found it hard to be criticised or labelled as bad or abusive.

They managers were concerned that many vulnerable people were targeted by other adults to gain access to children or to abuse and exploit the adults in a family. This created resistance because these new family members encouraged resistance from all, either through manipulation or fear. The professionals felt that this was difficult to address.

The family group conference coordinators had a different experience of working with family members. They generally felt that although some were initially suspicious, once they had met the coordinator they became engaged in the process. One of the coordinators had said that this had recently changed, and family members had become more angry and hostile.

5.10 What challenges to social work practice does resistance bring?

The team managers and social workers interviewed said that resistance made workers feel powerless and helpless and concerned for children and young people.

“If families won’t let you in – what can you do?”

These professionals said that they wanted to work in partnership with family members, but that this is hard when they hide information or mislead social workers. Social workers and managers said it was hard to work out whether this was what could be expected, given that many family members experience social work services as “oppressive”, or whether this was intended to cover up harm to children, and possibly other adults. The managers felt that supervision and training was necessary to provide an appropriate response and to be clear about the difference between reluctance to use services, and resistance to improving the well-being of children and young people.

When working with resistant families social workers have to “*confront parents with something contentious and major and a challenge to their behaviour or thinking*”. Social work managers said that this can leave social workers open to “*threats, intimidation, abuse and complaints*”. This can lead to a dishonest relationship between the worker and the family, where the worker will say “what the family wants to hear”, which can create a lack of trust and, as a result, “*perpetuates resistance*”.

One practitioner felt that the services offered to families had become too generic and that “*if the actual need [of the family] meets the service, the family are very responsive, but if the need doesn’t meet the service they’re going to have it anyway, hence resistance, because the service offered doesn’t make sense to the family*”.



6 The barriers to using children's social care

6.1 The young people and other family members considered there were a number of barriers to using social work services. This started with a fear of what social workers could do and the amount of power they held. They also said that their own experiences of care or earlier social work support had an impact and accepted that they allowed this to get in the way. The attitudes and approaches of the social worker were important, and the fact that they were overstretched meant that they were sometimes unable to help as was wanted. There was concern about the number of changes in social workers, and how this led to inconsistencies in practice. At the same time, family members felt there were a number of double standards in operation. They found it hard to change their social workers, if they felt they wanted to, and they were expected to attend appointments, arrive on time and do what the plans said. They saw that social workers were allowed to behave differently, which reinforced the sense of power and control held over their lives.

6.2 Fear and uncertainty

A primary barrier for family members to making use of social work help was fear of the power of social work departments. This came from listening to the news, but also from personal experiences and the views they held.

"I was frightened that they would take my kids away."

"I thought they would see me as a bad mother, someone who did not care."

Past experience of being in care was a barrier to receiving social work services.

"I thought they would take my child into care, like they did me, and it would be the same. When I came into care they did all the same things to me that they accused my mum of. They didn't look after me properly, they didn't love me, they moved me around, and I didn't go to school. They said things would be better, but they weren't."

The family members also felt that the social worker held control and power which they could use to help the family, or to behave in ways which were oppressive.

6.3 The attitudes and approaches of individual social workers

All those that were interviewed said that the attitude of the individual social workers allocated to them had caused barriers.

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Many had experienced hostile approaches, when they felt judged and blamed for the difficulties they experienced, in their view unfairly.

“She started off by saying ‘I am going to be honest with you’ and this led to a ten minute look at what was wrong with our family. I was tempted to say ‘I am going to be honest with you’, but you cannot do it, can you? So we all sat there and listened to how bad we were as a family. And secretly, as this was my only power, I thought I am not going to tell you anything.”

There was agreement that honesty was an important characteristic of good social work practice, but that either *“You got too much of it, like it’s in your face”*, or *“They do things behind your back, I didn’t know they would take us to court. They didn’t tell us until the papers arrived”*.

Some family members felt that assumptions were made about their circumstances.

“I am young and black with five children, and a social worker come round and made the assumption that the children all had different fathers. She was then surprised when they didn’t. She just kept putting her foot in it and didn’t even realise it!”

“The last social worker I had said, ‘What’s your mum doing all day, sitting on her arse scrounging the benefits?’” (Young person)

The family members of disabled children felt that they were seen as too pushy and too demanding, and this attitude formed a barrier to working. One mother described telephoning her son’s social worker.

“She sighed when she answered the phone to me – she didn’t want to hear from me, said she was busy, and then didn’t phone me back.”

6.4 Ways of working

In the focus groups there was curiosity about how a social worker should work with a family. Those who had had no previous experience of social work services, particularly those who were recent immigrants to this country, said that every social worker they had seen had done things differently. They thought this individual approach was valuable, but it left them unclear about what to expect in terms of a *“way of working”*.

“I am not sure what they are supposed to do with us, how they are supposed to work.”

One of the barriers identified occurred when social workers worked

primarily with the main carer of the children, and did not seem interested in the wider family. For those who had recently had a family group conference, this involvement of the wider family as a resource had been extremely helpful, and they reflected back on previous involvement with the child protection system, where they had felt alone.

“I did not know that you could invite your granny to meetings, that would have helped me, but I just didn’t know.”

For those in the focus groups who had a long experience of living in poverty, the perceived failure to understand the impact of this on family life was a barrier to working with social work services. This group felt that their poverty was held against them, as if it was a personal failing.

“One (social worker) said to me why don’t you just get a job, that will help with your money problems.”

“My social worker came on a Friday. With my kids, first the cakes went, then the fruit. By the time they came all that was left was the pasta, the baked beans and the leftovers. I said, ‘Do me favour, come on a Monday, when everything is there.’ But they never did.”

Many of the family members said that the social workers who worked with them did not understand what life was like for the people they worked with and this lack of empathy meant that they often applied “text book” solutions to “people’s lived experiences”. This applied to such issues as depression.

One mother said that she had been depressed after the birth of her first child, who had been conceived as a result of domestic violence. The social worker had been supportive about the depression, but had considered it as a response to new motherhood, and had not made time to talk about this mother’s early experiences of physical abuse and her partner’s violent behaviours.

“It was like she had a script. New mother. Bound to be depressed. No time to talk.”

Many of the family members interviewed felt that there was an emphasis on assessment, but no services followed from this. They could not see the point of telling their story to someone new every time when little came from it in the way of help or support.

“I have had loads of those assessments, you are asked the same questions, over and over, and it leads nowhere. And then out of the blue you are asked to attend a case conference. What’s that all about?”

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6.5 Not being available or reliable

All the family members and young people described social workers as being very busy. They were sympathetic:

"I think they have too much to do and there are not enough social workers."

For many family members this led to "not following things through" and cancelling appointments. The cancellation of appointments seemed particularly unfair, given the need for help and support, but also because people said they had been told they were not allowed to cancel appointments "even if it was a matter of life and death".

"I said to the social worker 'I am too down today, can we make the appointment for another time?', and she said no, I have to come today, it's the rules."

One young person described feeling that her social worker did not have time to listen to her.

"You would say to them about something that's happening or how you feel and they would always seem in a rush to get away or feel like you have to hurry the conversation."

Comments were made about social workers frequently arriving late, saying that they had had a crisis to deal with. This left people feeling that they were not important, and a young person said:

"How does she think her (the social worker's) constant lateness makes me feel? Worthless? Unimportant? Yes. If I am late – well, that's different. They do not understand then."

Many of the family members and one young person felt that the emphasis was upon paper work rather than face to face or practical support. One young person described how her social worker often cancelled her appointment, saying: "I have some paperwork to do".

However, this young person felt

"It was always the same excuse about paper work and sometimes it did feel like it was an excuse and not a reason."

Many felt that the social workers did not carry out the tasks they were supposed to and that the lack of time made them unreliable.

"She (the social worker) assured me she'd deal with it – nothing happened. I phoned her, (was) told she was off sick. People should ring and let you know."

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“She said she would make the referral for him. But the next time I saw her she still hadn’t done it. This went on for weeks and weeks.”

This too felt like a double standard. Many family members talked about being criticised for not doing all the tasks on a child protection plan.

“We were told that they must do everything they told us to do and if we didn’t we were not thinking about our kids. Yet it was impossible to do it all. It just depressed me to look at it all.”

The unreliability and changes they experienced meant that a number of people turned up to meetings expecting someone who they knew would be there, only to find there was a new person.

“I went to the review meeting. When I got there my social worker was off sick, and so the duty social worker came instead. He came to the meeting without having read my son’s file.”

6.6 Changes of social worker

A major barrier to working with social work departments was the number of changes of social worker that some people had had.

“I’ve had about 14 social workers. Out of them I’ve only had two decent social workers.”

This made it hard to make and maintain relationships.

“Just when you got to know her, she’s gone and there’s a new one. I had to start all over again. I expect this one will be gone soon.”

The family members said they had to tell their stories all over again to a new person.

“I am sick of telling new people the same old things.”

The change in social workers also led to inconsistencies in social work practice.

“My social worker had to go on leave after a year. Someone else took over. Two of my girls went into long-term foster care. The first social worker set it up for me to see the children in the summer holidays. The next put a block on it. When she left and another one came, because of what she had written, she had to follow it and so we weren’t allowed to see the girls. It actually took the old social worker screaming at the other social worker to say they have a right to see their girls in the foster home.”

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"I have had seven social workers in the last 18 months, and every time they change them the new person doesn't know what's going on, and they've got to read through all the files, they get things wrong or there's stuff, that one of the social worker would have said right we'll do this, and by the time it's moved on to another one, the stuff that they said they were going to do has got kind of lost and I've had to prompt them and say well, I thought you were doing this for me, I thought you were going to do that for me. I mean my new one, she said, well I didn't know about that, and I'll see what I can do about that, I think it's ridiculous really."

"At the start you think they will help you. However, they tell you to do things a certain way. Then when you do what they suggested, they get replaced by someone else who tells you that you shouldn't do that. Then they take you to court."

6.7 Not being able to change your social worker

Family members and young people talked about not being able to change their social worker as a barrier to working with social work departments.

The sibling carer for six children described how his social worker behaved *"like a mother to me, because of her age and experience, and this was not helpful to me. As a young man I needed a different sort of support. But the team manager said no, you cannot change. It's important to have the same person. But he did not explain why."*

Family members said there were times where there was a *"clash of personalities"* or *"she (the social worker) did not like me."*

One parent described how a male social worker had been allocated to her daughter who had been sexually abused by her ex-partner and was terrified of men. This mother had specifically asked for a female social worker to be allocated.

"They just don't listen. They don't want to hear what you say."

This issue puzzled the families, and they felt they never got a clear answer about it and so were left with the conclusion that:

"It's another way of controlling us."

"They can leave and never come back, and you might never know, but as soon as you say, this is not working, I want someone new, they don't like it."

6.8 Resources and systems issues

All the family members and young people agreed that many of the barriers they experienced were created by the child protection system and social work organisations.

“I have worked with many social workers. They often have good intentions. It’s the system. If I was a social worker I don’t know what I would do. You would be in a big mess if you don’t follow the system. Many social workers we have worked with have just left. You can’t be good in a bad system.”

Most understood that there were insufficient resources, and to some extent accepted this was beyond the worker’s or even the agency’s control:

“It’s not adequately resourced.”

Family members did think that too much emphasis was placed on keeping them out of the system, by changing the criteria by which people could get a service. This they saw as an organisational issue, over which their own social worker had little control.

“Now because of the funding crisis the chances of accessing anything are so slim. Eligibility criteria have changed again.”

For others this led to inappropriate services.

“They can’t offer you what you need, and they know that, so they offer you something you don’t want and in the end you take it because they’re desperate to help you. You take it even though it’s not what you need. You feel you’ve been awkward if you don’t take it. You’re frightened they’ll put down that you’ve been offered such and such and turned it down.”

“The real need you had wasn’t available so they’ll offer you an alternative that isn’t really suitable.”

6.9 Professionals’ views on the barriers to using services

The professionals who were interviewed agreed with many of the barriers raised by family members. They felt overwhelmed and overworked and this often led to appointments having to be rescheduled. They also felt that paperwork and computer systems got in the way of contact with families and making a relationship with them. This was particularly hard when children and young people missed out and social workers and their managers felt that they had little time to spend with young people. They acknowledged that fear got in the way

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of good relationships, and they felt they did their best to address this.

There was general agreement that fear, and specifically the fear of social workers, had a big impact. They said they worked hard to address this with families, reminding them that their primary role was to keep children with their family unless it was unsafe to do so.

The managers agreed that many departments took the stance that family members should not change social workers. It was hard to get a clear picture as to why this was the case. Some people said it was to do with maintaining relationships, and others that people wanted to change when they did not agree with what the social worker told them, and it was felt that to agree would be collusive.

7 What style of social work practice with children and families is most likely to result in positive engagement?



7.1 In addition to seeking feedback on the safeguarding system and gaining the views of young people and family members on the notion of 'resistance' and perceived reluctance to take up social work support, the consultation included their views as to more effective ways of engaging them.

All the family members and young people were very clear about what they wanted from social workers and they could provide many examples of good practice that they had experienced. They were clear that the characteristics of the individual social worker were the most important issue for them, alongside having someone who understood the problems the family were experiencing.

7.2 Demonstrating respect

The family members and young people commented that many social workers had said that they would respect them and treat them fairly, but they wanted this to be demonstrated in their actions, not just in words.

"They might say, we respect you, but then they don't listen." (Young person)

"It works best for me when someone respects you, encourages you and has faith in you. My social worker did and it really helped."

"I had this social worker who came to my house. She asked me if there was anything she needed to do to make me feel comfortable? Like take her shoes off. She even asked me if it was convenient for her to come. She then said 'please tell me, don't tell me what you think I want to hear. I want to hear what you think'."

Learning disabled parents also wanted to be treated in a respectful way, without their social workers assuming they couldn't do anything.

"She worked on what we could do, not what we couldn't do." (Learning disabled parent)

Other parents said that they had good support from their social worker, who had gone to a lot of effort to communicate in ways that made sense to the parents.

“She really made an effort, made the reports and stuff understandable to me”. (Learning disabled parent)

7.3 Understanding the barriers

Those involved in this study thought it was important for social workers to voice potential fears that people might have about having a social worker. They felt that this had to come from the social worker, because they held the power.

“She said to me ‘what is your experience of social workers? I know you were in care. Tell me about it’. That helped me. She encouraged me to tell her the bad things as well as the good. I think it helped us, you know.” (Young person)

“She talked to me about my housing, my benefits, what I could do about it. This was the first thing and I really appreciated it.”

7.4 Working in partnership

Partnership working was a phrase very familiar to the family members and young people and was considered very important. Many said they were not sure what it meant, but they could recall times when they had experienced working in partnership.

“The social worker who came to the family group conference was great. She had prepared information to share with me and my family. She had it written on large pieces of paper and with not too many words. We all understood it. She had also asked me what I wanted to say, and we had put something together, and she said, you go first.” (Learning disabled parent)

For the learning disabled family members, partnership included someone checking out whether a parent could read or write and sending information that was accessible. It also meant having someone who was prepared to be criticised.

“She asked me in what format I would like the report. She had sent it to me like she always did. Lots of words I could not understand. She asked me if it was OK. I didn’t say anything. And she said, it’s not right is it? That was the first time she had admitted she had done something wrong.” (Learning disabled parent)

Women who experienced domestic abuse wanted someone who did not see them as weak and vulnerable, incapable of making any decisions.

“It took some time, but I think finally she understood. I was making

choices, weighing up the options. Thinking about what was safe for my children. She seemed to stop seeing me as this battered woman, and moved to thinking I was someone who she could work with. I don't know what made the difference, but it was great. It meant that we could work together."

7.5 Social workers who care

The family members had many examples of social workers who they considered had cared, who were not just doing a job but were interested in the people with whom they worked.

"She cared you know. I was not just a case, but a person. It was something about her. I don't know. We had our ups and downs, and she could get cross, but I knew that she cared, and I kept coming back to that."

The young person looking after his brothers described a social work assistant coming to the house and praising him for what he was doing for his six brothers and sisters.

"It was great. She said you are doing a fantastic job. You are so young. You have your own life. No one had praised me before. They just picked holes in what I said."

One young person described their social worker as

"a person who comes in, finds out the facts and the effect it's having on the family and tries their best to make things right, to the best of their abilities, because they care."

7.6 Good communication and being open and honest

Good communication and being kept informed was seen as essential for positive engagement by the family members, young people and practitioners interviewed.

"Where it's effective is where people have good communication."

One family said: *"What was positive about our experience is that we had all the information together and if people wanted to say bad things, they said the bad things there and if they wanted to say good things, they said them, because we were all talking to each other ..."*

Many mentioned that it made a difference when they got information in advance.

"We have been to lots of case conferences, but we always got the

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report when we arrived. We were already nervous, and then we had this report to read. It was so much better when we got the report the week before the meeting. We could take it all in, understand what they were worried about. We didn't necessarily agree with it, but at least we were prepared."

Honesty was also considered to be important. Many said that they had had social workers who had been "straight talkers" which amounted to disrespect and a "telling off". They appreciated it when social workers tried to be straight with them, but also considered their feelings and gave them the chance to think about what was being said.

Those who had attended the family group conferences had been amazed at how powerful it had been to have time alone with their family to consider what had been said. They acknowledged that this was scary, but *"hearing difficult news, and having someone sit so close to you, seeing what you will do, wondering whether you are going to get angry, well it makes it hard to think."*

Practitioners also spoke about *"honesty in the relationship between the worker and the family"* and building a trusting relationship by being open and honest.

7.7 Knowledge and expertise and access to resources

The family members said they wanted someone who was well trained and knew what they were doing. They had little experience of their social worker being clear about why they did what they did, and this bothered them.

"They just say, 'it's in the best interest of the child', but nothing else. If you were at the doctors they at least say that we are using this because we think it will help."

They wanted a sense of the worker's expertise.

"One social worker got me some information about autism. It helped, it was useful. Another got me something about ADHD, this meant they were listening but also using their heads."

For others, access to resources was a key skill of the social worker that made engagement possible.

"I just wanted to know what was available. I know it's hard and there are no resources, but they are why we are here. What are we doing here? It's so frustrating. It makes me so angry." (Parent of disabled child)

One of the mothers who had experienced domestic abuse, said:

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“She helped me get to a refuge, she sorted out my benefits, got me a grant for uniform. It was a real help. She supported me. In practical terms. Then we could sit down and think what it all meant. For me. For the kids. I would not have been able to do that if she had not done the practical stuff first.”

One of the refugee fathers said that his social worker had helped him with practical things, first and foremost.

“He started with the practical things. What we needed to get going. He then moved on to parenting classes, and then me talking about my ex wife. That was exactly right for me.”

7.8 Developing relationships

“I have a good relationship with my son’s social worker. She’s hands on with him. If I have a problem, she listens to it.”

“It’s all about relationships. We are talking about dealing with people, with problems, with painful stuff. You have to know someone...trust them. They must be reliable and be there for you, if you are going to be able to talk about the things you don’t want to. The things that scare you.”

For the practitioners, relationships were also important. They felt that, given the short term nature of the work and a system where families were moved on when an assessment was finished, they did not always have time to achieve this. They also felt that they did not always have the time to give to this.

8 How can the services and structures within children's social care be organised to maximise the likelihood of engagement?



8.1 Family members and young people found it difficult generally to say how children's social care and the children safeguarding system could be changed. Many said the system 'was as it was' – meaning it was unchangeable - and those who had been in care, and the families who had had three generations of contact, all felt that it changed very little over time.

Many family members were clear about the key elements of a good system, based on both their positive and negative experiences of social work practice.

8.2 Family focused services

Many of the family members felt that services should have a "family focus". This meant understanding the problems of all family members and having access to both adults' and children's services. They were clear that issues such as domestic abuse, mental ill health, disability and alcohol and drug problems had an impact on all their lives, and the lives of their children. The current arrangements separate out the response to these issues, and so there was a lack of what they described as "whole family approaches".

"If you help the parent, you help the child!" (Family member)

8.3 A more informal approach

A number of the family members and young people said that services were too formal. They wanted there to be a more informal approach. This linked to the issues about relationship, and having social workers who could work respectfully with those who had learning disabilities or who had experienced poverty and discrimination. There was recognition that many family members had experiences of power and authority figures in their lives which were not always helpful.

"He was just too posh. That was it really. He looked uncomfortable in my house. My mum was in service and it was like someone from that household come to see me. I thought social workers were meant to be more down to earth than that."

"Instead of behaving like a professional, behave like a supporter/friend, because that's how I see the social worker, they come and work with the family and become part of the family in some ways, or more like a family friend ..." (Young person)

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8.4 Separating support work from the child protection process

Many family members said they could not see how the same social worker could investigate abuse, and then be the one to provide support to everyone. They thought there was a need to separate out these different functions.

“The support worker should be separated from the child protection side of things. How can you trust someone who can penalise you for telling you the truth? The social workers are like the police. They shouldn’t be. There should be child protection police. Social workers shouldn’t have to fill this role.”

8.5 Listening to family members

People said that services should hear from families about what services would be helpful, and have processes for feedback.

“Need to be more open to listening and having processes for family members to make representations themselves about what services would help them. Open to negotiation, not simply having rigid rules and criteria that have to be stuck to whatever the circumstances.”

“Listening to families and what they understand to be their need, what services, support they think would help them.”

8.6 Family Group Conferences

The family members interviewed who had been through a family group conference spoke very positively about this process, and in particular the opportunity it gave them and their family to talk to and understand each other.

“It was like a breath of fresh air to me. It was us making the decisions, with our family, stumbling along.”

One practitioner, a team manager of a community based team, also spoke of family group conferences as being “very successful”.

8.7 Giving practical support

A number of family members talked about the importance of practical support and how useful it would have been at particular times to help them with their children. Two of the families were at a stage of transition, moving into new homes and with their children being returned to live with them. Both felt that the children were returned to them before they were practically prepared for them to come home.

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Practitioners also spoke about practical support and how sometimes this is the very thing that families need: *“Practical things help, often financial, because that is fundamentally their problem.”*

Practitioners of a community based project described a model of intervention which engaged the young people in support activities and peer groups.

“This enables us (the practitioners) to have regular contact with the family and build a relationship with them. Once the family see how the service is helping the young people and what they are getting out of it, the families are then more open to other interventions and working towards change.”

8.8 Services which are not crisis led

Many family members and young people had difficulties accessing services until a crisis occurred. All said they wanted services at an earlier stage in children’s lives.

“...a more timely service, where families are taken seriously when they are calling out for support, and not leave intervention until it gets to crisis point.”

“Don’t leave families.”

8.9 Providing advocacy

The family members who had experienced the child protection system in its entirety felt that advocacy was important. This was particularly so for those who were themselves vulnerable but all said that it was hard to represent yourself when you felt under pressure.

“I needed someone to come with me to the conference. I couldn’t remember what happened at the meeting.”

8.10 Local and accessible services

Many of the family members had experienced services which had moved from the local area to a central location which was inaccessible to them. This made seeking help and support more difficult and getting hold of social workers more complex.

They all felt that there should be local, accessible services:

“The social work department has moved to the town hall, which is a large office block. There are loads of other council offices there, some are for printing, council tax. We all have to wait in the same place. It’s mad.”

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9 Conclusions and messages from this research



9.1 This report has tried to represent the views and experiences of young people and their families who have been through the child protection system and have been in contact with social work services. We are grateful for the honesty and openness that they brought to this consultation. It is regrettable that we were not able to include the views of many children, which makes the report seem overly adult focused.

Much of what was said was sad and disappointing. While those who were consulted had the opportunity to provide positive experiences, their negative experiences outweighed the good, and this is reflected in the report. These young people and family members were keen to highlight the impact of wider systems, and particularly the media and cuts in public spending, on social workers and their organisations. They were sympathetic to the difficulties of the role, and could understand many of the problems that arose.

We are also grateful to the professionals who gave freely of their overstretched time. They were all extremely sensitive to the needs of the young people and the family members to whom they provided a service. They, like the families, were honest and self critical and keen to explore what were the issues facing those to whom they provided a service.

9.2 The impact of involvement with children's safeguarding services

The impact of having a social worker in your life is intensely personal. Individuals felt the stigma and shock of it, and worried that it reflected upon them as people. This fed into already existing feelings of low self esteem. These concerns were compounded by images of social workers as all powerful, and able to make decisions which they are, in reality, not able to make. People talked about fear, which was again compounded by most not knowing the system they were in and not knowing what their rights were, or who to ask. For families where there was domestic abuse, parental learning disability, child and parental disability, refugee status, poor mental health and drug and alcohol problems, there was even greater uncertainty. This consultation highlights how important it is that social workers and managers understand the impact of these experiences and are knowledgeable about effective responses. Social work training and supervision needs to take account of the impact of poverty on children and family in the child protection process so that this understanding can inform the work with families.

The views expressed here point to the importance of young people and other family members being provided with information about the child protection system and their legal rights within it. They need to be clear as to how to provide feedback on their experiences before this leads to a complaint but also understand and be reassured about the complaints process. Among these issues is whether a change of social worker can be requested and what will be done with such a request. In general much could be learned from feedback on children and families' experiences of the child protection system and ways of facilitating this are needed.

9.3 Understanding resistance

The concept of resistance was explored in some detail with the groups involved in this study. It is clear that resistance to social work, and reluctance to accept social workers' analyses, is a multilayered and complex process. An understanding is required of people's personal response to social workers, and the impact of feeling shame and stigma. It also requires an understanding of the different circumstances of family members. Some come with a long history of social work involvement, others have no such experience and these groups require different responses. In reflecting on the meaning of resistance, those involved in this study did acknowledge that their own past experience had led to mistrust and that this contributed to difficulties in the relationships with social workers.

At the heart of the issue of resistance was the family members' belief that the social worker had not understood their problems in the way that they themselves understood them. There seemed to be some fundamental differences in the analysis of the key issues for family members which needed to be understood in the context both of assessments and of services. The issues of poverty, domestic abuse, parental learning disability and the infiltration of family members by adults intent on harm, stand out. The concept of family resistance needs further scrutiny, given the experiences described here. The messages are that family members, including children, need to be engaged in a process of defining their own difficulties, and in thinking about agreed solutions to the difficulties they face.

The current "think family" agenda fits well with family members' views of what is helpful: that agencies see the family as a whole and that there is a good connection between children and adult services. They also wanted services which were local, not too formal, provided practical solutions and involved family members as part of the decision making process. From their experience, short term solutions were not always helpful and need to be considered in the context of family circumstances.

9.4 Relationships and trust

Many family members felt there were a number of instances of double standards that impacted on their ability to trust the system and to trust social workers. They experienced many changes of social workers, which impacted on relationships and consistency of approach. They were not able, on the whole, to ask successfully for a change of social worker. They experienced unreliability with overstretched social workers, tasks not completed, information not being available until the last moment, social workers being late or not arriving at all, and inflexibility in appointments. Yet they were expected to be available when necessary, to be on time, and to complete all tasks. The potential double standard between what social workers feel that they can deliver and what social work services expect from family members needs to be addressed in practice.

What worried young people and family members most were the attitudes of some individual social workers. They felt dismissed, treated badly or oppressed by some of the professionals with whom they came into contact. They thought the recent case of Baby Peter influenced the approach of social workers who came to their home. They suspected the social worker would be thinking that they might be potential abusers, making relationships and trust more difficult. They recognised as a group that social workers also have to deal with people who are violent, aggressive and deceitful, and could see that this was complex work.

What young people and their family members said was that the personal attributes of social workers were more important than the agency or work role. They wanted social workers with the basic skills – listening, supporting, advocating, and keeping in touch. They wanted social workers who were knowledgeable and who could access resources. The centrality for children and families of relationship based practice requires support through organisational structure and practice.

The positive messages which the family members relayed about social workers indicate how much they valued social workers who were open, understanding and conveyed that they cared. This is difficult and challenging work in the safeguarding context and social workers themselves need support if they are to sustain confidence in their judgement and skill.

Appendix

Methodology

1 Overview



The planning of the interviews of the families and young people was undertaken over a tight timescale. The researchers were successful in engaging with established groups of parents and, through colleagues, in being connected to some individual families. These were all families who had had previous experience of providing feedback around their experiences. It proved more difficult to engage with many young people, although some helpful links were made.

Initially an established service user organisation was approached which has well established groups of service users and young people who have been in the child protection system. They organised two focus groups around the concept of resistance to social work and some individual interviews with family members. The groups and individuals were provided with an information sheet about the focus of the interviews and the questions were sent as a guide to discussion. These questions focused on the concept of resistance to social work input and more generally people's experience of the social work system, and their views about what would make an effective safeguarding system.

A number of service user groups were also approached which have developed around Family Group Conferencing, and they were also able to organise a focus group in London, and some individual interviews in a rural community. Again they were provided with an information sheet and questions. Contact was made with some established groups of parents of disabled children with whom individual interviews were set up and they were provided with an information sheet and questions. A national young people's advocacy organisation was approached, which was not able to arrange any interviews in the time requested but was keen to be involved in the future. A number of local authorities were approached to identify young people and families who were initially resistant and who are now connecting well with services. This was unsuccessful, but from these contacts a number of social work managers were interviewed.

A Facebook page was set up and engaged with a number of anti-social work blogs, in order to communicate with family members who were particularly angry, and not engaged with other service user groups. This proved unsuccessful.

2 Processes

Focus Groups - these were of two and half hours duration

- Five mothers and one father - all white/British, based in a city and a shire community
- Four mothers and one father and one grandfather – white British, white European, black Caribbean, all based in London
- Two fathers, one sibling carer and one mother – all black and based in a city
- Three learning disabled mothers, white British and living in a rural community

Individual interviews – these were of approximately an hour and a half duration

- Six individual interviews with mothers, all white British, living in city and shire communities
- Three young people (two boys and a girl), one black African and two white British, living in the city
- Four mothers of disabled children, all white British, living in shire communities
- One father and two sons, white British, living in a rural community

Interviews with professionals

- Individual interviews with three social work managers – two men and one woman, ethnicity not established, and working in rural communities
- Individual interview with one participation officer, male, white British and working in a rural community
- Individual interview with one educational psychologist, white British, working in a shire authority
- One focus group of four black female family group conference coordinators working in a city community

Who was not consulted?

- It was not possible to engage with any groups of children and young people because of the time scales for reporting. This is a significant gap for this piece of work
- It was not possible to set up a consultation process with disabled children because of the short time-scales, and this is also an important gap
- A residential family centre had hoped to organise a focus group

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of young people and their family members who were very currently engaged in the safeguarding system, but this did not happen

- In order to engage with young people and family members who were not in contact with any existing service user groups, two strategies were tried:
 - a) A Facebook page was set up and messages posted on a number of sites/blogs. These generated a small amount of interest, but more time would have been necessary to engage this group who used the web to talk about their grievances. This approach could be used in future consultations
 - b) Three social work departments were approached with a request to ask the family members who were currently receiving a service to be interviewed. This would have meant that family members and their social workers could be interviewed about the same issues. All the departments said that their current workloads meant that they could not take part

- 3 The above indicates both the limitations of the research and the difficulties involved in this kind and length of study: There are issues of trust between children and researchers which must be addressed and those whose experience may be most helpful to the understanding of work with complex families will not be easily found.